Medicare drug coverage (Part D)

Medicare also offers drug coverage for everyone with Medicare, generally for an additional cost (premium). This covers immunosuppressive and oral-only drugs, but only if Part B doesn’t cover them. To get drug coverage for your child, they must have Part A or Part B, and join a Medicare drug plan during an enrollment period. These plans are run by private insurance companies or other companies approved by Medicare. Each plan can vary in cost and drugs covered.

If your child has a Medicare Advantage Plan with drug coverage, they’ll get drug coverage through their plan, and can’t join a separate drug plan.

When Medicare coverage ends

If your child gets Medicare because of permanent kidney failure and doesn’t qualify for Medicare for another reason, their Medicare coverage will end:
• 12 months after the last month of dialysis treatments
• 36 months after the month of a kidney transplant

Medicare coverage will resume if your child meets certain conditions.

Note: Medicare offers a benefit that helps pay for your child’s immunosuppressive drugs beyond 36 months, if they don’t have certain types of other health coverage. This benefit only covers immunosuppressive drugs and no other items or services. It isn’t a substitute for full health coverage. Visit Medicare.gov/basics/end-stage-renal-disease to learn more.

What you pay (for your child)

Generally, Part A pays for inpatient hospital services, and you pay a one-time yearly deductible.

For Part B services, Medicare generally pays 80% of the Medicare-approved amount, after you pay the Part B yearly deductible. You pay the remaining 20% coinsurance. This is in addition to the Part B monthly premium. If your child has other health coverage, the costs may be different.

For dialysis services covered under Part B, the amount you may pay varies based on your child’s age and the type of dialysis they need.

If your child is in a Medicare Advantage Plan, the costs may be different. Read the plan materials or contact the plan to get cost information.

Other ways to pay health care costs

In addition to Medicare, your state may have programs that help cover your child’s health care costs. Visit Medicare.gov/talk-to-someone, or call 1-800-MEDICARE (1-800-633-4227) to get the phone number for your State Medical Assistance (Medicaid). TTY users can call 1-877-486-2048.

You have the right to get Medicare information in an accessible format, like large print, braille, or audio. You also have the right to file a complaint if you feel you’ve been discriminated against. Visit Medicare.gov/about-us/accessibility-nondiscrimination-notice, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

Know your rights

If your child has Medicare, they have certain guaranteed rights to help protect them. One of these is the right to a process for appealing decisions about health care payment or services. Whether they have Original Medicare or a Medicare Advantage Plan, they have the right to file appeals and grievances. ESRD Networks and State Survey Agencies work together to help you with complaints (grievances) about your child’s dialysis or kidney transplant care.

Get more information

Visit Medicare.gov, or call 1-800-MEDICARE (1-800-633-4227) to learn more about Medicare and ESRD. TTY users can call 1-877-486-2048.

• For eligibility, coverage, and cost information, visit Medicare.gov/basics/children-and-end-stage-renal-disease.
• To find a Medicare-certified dialysis facility in your area, visit Medicare.gov/plan-compare.
• For free health insurance counseling and personalized help, call your State Health Insurance Assistance Program (SHIP).*
• To get a report on a particular dialysis facility, call your State Survey Agency.
• For more information on dialysis and transplants, or to file a grievance, call your state’s ESRD Network.*

*Call 1-800-MEDICARE to get the phone numbers for your State Survey Agency or ESRD Network. You can also call Medicare or visit help4med.org to get the phone number for your local SHIP.
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How you'll know if your child is eligible

One of these conditions must apply to you:

• You (or your spouse) have earned at least 6 credits within the last 3 years by working and paying Social Security taxes.
• You (or your spouse) are getting, or are eligible for, Social Security or Railroad Retirement Board benefits.

AND

One of these conditions must apply to your child:

• Your child needs regular dialysis because their kidneys no longer work.
• Your child has had a kidney transplant.

How to sign up for Medicare

If you think your child is eligible for Medicare, you or your child (if age 18 or older) must file an application to sign up. They must also meet the required waiting period (unless an exception applies).

To sign up for Medicare, or to get more information about eligibility, contact your local Social Security office. You can call Social Security at 1-800-772-1213 to make an appointment. TTY users can call 1-800-325-0778. If you visit your local Social Security office, you might be asked to bring these documents:

• Your child's birth certificate and Social Security card.
• Your Social Security card.
• CMS Form 2728 (“End-Stage Renal Disease Medical Evidence Report Medicare Enrollment and/or Patient Registration”). You can get this form from your child’s doctor or dialysis unit, or by visiting CMS.gov/Medicare/CMS-Forms/CMS-Forms-Downloads/CMS2728.pdf.

Kidney transplant

Part A covers these transplant services:

• Inpatient services in a Medicare-certified hospital
• Kidney registry fee
• Laboratory and other tests to evaluate your child’s medical condition and the condition of potential kidney donors
• The costs of finding the proper kidney for your child’s transplant surgery (if there’s not kidney donor)
• The full cost of care for your child’s kidney donor
• Blood

Part B helps pay for these transplant services:

• Doctors’ services for kidney transplant surgery
• Doctors’ services for the kidney donor during their hospital stay
• Transplant drugs (also called immunosuppressive drugs) for a limited time after your child leaves the hospital following a transplant
• Any additional hospital care for your child’s donor, in case of problems due to the surgery
• Blood

Kidney dialysis

Part A covers dialysis treatments when your child is in the hospital. Part B helps pay for these dialysis services:

• Outpatient dialysis treatments & doctors’ services (in a Medicare-certified dialysis facility or your home)
• Home dialysis training, equipment, and supplies
• Certain home support services
• Most drugs for outpatient and home dialysis (like an erythropoiesis stimulating agent to treat anemia)
• Other services that are part of dialysis (like laboratory tests)
• Dialysis when you travel and use a Medicare-certified facility

Note: In most cases, Medicare doesn’t pay for transportation to dialysis facilities.

Medicare covers most kidney dialysis and kidney transplant services. These may be called pediatric dialysis and transplant services.

If your child has Original Medicare, they’ll need Medicare Part A (Hospital Insurance), Medicare Part B (Medical Insurance), and possibly Medicare drug coverage (Part D) to get the full benefits available to them.

If your child has a Medicare Advantage Plan, they’ll get the full benefits available under Medicare for people with ESRD. Read their plan materials or call their plan for more information.

What’s covered

Dialysis when you travel and use a Medicare-certified facility or your home)

To ensure dialysis, Medicare doesn’t pay for transportation to dialysis facilities.

Kidney transplant

Part A covers these transplant services:

• Inpatient services in a Medicare-certified hospital
• Kidney registry fee
• Laboratory and other tests to evaluate your child’s medical condition and the condition of potential kidney donors
• The costs of finding the proper kidney for your child’s transplant surgery (if there’s not kidney donor)
• The full cost of care for your child’s kidney donor
• Blood

Part B helps pay for these transplant services:

• Doctors’ services for kidney transplant surgery
• Doctors’ services for the kidney donor during their hospital stay
• Transplant drugs (also called immunosuppressive drugs) for a limited time after your child leaves the hospital following a transplant
• Any additional hospital care for your child’s donor, in case of problems due to the surgery
• Blood

“Medicare for Children with End-Stage Renal Disease: Getting Started” isn’t a legal document. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings. More details are available in the “Medicare Coverage of Kidney Dialysis & Kidney Transplant Services” booklet.