

**From:** [Kevin Harned](#)  
**To:** [DHSR.SMFP.Petitions-Comments](#)  
**Subject:** [External] Liberty petition for 6 dialysis positions at SNF in Monroe  
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Good afternoon,

My name is Kevin Harned M.D. and I am a practicing nephrologist at Piedmont Nephrology and Hypertension in Hickory, NC. I have been practicing nephrology since completing my fellowship in 2007 from the University of Kentucky. During that time I have served in both academic medicine as well as private practice and in each of those arenas I have managed patients both in large-scale hospitals, small community hospitals, in-center dialysis facilities, and at long-term acute care hospitals (LTACHs). I recently learned that a subacute nursing facility (SNF) had petitioned to open 6 chairs for dialysis patients; this is without a doubt an effort to conserve costs on their part by reducing transportation requirements as well as other avenues where savings can be achieved. However, in all of my previous experiences taking care of dialysis patients I was always most fearful for the care of my dialysis patients in LTACH's as these patients are often of much higher acuity than what the staff there were able to manage safely. Upon learning of a potential SNF attempting to perform dialysis sessions within their facility without direct supervision of a board-certified nephrologist as well as highly trained dialysis service professionals such as Fresenius Kidney Care or DaVita Dialysis, I am immediately thrown back into those horrors that I experienced before albeit to a higher degree. While the current landscape of healthcare is such that it is becoming ever-increasing the importance of trying to save dollars where possible, across the country we are seeing unfortunately poorer outcomes by facilities attempting to cut corners too abruptly. These patients are highly complex and unfortunately the staff at these SNF's already are overwhelmed by the care of their censuses as it is at the moment, much less trying to manage the needs of dialysis within their own facility. The actual procedure for dialysis has been made less-complicated over time in that there is no need for a large water treatment room compared to times in the past as well as the fact the

dialysis machines themselves are much more user-friendly. However, it still requires oversight by an experienced nephrologist and dialysis professionals whom together have the responsibility of water quality management for the procedures themselves and quality management of the machinery/disposables in an effort to uphold the quality of care these patients deserve to the highest degree. Only by these endeavors can these patients hopefully experience the best possible outcomes.

Consequently, I would implore those reading this message to please consider using designated dialysis provider services such as Fresenius Kidney Care or DaVita Dialysis together with the oversight of a board-certified nephrologist and not permit the intended corner-cutting strategy to proceed which will inevitably result in substandard patient care.

Kindest regards,

Kevin Harned MD  
Piedmont Nephrology and Hypertension