A BILL ENTITLED

AN ACT concerning

Public Health – Nondiscrimination in Access to Anatomical Gifts and Organ Transplantation – Financial Status

FOR the purpose of prohibiting covered entities from taking certain actions regarding organ transplantation and anatomical gifts solely on the basis of an individual’s financial status; requiring, except under certain circumstances, covered entities to make certain modifications to policies, practices, and procedures to allow an individual with financial issues access to services related to organ transplantation; and generally relating to nondiscrimination in access to anatomical gifts and organ transplantation.

BY repealing and reenacting, without amendments,
1. Article – Health – General
2. Section 20–1601(a), (d), and (g)
3. Annotated Code of Maryland
4. (2019 Replacement Volume and 2021 Supplement)

BY repealing and reenacting, with amendments,
1. Article – Health – General
2. Section 20–1605
3. Annotated Code of Maryland
4. (2019 Replacement Volume and 2021 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article – Health – General

20–1601.
(a) In this subtitle the following words have the meanings indicated.

(d) “Covered entity” means:

(1) A licensed health care provider;

(2) A health care facility as defined in § 19–114 of this article;

(3) A laboratory;

(4) A State psychiatric hospital;

(5) A State residential center as defined in § 7–101 of this article;

(6) An alternative living unit as defined in § 7–101 of this article;

(7) A group home as defined in § 7–101 of this article;

(8) An institutional medical unit in a correctional facility; or

(9) Any entity responsible for potential recipients of the anatomical gift.

(g) “Qualified individual” means an individual who:

(1) Has a disability; and

(2) Meets the essential eligibility requirements for the receipt of an anatomical gift, with or without:

(i) The support networks available to the individual;

(ii) The provision of auxiliary aids and services; or

(iii) Reasonable modifications to the policies or practices of a covered entity, including modifications to allow:

1. Communication with individuals responsible for supporting the individual with postsurgical and posttransplantation care, including medication; and

2. The consideration of support networks available to the individual, including family, friends, and home– and community–based services funded through the Maryland Medical Assistance Program, Medicare, or another health plan in which the individual is enrolled, or any program or source of funding available to the individual, in determining whether the individual is able to comply with posttransplantation medical requirements.
A covered entity may not solely on the basis of an individual’s disability OR FINANCIAL STATUS:

1. Consider a qualified individual OR ANY OTHER INDIVIDUAL ineligible to receive an anatomical gift or organ transplant;

2. Deny medical and other services related to organ transplantation, including evaluation, surgery, counseling, and posttransplantation treatment and services;

3. Refuse to refer the individual to a transplant center or a related specialist for the purpose of evaluation or receipt of an organ transplant;

4. Refuse to place a qualified individual OR ANY OTHER INDIVIDUAL on an organ transplant waiting list; or

5. Place a qualified individual OR ANY OTHER INDIVIDUAL at a lower-priority position on an organ transplant waiting list than the position at which the qualified individual OR OTHER INDIVIDUAL would have been placed if not for the disability OR THE INDIVIDUAL’S FINANCIAL STATUS.

Subject to paragraph (2) of this subsection, a covered entity may take an individual’s disability into account when making treatment or coverage recommendations or decisions, solely to the extent that the disability has been found by a physician, following an individualized evaluation of the individual, to be medically significant to the provision of the anatomical gift.

If an individual has the necessary support system to assist the individual in complying with posttransplantation medical requirements, a covered entity may not consider the individual’s inability to independently comply with the posttransplantation medical requirements to be medically significant for the purposes of paragraph (1) of this subsection.

A covered entity shall make reasonable modifications in policies, practices, or procedures, when the modifications are necessary to allow an individual with a disability OR FINANCIAL ISSUES access to services, including transplantation–related counseling, information, coverage, or treatment, unless the covered entity can demonstrate that making the modifications would fundamentally alter the nature of the services.

A covered entity shall take such steps as may be necessary to ensure that an individual with a disability is not denied services, including transplantation–related counseling, information, coverage, or treatment, due to the absence of auxiliary aids and services, unless the covered entity can demonstrate that taking the steps would fundamentally alter the nature of the services being offered or would result in an undue burden.
SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2022.