



**HB 301 – Maryland Revised Uniform Anatomical Gift Act – Revisions
FAVORABLE**

February 9, 2021

Hon. Shane E. Pendergrass
Chairman, Health and Government Operations Committee
241 House Office Building
6 Bladen Street
Annapolis, MD 21401

Dear Chair Pendergrass, Vice-Chair Pena-Melnyk, and Committee Members,

On behalf of The Living Legacy Foundation of Maryland (LLF) and the more than 3,600 Marylanders awaiting a life-saving organ transplant, thank you for your continued support of organ and tissue donation. The LLF is privileged to work collaboratively with Maryland hospitals, transplant centers, the Office of the Chief Medical Examiner, and funeral homes to facilitate organ and tissue donation. Every day, we have the honor of working with families, who at a time of tremendous loss, help others through the gift of donation. The job has never been more challenging, as we continue to meet our mission through this unprecedented pandemic. Without the incredible support of the Maryland legislature, we would be unable to achieve the immense success we have in saving and enhancing lives through donation.

The LLF serves as the Organ Procurement Organization (OPO) for most of the state of Maryland. As one of 57 OPOs certified by the Centers for Medicare and Medicaid Services (CMS), and a member of the Organ Procurement and Transplantation Network (OPTN), The LLF coordinates the donation process for all Maryland counties, with the exception of Montgomery, Prince George, and Charles Counties. These counties are served by our colleague OPO, the Washington Regional Transplant Community. When a Maryland hospital recognizes an individual has suffered a non-recoverable injury or has died, their staff contacts The LLF or WRTC. We then evaluate the potential donor, check local and national registries for donor designation status, discuss donation with family members, and arrange the recovery and transport of donated organs. We also provide extensive bereavement support for donor families in the years following their loved one's donation.

Maryland's Revised Uniform Anatomical Gift Act (RUAGA) provides the framework for our work, and we ensure adherence to this, as well as all the federal laws and guidelines associated with the organ and tissue donation process. We have identified several aspects of the statute that merit revision, as outlined below:



Section 4-509: Distribution of gifts.

The revisions to this section will ensure congruency throughout the statute related to the scope of an anatomical gift, as outlined in the definitions section, which reads: “anatomical gift means a donation of all or part of a human body to take effect after the donor’s death for the purpose of transplant, therapy, research, or education.”

The current statute makes distinctions in Section 4-509 which do not reflect the current state of the donation process and can cause unnecessary confusion in the public. Since the inception of the 1968 Uniform Anatomical Gift Act, the model language on which this statute is based, numerous aspects of the process have evolved. The venues in which individuals can designate their wishes, extensive public education about donation, and the expertise of organ procurement organization (OPO) professionals who communicate with donor families all ensure there is clarity about the scope of the gifts of organ, eye, and tissue donation for transplant, research, therapy, and education.

Section 4- 10: Document of gift or refusal – Search.

The statute’s language does not reflect current practice in Maryland, or throughout the United States. Current standards reflect the responsibility of OPO representatives to check designation – via registries and MVA/DMV entities - through secure processes that protect the confidentiality of this information. These practices have evolved since the initial inception of the model Uniform Anatomical Gift Act, which included the language that relates to law enforcement officers, fire fighters, and hospital staff.

Federal regulations and national accrediting body standards outline that the responsibility for checking designations resides with the OPO. An excerpt from HRSA illustrates this: “...OPO representative searches to see if the deceased is registered as a donor on their state registry. If so, that will serve as legal consent for donation”. The Association of Organ Procurement Organizations (AOPO) - the national accrediting body- likewise stipulates the responsibility of the OPO in checking designation.

Another key reason to modify this language relates to public trust in the donation system. One of the most common misconceptions is that first responders might not work as hard to save someone’s life if they know they are registered donor. The language in this section does not reflect current practices and, in fact, runs contradictory to those and risks public trust in the system.



Section 4-512 (a). Searches and examinations by procurement organization on referral by hospital

This updated language reflects that there is now a national registry, in addition to the local registry and MVA venues for registering. Additionally, the word hospital is removed as it is not their responsibility or role to know or act upon how and where to access designation information.

We sincerely appreciate your ongoing support of our programs and your role in helping us meet our mission to honor donors, their families, and the very grateful recipients whose lives are changed through organ and tissue donation.

Sincerely,

A handwritten signature in black ink that reads "Karen Kennedy". The signature is written in a cursive, flowing style.

Karen Kennedy
Director of Education
The Living Legacy Foundation