



THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

HB96

**Public Health - Nondiscrimination in Access to Anatomical Gifts and
Organ Transplantation - Financial Status
Statement in SUPPORT**

Chair Pendergrass, Vice Chair Pena-Melnyk and members of the esteemed Health and Government Operations Committee, thank you for the opportunity to share testimony in support of HB96, a bill which will prohibit the consideration of financial status in the determination of which patients are eligible to receive anatomical gifts and organ transplants here in the state of Maryland.

HB96 amends our existing state laws around the factors that may be used to determine eligibility for an organ transplant or to be put on the waitlist here in the state. A few years ago, under the leadership of this committee, a law sponsored by Delegate Hill prohibiting disability from being used as a factor in determining a patient's eligibility for an organ transplant passed into law. This came after multiple national stories broke of patients with Down's Syndrome and other conditions being outright denied placement on the organ transplant list due to their disability. Prohibiting disability from being used as a factor was the morally right thing to do, and I am grateful for the committee's important work on this policy. Placement on the transplant list, as well as the determination of a match, should be made based on medical factors alone.

The bill before you today adds a further prohibition, prohibiting the consideration of a patient's financial status and means to discriminate against patients who would otherwise benefit from placement on the transplant list or from receiving an anatomical gift. Here in Maryland, we are incredibly fortunate to have two top-tier transplant centers that assist patients in need of adult kidney, liver, heart, lung, or pancreas transplants, as well as pediatric kidney, liver and heart transplants. It is of the utmost importance that patients who seek care at these centers are not turned away from receiving an organ simply because they do not have financial means.

For example, in the case of kidney patients, our federal government covers the costs of patients in end-stage renal disease through the federal ESRD program within Medicare. It is an incredibly unique program through which any patient, regardless of age, is provided Medicare coverage as

long as they have stage V kidney disease.¹ All of their healthcare is covered, including dialysis in perpetuity or the costs of a transplant and one year post-transplant healthcare coverage. However, after that one year, if the patient is under the age of 65, they are removed from the Medicare program and must seek coverage through the private market or Medicaid. Through conversations with numerous kidney patients across the country, I have learned that many transplant centers nationwide outright refuse to allow patients under the age of 65 - who would otherwise be perfect candidates for transplant - to be on an organ transplant list unless they have a set amount of liquid assets saved to cover their cost of care once they are removed from the Medicare program. Not only does this cost our healthcare system an extraordinary amount of money, but this practice also significantly worsens patient outcomes: patients on dialysis have on average a 7 year life expectancy once they begin, whereas a kidney transplant can extend a patient's life over 20 years.²

Just as extending the prohibition of disability as a factor for the determination of whether a patient may receive a needed organ is the morally right thing to do, so too is prohibiting the consideration of financial status in that same assessment. Doing so will improve patient outcomes, lower costs, and ensure that all patients who may otherwise medically qualify for a transplant will be able to be considered for this incredibly valuable gift.

Thank you for your consideration, and I respectfully request a favorable report of HB96.

¹ Centers for Medicare & Medicaid Services, End Stage Renal Disease (ESRD) Center: <https://www.cms.gov/Center/Special-Topic/End-Stage-Renal-Disease-ESRD-Center>

² National Kidney Foundation, Dialysis: <https://www.kidney.org/atoz/content/dialysisinfo>