

September 22, 2021

Chairman Hackett, Vice Chair Romanchuk, Ranking Member Craig, and members of the Ohio Senate Insurance Committee, thank you for the opportunity to provide proponent testimony on HB 188.

The UC Health Transplant Program provides kidney transplantation services and is the only adult liver, pancreas, and heart transplantation provider in southwestern Ohio. In calendar year (CY) 2020, the UC Health Transplant Program performed over 300 organ transplant procedures. Historically, our transplant program has performed living donation procedures for 53 years, and currently our transplant surgeons perform approximately 100 living donor transplants yearly. Importantly, we can also provide a unique perspective in that our physicians, who are also University of Cincinnati College of Medicine faculty, have authored over a dozen publications in the scientific literature that have focused on defining the types of ethical and medical protections that are unique for living organ donors.

Currently, living donor transplantation is the best treatment for patients with kidney failure as it provides them with a rapid means to avoid future dialysis treatments, and also provides the longest time off of dialysis, as living donor kidneys last on average several years longer than do kidney transplants from deceased donors. In fact, over one third of living donor transplants performed in the US today are completed in patients before they have to start dialysis which offers additional survival advantages.

House Bill 188 would expand access to patients for needed organ donations by protecting living organ donors from insurance discrimination. This legislation, sponsored by State Representatives Jon Cross and Brian Lampton, and co-sponsored by Insurance Committee members Representatives Carfagna and LaRe is an important first step in Ohio by providing protections to the insurance vulnerabilities that living organ donors face as a result of their honorable acts of altruism in saving the lives of others. This is accomplished in HB 188 by prohibiting insurers from discriminating against a living organ donor in the offering, issuance, premiums, conditions of life, disability, or long-term care insurance coverage. This is an important first step in protecting these individuals who have made the selfless decision to donate an organ to save the life of another person or loved one.

We agree with positions of the American Society of Transplantation and the American Society of Transplant Surgeons that comprehensive protections are warranted for living organ donors. According to recent OPTN/SRTR data, approximately 30% of the 20,000 kidney transplants performed yearly in the U.S. come from living organ donors. However, far more kidney transplants from living organ donors are needed. It is widely believed that elimination of the vulnerabilities that living organ donors face would significantly increase living kidney donation.

Many federal and state legislators also support enacting laws to eliminate barriers to living organ donation. There is pending legislation on the federal level under The Living Donor Protection Act (S. 511/H.R. 1224). This federal legislation will prohibit discrimination based on an individual's status as a living organ donor in the offering, issuance, cancellation, coverage, price, or any other condition of a life insurance policy, disability insurance policy, or long-term care insurance policy. The bill also codifies that any living organ donors may use time granted through the Family and Medical Leave Act (FMLA) to recover from donation.

Nearby, Kentucky Governor Andy Beshear recently signed House Bill 75 prohibiting certain coverage determinations based upon the status of an individual as a living organ donor. Pennsylvania has also passed a similar bill that has recently passed through their House of Representatives and Senate and waiting for governor signature. If signed, Pennsylvania will join Kentucky, Washington, and New Jersey who have signed similar bills in the past few months. Overall, sixteen states have versions of the Living Donor Protection Act insurance non-discrimination including Arizona, Arkansas, California, Colorado, Idaho, Illinois, Kansas, Kentucky, Maine, Maryland, Missouri, New Jersey, New York, Oklahoma, Oregon and Utah. Several other states are considering versions of this legislation.

House Bill 188 is a laudable step in the right direction for the state of Ohio that addresses protections that living organ donors need. UC Health strongly supports this bill. We also look forward to continuing to work with the Ohio Legislature on expanding protections for living organ donors in the future.

Sincerely,

Corey King, M.B.A., M.H.A  
Executive Administrative Director, Transplantation Services, UC Health

E. Steve Woodle, M.D., F.A.C.S.  
William A. Altemeier Chair in Surgery  
Professor of Surgery  
Director, Division of Transplantation  
Director, Israel Penn International Transplant Tumor Registry