



November 23, 2020

[Senator/Senator-Elect] [Last name]
Address
Address

Dear [Senator/Senator Elect] [Last name] and Staff,

On behalf of Midwest Transplant Network (MTN), the federally designated Organ Procurement Organizations (OPO) in Kansas, I write to inform you of counterproductive legislation, which stands in the way of increasing access to organ transplants for [Kansans/Missourians]. MTN is committed to saving the lives [Kansans/Missourians] by facilitating the organ donation process as mandated under Federal law. In order to improve outcomes for transplant patients, increase the average number of organs recovered from each donor, and reduce the overall costs associate with organ recover, many OPOs have constructed organ recovery centers which are comprised of operating rooms for organ and tissue recovery, diagnostic testing facilities, and donor intensive care units.

Mid-America Transplant (MAT) in St. Louis, Missouri was the first OPO to open a surgical recovery center for organ recovery in 1999; MAT's center has been a major success. MTN's organ recovery center and donor care unit will open in 2022, which will similarly allow braindead donors to be transferred from the hospital setting to a private center for organ recovery. MTN and its hospital partners are thrilled about the future benefits of this project and you may wish to view comments made by stakeholders during MTN's virtual groundbreaking ceremony:

<https://www.facebook.com/104899272876891/videos/275411673912535>

Unfortunately, because of outdated CMS guidance, Medicare Certified Transplant Centers (CTCs) are reluctant to transfer donors to an OPO's donor care unit or organ recovery center. This is because CTCs are financially disincentivized from transferring donors to OPOs due to outdated cost report language in Medicare Guidelines which state that CTCs receive Medicare reimbursement for organs recovered at the CTC although "usable organs" include "organs sent to OPOs," without any reference to where the organs were recovered. 42 U.S.C. § 273. Local transplant centers remain willing to partner with MTN and are supportive of donation; however, CTCs have expressed hesitancy in their willingness to transfer donor patients for fear that the centers may be financially penalized after Medicare cost reports are submitted. Recently, language has been proposed in the Explanatory Statement for Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Bill, 2021, in support of addressing this issue:

Certified Transplant Centers.—The Committee strongly urges CMS to remove the disincentive for Medicare Certified Transplant Centers to transfer their braindead patients to organ recovery centers operated by organ procurement organizations without a financial penalty. [See page 141](#)

Considering the COVID-19 pandemic, it is especially critical to revise archaic CMS guidance to relieve pressure from [Kansans'/Missouri's] heroic, but overwhelmed hospitals. Moving braindead donors to OPOs for care and recovery will free up desperately needed ICU beds, ventilators and hospital critical care staff so that these resources can be used for COVID-19 patients and other medically complex patients.

Additionally, OPOs with organ recovery centers can drastically minimize the number of essential workers who report to local hospitals and reduce the number surgeons who may be required to travel from across the U.S. to surgically recover donor organs. Minimizing external staff in hospitals is safer for OPO and hospital staff members as well as hospitalized [Kansas/Missourians].

As you are aware, [Kansas/Missouri] hospitals have been greatly impacted by the COVID-19 pandemic and are currently experiencing capacity crises due to a record number of patients. Some of these same hospitals in Kansas and Western Missouri have expressed opposition to the opportunity to transfer braindead donors to organ recovery centers which would free up hospital resources solely because of the current CMS guidance which financially disincentives transferring a donor's care to an OPO.

As a Senator serving [Kansas/Missouri], you are in unique position to support the abovementioned language included in the explanatory statement introduced with the Senate's 2021 DOL, HHS, ED Appropriation Bill and propose changes to the language in federal regulations, specifically Section 371(b)(3) of the Public Health Act, which unnecessarily complicates the organ transplantation process and increases health risks during this pandemic. I have enclosed proposed legislative revisions with this letter, and I am requesting that the proposed language is included in any future COVID-19 relief package introduced in the Senate. Additionally, in order to further assist you as you advocate on behalf of [Kansas/Missourians], I am providing you with a letter drafted by OPO leaders and sent to CMS Administrator, Seema Verma, in September of 2019 and a one-page fact sheet with additional background on the benefits of OPO organ recovery centers.

I thank you in advance for bringing this important issue to the attention of the Appropriations Committee and Senate Leadership and including revisions to The Public Health Act in the next comprehensive COVID-19 legislative package.

By supporting changes to current federal regulations, you will be taking significant steps to improve and enhance the efficiency and safety of organ donation and transplantation for [Kansas/Missourians], not only during this current COVID-19 crisis, but also for [Kansas/Missouri] citizens who will rely on lifesaving transplants in the future.

Please do not hesitate to email me if you have additional questions or concerns.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jan Finn".

Jan Finn, RN, MSN
President & CEO
Midwest Transplant Network

Encls.