

## Insurance and Real Estate Committee JOINT FAVORABLE REPORT

**Bill No.:** HB-6387

AN ACT CONCERNING INSURANCE DISCRIMINATION AGAINST LIVING

**Title:** ORGAN DONORS.

**Vote Date:** 3/11/2021

**Vote Action:** Joint Favorable

**PH Date:** 2/11/2021

**File No.:**

***Disclaimer:** The following JOINT FAVORABLE Report is prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and does not represent the intent of the General Assembly or either chamber thereof for any purpose.*

### SPONSORS OF BILL:

Insurance and Real Estate Committee

### REASONS FOR BILL:

This bill will ensure that individuals who have donated organs will not be discriminated against when finding future insurance plans. Living donors have difficulty finding affordable health insurance plans after they have donated an organ because of a perceived increase in health risk. This bill would ensure that such discrimination would be a violation of the Connecticut Unfair Insurance Practices Act.

### RESPONSE FROM ADMINISTRATION/AGENCY:

None Expressed

### NATURE AND SOURCES OF SUPPORT:

**Rep. Tammy Exum, 19th District** testified that she supports the bill because of experiences and information shared with her by her constituents. This bill passed through the committee the last session but was put on pause because of the COVID pandemic. It now needs to be passed to ensure selfless donors are not discriminated against by insurance companies.

**Stephanie Shabanowitz, Patient Ambassador, Dialysis Patient Citizens** Stephanie Shabanowitz offered her statement of support stating that this bill would benefit patients with End Stage Renal Disease (ESRD) who need kidneys from living donors. Currently, are hundreds of patients in Connecticut waiting for a kidney transplant which only a fraction will receive the operation. A majority of kidneys donated come from deceased donors which can later lead to complications and

raise health care costs. Since Connecticut does not yet have statutory precautions in place to prevent insurance discrimination living donors face increased insurance costs. This discriminatory practice discourages possible living donors from giving more reliable kidneys to patients with ESRD who need them to survive.

**Adam Goldstein, Patient Ambassador, Dialysis Patient Citizens** stated that he supports this bill and its potential to remove one of the existing barriers to organ transplants. The number of living kidney donors needs to increase to help more than 1,000 patients in Connecticut who are waiting for a kidney transplant. Patients with ESRD receive dialysis three times a week in place of a kidney transplant. Increasing the supply of kidneys to these patients can lower the cost of prolonged dialysis treatments and lower the deaths of people waiting for a kidney transplant. Preventing insurance companies from discriminating against living donors will help many ESRD patients get the lifesaving organs they need.

**Connecticut Hospital Association** stated that this bill would help increase the number of living organ donors by preventing insurance companies from raising their insurance costs. Organ transplants are a matter of life and death for many patients and by decreasing discriminatory insurance practices there will be an increase in vital organ and tissue donations.

**Armand Halter, Advocate and Mentor for the National Kidney Foundation** testified that many individuals in Connecticut require a kidney transplant and have to wait many years to receive a kidney donation. Of the over 1,000 patients in the state, only a quarter of them will receive a kidney donation that will save their lives. Discriminatory insurance practices discourage living donors from giving vital tissue and organs and keep the yearly transplants at a low number. To date, 14 states have passed a Living Donor Protection Act and New Jersey state legislature is waiting on its governor's signature.

**Marcia Hilditch, Community Outreach Manager, National Kidney Foundation** supports this bill and its potential to grow the population of living kidney donors and save many people in need of a kidney transplant. Living organ donors are thoroughly vetted before donating and make up an already healthy portion of the U.S. population. However, despite having little health risk they experience higher premiums because of their choice to donate. Hopkins University performed a study in 2014 that found a quarter of organ donors experienced discrimination when they attempted to change or acquire health insurance. It has also been noted that living organ transplant is better for the patient than kidney dialysis and more cost-effective for Medicaid and Medicare.

**Stuart Miller, Director of Strategic Planning and Government Relations IGA Nephropathy Foundation of America** supports this bill in the hopes that lowering premiums and preventing insurance discrimination for living organ donors will increase the number of available organs. In 2019 there were over 100,000 patients on a waitlist of which 3,400 passed while waiting for an organ. According to the National Kidney Foundation, 33% of transplants during this year were made possible by living kidney donors.

**Melanie Lynn Lendnal, Director and State policy Advocate, American Kidney Fund** testified that while most organ transplants are from deceased individuals, living donors offer an increased supply of vital tissue and lifesaving organs. In the past year, more than 6,000 organ transplants were performed in the U.S. of which kidneys are the most common. At this moment 110,000 people are waiting for an organ transplant. Studies have shown that individuals who donate organs face scrutiny and discrimination when they try to purchase insurance. By passing this bill organ donors would be under

less burden before and after their donation and positively affect the choice for many to donate their organs.

**Ned Brooks, Founder and CEO, National Kidney Donation Organization** testified on behalf of Gareth Hil the founder and CEO of the National Kidney Registry. After donating his kidney, Gareth found that the life insurance underwriters had dramatically increased his premiums. Since he has only one kidney, he would have to pay 161,000 over a period of 10 years. A colleague of his who donated his kidney cannot purchase additional life insurance because he is a living donor. Despite benefiting from kidney donations insurance companies might increase living donors premiums from 86% to 131%. The people who are saving the insurance companies money are seeing their insurance premiums double or tripled after becoming a living donor.

**Camille Simpson, Regional Vice President, ACLI State Relations & Eric George, President, IAC** The ACLI and the IAC support this bill along with the National kidney foundation for its protection of living kidney donors and their insurance premiums.

**Robin Gilmartin, West Hartford, CT** supports this bill because the population of living organ donors is suffering from high insurance premiums. Since the number of deceased donors are limited, more than 118,000 individuals rely on living donors to help raise their odds for receiving a transplant. Despite being in exceptional health and having to go through numerous health evaluations living organ donors are subjected to increased premiums and discrimination by insurance companies.

**Sheila Wiatr Sokolski, Avon, CT** supports this bill because living organ donors are often healthier than the general population but pay an increased premium because of their donor status. The process for becoming a living donor is long and often financially taxing to those who have to recover from the process. Increased premiums and unchecked insurance companies add to this burden and make the process for donation much more difficult.

#### **NATURE AND SOURCES OF OPPOSITION:**

None Expressed

**Reported by: Wade Jones**

**Date: 3/16/2021**