

WEST VIRGINIA LEGISLATURE

2022 REGULAR SESSION

Introduced

Senate Bill 647

BY SENATORS GRADY, AZINGER, BOLEY, CLEMENTS,
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[Introduced February 16, 2022; referred
to the Committee on Health and Human Resources;
and then to the Committee on the Judiciary]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new article,
 2 designated §16-65-1, §16-65-2, §16-65-3, and §16-65-4, all relating to prohibiting
 3 discrimination based on an individual’s mental or physical disability in access to organ
 4 transplantation; and providing enforcement mechanisms.

Be it enacted by the Legislature of West Virginia:

ARTICLE 65. NONDISCRIMINATION IN ACCESS TO ORGAN TRANSPLANTATION.

§16-65-1. Legislative intent.

1 The Legislature finds that:

2 (1) A mental or physical disability does not diminish a person’s right to health care;

3 (2) The “Americans with Disabilities Act of 1990” prohibits discrimination against persons
 4 with disabilities, yet many individuals with disabilities still experience discrimination in accessing
 5 critical health care services;

6 (3) Individuals with mental and physical disabilities have historically been denied life-
 7 saving organ transplants based on assumptions that their lives are less worthy, that they are
 8 incapable of complying with post-transplant medical regimens, or that they lack adequate support
 9 systems to ensure such compliance;

10 (4) Although organ transplant centers must consider medical and psychosocial criteria
 11 when determining if a patient is suitable to receive an organ transplant, transplant centers that
 12 participate in Medicare, Medicaid, and other federal funding programs are required to use patient
 13 selection criteria that result in a fair and nondiscriminatory distribution of organs; and

14 (5) West Virginia residents in need of organ transplants are entitled to assurances that
 15 they will not encounter discrimination on the basis of a disability.

§16-65-2. Definitions.

1 As used in this article:

2 “Disability” has the same meaning set forth in the Americans with Disabilities Act of 1990
 3 (ADA), as amended by the ADA Amendments Act of 2008, at 42 U.S.C. § 12102.

4 “Anatomical gift” means a donation of all or part of a human body to take effect after the
5 donor’s death for the purpose of transplantation or transfusion.

6 “Auxiliary aids and services” includes:

7 (A) Qualified interpreters or other effective methods of making aurally delivered materials
8 available to individuals with hearing impairments;

9 (B) Qualified readers, taped texts, or other effective methods of making visually delivered
10 materials available to individuals with visual impairments;

11 (C) Provision of information in a format that is accessible for individuals with cognitive,
12 neurological, developmental, and/or intellectual disabilities;

13 (D) Provision of supported decision-making services;

14 (E) Acquisition or modification of equipment or devices; and

15 (F) Other similar services and actions.

16 “Covered entity” means:

17 (A) Any licensed provider of health care services, including licensed health care
18 practitioners, hospitals, nursing facilities, laboratories, intermediate care facilities, psychiatric
19 residential treatment facilities, institutions for individuals with intellectual or developmental
20 disabilities, and prison health centers; or

21 (B) Any entity responsible for matching anatomical gift donors to potential recipients.

22 “Organ transplant” means the transplantation or transfusion of a part of a human body into
23 the body of another for the purpose of treating or curing a medical condition.

24 “Qualified individual” means an individual who, with or without the support networks
25 available to them, provision of auxiliary aids and services, and/or reasonable modifications to
26 policies or practices, meets the essential eligibility requirements for the receipt of an anatomical
27 gift.

28 “Reasonable modifications to policies or practices” may include:

29 (A) Communication with individuals responsible for supporting an individual with post-

30 surgical and post-transplantation care, including medication;

31 (B) Consideration of support networks available to the individual, including family, friends,
32 and home and community-based services, including home and community-based services funded
33 through Medicaid, Medicare, another health plan in which the individual is enrolled, or any
34 program or source of funding available to the individual, in determining whether the individual is
35 able to comply with post-transplant medical requirements;

36 “Supported decision-making” includes use of a support person or persons in order to assist
37 an individual in making medical decisions, communicate information to the individual, or ascertain
38 an individual’s wishes, including:

39 (A) Inclusion of the individual’s attorney-in-fact, health care proxy, or any person of the
40 individual’s choice in communications about the individual’s medical care;

41 (B) Permitting the individual to select a person of their choice for the purposes of
42 supporting that individual in communicating, processing information, or making medical decisions;

43 (C) Provision of auxiliary aids and services to facilitate the individual’s ability to
44 communicate and process health-related information, including use of assistive communication
45 technology;

46 (D) Provision of information to persons designated by the individual, consistent with the
47 provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 42 U.S.C.
48 § 1301 et seq., and other applicable laws and regulations governing disclosure of health
49 information;

50 (E) Provision of health information in a format that is readily understandable by the
51 individual;

52 (F) If the individual has a court-appointed guardian or other individual responsible for
53 making medical decisions on behalf of the individual, any measures to ensure that the individual
54 is included in decisions involving his or her own health care and that medical decisions are in
55 accordance with the individual’s own expressed interests.

§16-65-3. Discrimination prohibited.

1 (a) A covered entity may not, solely on the basis of a qualified individual's mental or
2 physical disability:

3 (1) Deem an individual ineligible to receive an anatomical gift or organ transplant;

4 (2) Deny medical and related services related to organ transplantation, including
5 evaluation, surgery, counseling, post-operative treatment and services;

6 (3) Refuse to refer the individual to a transplant center or other related specialist for the
7 purpose of evaluation or receipt of an organ transplant;

8 (4) Refuse to place an individual on an organ transplant waiting list, or placement of the
9 individual at a lower-priority position on the list than the position at which he or she would have
10 been placed if not for his or her disability; or

11 (5) Decline insurance coverage for any procedure associated with the receipt of the
12 anatomical gift, including post-transplantation care;

13 (b) Notwithstanding subsection (a) of this section, a covered entity may take an individual's
14 disability into account when making treatment and/or coverage recommendations or decisions,
15 solely to the extent that the physical or mental disability has been found by a physician or surgeon,
16 following an individualized evaluation of the potential recipient, to be medically significant to the
17 provision of the anatomical gift. The provisions of this section shall not be deemed to require
18 referrals or recommendations for, or the performance of, medically inappropriate organ
19 transplants.

20 (c) If an individual has the necessary support system to assist the individual in complying
21 with post-transplant medical requirements, an individual's inability to independently comply with
22 those requirements shall not be deemed to be medically significant for the purposes of subsection
23 (b) of this section.

24 (d) A covered entity shall make reasonable modifications in policies, practices, or
25 procedures, when such modifications are necessary to make services such as transplantation-

26 related counseling, information, coverage, or treatment available to qualified individuals with
27 disabilities, unless the entity can demonstrate that making such modifications would
28 fundamentally alter the nature of such services;

29 (e) A covered entity shall take steps necessary to ensure that no qualified individual with
30 a disability is denied services such as transplantation-related counseling, information, coverage,
31 or treatment because of the absence of auxiliary aids and services, unless the entity can
32 demonstrate that taking those steps would fundamentally alter the nature of the services being
33 offered or would result in an undue burden;

34 (f) A covered entity shall otherwise comply with the requirements of Titles II and III of the
35 Americans with Disabilities Act and ADA Amendments Act of 2008.

36 (g) The provisions of this section apply to each part of the organ transplant process.

§16-65-4. Enforcement.

1 (a) The remedy for violations of this article are the same as those available under Titles II
2 and III of the Americans with Disabilities Act, 42 U.S.C. §§ 12131-12189.

3 (b) The court shall accord priority on its calendar and expeditiously proceed with an action
4 brought to seek any remedy authorized by law for purposes of enforcing compliance with the
5 provisions of this article.

NOTE: The purpose of this bill is to prohibit discrimination, based individual's mental or physical disability, in access to organ transplantation.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.