

118TH CONGRESS
2D SESSION

H. R. 10282

To amend the Public Health Service Act with respect to the Living Organ
Donation Reimbursement Program.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 4, 2024

Ms. DELBENE (for herself, Mr. BUCSHON, Ms. SCHRIER, Mrs. MILLER of West Virginia, Mr. NADLER, and Ms. KELLY of Illinois) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend the Public Health Service Act with respect to
the Living Organ Donation Reimbursement Program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Expanding Support
5 for Living Donors Act of 2024”.

1 **SEC. 2. NO CONSIDERATION OF INCOME OF ORGAN RECIPI-**

2 **ENT.**

3 Section 377 of the Public Health Service Act (42

4 U.S.C. 274f) is amended—

5 (1) by redesignating subsections (c), (d), (e),

6 and (f) as subsections (d), (e), (i), and (j), respec-

7 tively;

8 (2) by inserting after subsection (b) the fol-

9 lowing:

10 “**(c) NO CONSIDERATION OF INCOME OF ORGAN RE-**

11 **CPIENT.**—The recipient of a grant under this section, in

12 providing reimbursement to a donating individual through

13 such grant, shall not give any consideration to the income

14 of the organ recipient.”; and

15 (3) in subsection (i), as so redesignated—

16 (A) in paragraph (1), by striking “sub-

17 section (c)(1)” and inserting “subsection

18 (d)(1)”;

19 (B) in paragraph (2), by striking “sub-

20 section (c)(2)” and inserting “subsection

21 (d)(2)”.

22 **SEC. 3. REMOVAL OF EXPECTATION OF PAYMENTS BY**

23 **ORGAN RECIPIENTS.**

24 Section 377(e) of the Public Health Service Act (42

25 U.S.C. 274f(e)), as redesignated by section 2, is amend-

26 ed—

- 1 (1) in paragraph (1), by adding “or” at the
2 end;
- 3 (2) in paragraph (2), by striking “; or” and in-
4 serting a period; and
- 5 (3) by striking paragraph (3).

6 **SEC. 4. ENSURING ELIGIBILITY OF DONATING INDIVIDUALS**

7 **WHOSE HOUSEHOLD INCOME IS AT OR**
8 **BELOW 700 PERCENT OF THE POVERTY LINE.**

9 Section 377 of the Public Health Service Act (42
10 U.S.C. 274f), as amended by section 2, is further amended
11 by inserting after subsection (e) the following:

12 “(f) ELIGIBILITY OF DONATING INDIVIDUALS BASED
13 ON HOUSEHOLD INCOME.—

14 “(1) IN GENERAL.—In providing reimbursement
15 to donating individuals using funds from grant
16 awards under this section, the recipient of the grant
17 award shall not limit the eligibility of a donating in-
18 dividual for such reimbursement based on the indi-
19 vidual’s income if the individual’s household income
20 is at or below 700 percent of the poverty line.

21 “(2) DEFINITION.—In this section, the term
22 ‘poverty line’ means the applicable poverty line as
23 set forth in the most recent poverty guidelines of the
24 Department of Health and Human Services pub-

1 lished under the authority of section 673(2) of the
2 Community Services Block Grant Act.”.

3 **SEC. 5. MAXIMUM AMOUNT OF REIMBURSEMENT.**

4 Section 377 of the Public Health Service Act (42
5 U.S.C. 274f), as amended by section 4, is further amended
6 by inserting after subsection (f) the following:

7 “(g) REIMBURSEMENT AMOUNT.—

8 “(1) IN GENERAL.—The amount of reimbursement
9 of qualifying expenses provided by a recipient
10 of a grant award under this section to each such do-
11 nating individual shall be the lesser of—

12 “(A) the total amount of the donating indi-
13 vidual’s qualifying expenses; and

14 “(B) the maximum permissible amount de-
15 scribed in paragraph (2).

16 “(2) MAXIMUM PERMISSIBLE AMOUNT.—

17 “(A) RULE.—Subject to subparagraph
18 (B), the maximum permissible amount de-
19 scribed in this section is—

20 “(i) for fiscal year 2026, \$10,000; and

21 “(ii) for subsequent fiscal years, the
22 maximum permissible amount allowed
23 under this subsection for the preceding fis-
24 cal year adjusted by the total percentage
25 change (rounded to the nearest hundredth)

1 that occurred in the Consumer Price Index
2 for all urban consumers (all items; United
3 States city average) for the preceding fis-
4 cal year.

5 “(B) EXCEPTION FOR RECIPIENTS BASED
6 ON INSUFFICIENT FUNDS.—The Secretary may,
7 with respect to reimbursement provided by a re-
8 cipient of a grant award under this section to
9 donating individuals, lower the maximum per-
10 missible amount under subparagraph (A) for a
11 fiscal year if the Secretary—

12 “(i) determines that such recipient
13 has insufficient funds to provide the full
14 amount that would otherwise apply under
15 paragraph (1) to all donating individuals;
16 and

17 “(ii) at least 30 days before making
18 such determination effective, provides to
19 the Congress written notice of such deter-
20 mination, including a justification.

21 “(C) SPECIAL RULES.—If the Secretary,
22 with respect to reimbursement provided by a re-
23 cipient of a grant award under this section to
24 donating individuals, makes a determination
25 under subparagraph (B) to lower the maximum

1 permissible amount under subparagraph (A) for
2 a fiscal year—

3 “(i) such determination shall not af-
4 fect the amount of reimbursement for any
5 approved donating individual prior to the
6 effective date of such determination; and

7 “(ii) the maximum permissible
8 amount under subparagraph (A)(ii) for
9 any subsequent year shall be calculated
10 without regard to such lowered amount.”.

11 **SEC. 6. ANNUAL REPORT.**

12 Section 377 of the Public Health Service Act (42
13 U.S.C. 274f), as amended by section 5, is amended by in-
14 serting after subsection (g) the following:

15 “(h) ANNUAL REPORT.—Not later than the end of
16 fiscal year 2025 and annually thereafter, the Secretary—

17 “(1) shall submit to the Congress, and make
18 publicly available, a report on the impacts, ongoing
19 activities, challenges, and future needs of the pro-
20 gram under this section;

21 “(2) shall include in each such report, for the
22 year covered by the report—

23 “(A) an overview of the program under
24 this section;

1 “(B) current and trended historical information about the program under this section,
2 including—

3 “(i) the total number of donating individuals applying for reimbursement;

4 “(ii) the average and median reimbursement amount provided to donating individuals;

5 “(iii) demographic information regarding—

6 “(I) donating individuals applying for reimbursement; and

7 “(II) donating individuals approved for reimbursement;

8 “(iv) the types of expenses for which reimbursement was requested (including requests for reimbursement of non-qualifying expenses);

9 “(v) the amount of funding provided to donating individuals with respect to each such type of expenses;

10 “(vi) the amount of funding provided to donating individuals with respect to each organ category;

1 “(vii) the total amount expended to
2 carry out this section, disaggregated by—

3 “(I) the amount expended by the
4 Secretary and the recipients of grants
5 under this section on administrative
6 expenses; and

7 “(II) the amount provided to do-
8 nating individuals as reimbursement;

9 “(C) the impacts of the program under
10 this section, including—

11 “(i) the number of completed dona-
12 tions for which reimbursement was pro-
13 vided;

14 “(ii) the proportion of living donor
15 transplants in the United States in which
16 the donor received reimbursement through
17 the program under this section;

18 “(iii) an estimate of the savings to the
19 Medicare program under title XVIII of the
20 Social Security Act resulting from the pro-
21 gram under this section, both—

22 “(I) for the year covered by the
23 report; and

24 “(II) cumulatively since the pro-
25 gram’s creation;

1 “(D) the types of donations made by do-
2 nating individuals receiving reimbursement,
3 disaggregated according to—

4 “(i) the type of organ donated; and
5 “(ii) whether the donations were di-
6 rected, non-directed, or a paired exchange;

7 “(E) a description of any efforts to expand
8 or improve the program under this section;

9 “(F) a description of the efforts of the
10 Secretary and recipients of grants under this
11 section to increase awareness of the program
12 under this section;

13 “(G) a description of challenges experi-
14 enced by the program under this section, in-
15 cluding—

16 “(i) the number and percentage of do-
17 nating individuals applying for reimburse-
18 ment whose qualifying expenses ap-
19 proached or exceeded the maximum
20 amount allowed under subsection (g); and

21 “(ii) an estimate of the total funding
22 needed to fully reimburse, without regard
23 to the maximum amount allowed under
24 subsection (g) or donor income eligibility

1 caps, all donating individuals in the United
2 States for all qualifying expenses; and
3 “(H) areas of concern regarding, and iden-
4 tified barriers to, the elimination of financial
5 disincentives to living organ donation; and
6 “(3) in addition to the matters listed in para-
7 graph (2), may include other such other matters as
8 may be specified by the Secretary.”.

9 **SEC. 7. AUTHORIZATION OF APPROPRIATIONS.**

10 Subsection (j) of section 377 of the Public Health
11 Service Act (42 U.S.C. 274f), as redesignated by section
12 2, is amended by striking “is authorized to be appro-
13 priated \$5,000,000 for each of the fiscal years 2005
14 through 2009” and inserting “are authorized to be appro-
15 priated such sums as may be necessary for fiscal years
16 2026 through 2035”.

17 **SEC. 8. GAO STUDY.**

18 Not later than 1 year after the date of enactment
19 of this Act, the Comptroller General of the United States
20 shall—

21 (1) conduct a study on how the Medicare pro-
22 gram under title XVIII of the Social Security Act
23 (42 U.S.C. 1395 et seq.) could, under existing statu-
24 tory authorities, pay costs that would otherwise be
25 paid through the Living Organ Donation Reimburse-

1 ment Program under section 377 of the Public
2 Health Service Act (42 U.S.C. 274f); and

3 (2) submit to the Congress a report on the re-
4 sults of such study, including recommendations for
5 any changes needed to achieve such purpose.

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