



**Testimony of Dr. Juan Palma-Vargas, MaineHealth  
In Strong Opposition to LD 1055, “An Act to Prohibit Discrimination in  
Access to Anatomical Donations and Organ Transplants”  
March 27, 2025**

Senator Bailey, Representative Mathieson and distinguished members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services, my name is Dr. Juan Palma-Vargas, transplant surgeon at Maine Medical Center, and I am here to testify in strong opposition to LD 1055, “An Act to Prohibit Discrimination in Access to Anatomical Donations and Organ Transplants.”

MaineHealth is an integrated non-profit health care system that provides a continuum of health care services to communities throughout Maine and New Hampshire. Every day, our over 24,000 care team members support our vision of “Working Together so Our Communities are the Healthiest in America” by providing a range of services from primary and specialty physician services to a continuum of behavioral health care services, community and tertiary hospital care, home health care, a lab, retail and specialty pharmacy services, and, very importantly, the MaineHealth Transplant Program.

As the only transplant program in the state, the MaineHealth Transplant Program has performed more than 2,000 kidney transplants since 1971. It is through that lens, that I am here to testify in strong opposition to the legislation before you today.

While well-intentioned, LD 1055 is unnecessary and redundant to existing laws prohibiting organ transplant centers from discriminating based on disability. The Americans with Disabilities Act (ADA), Section 504 of the Rehabilitation Act of 1973, Section 1557 of the Affordable Care Act, and the Centers for Medicare & Medicaid Services (CMS) all prohibit organ transplant programs, which are funded through Medicare reimbursement, from discriminating in care or treatment based on disability. Specifically:

- The Americans with Disabilities Act (ADA) prohibits discrimination in organ transplantation, ensuring individuals with disabilities have equal access to transplants and cannot be denied based on their disability.
- Section 504 of the Rehabilitation Act of 1973 prohibits discrimination based on disability in programs and activities that receive federal financial assistance.
- Section 1557 of the Affordable Care Act makes it unlawful for any health care provider that receives funding from the federal government to refuse to treat an individual – or to otherwise discriminate against the individual – based on race, color, national origin, sex, age or disability.
- The Medicare Conditions of Participation for Transplant Programs specifically address the requirement for nondiscrimination in the selection of candidates for organ transplant:

organ transplant centers must “assure fair and non-discriminatory distribution of organs (§482.90)

- Additionally, the United Network for Organ Sharing (UNOS), which manages the Organ Procurement and Transplantation Network (OPTN) and of which transplant centers maintain membership, regularly reviews transplant centers’ patient selection criteria to ensure that no one is denied placement on the national waiting list solely because of their disability.

With that said, decisions on waiting list placement and transplantation are, and need to be, based on medical decision making and clinical expertise. Additionally, no one is denied referral to our program due to their disability or illness.

A candidate’s disability is ONLY considered within the context of the severity of illness, ability to survive and prosper with a transplanted kidney, and continue the necessary lifelong post-transplant care. For example, a patient with chronic obstructive pulmonary disease, active cancer, uncontrolled schizophrenia, or substance use disorder may not be considered a candidate due to the medical risk and/or the inability to complete the required follow-up care to prevent organ rejection. Eligibility criteria are based on solid medical reasoning and concern for not only surviving the transplant surgery but also maintaining the transplanted organ long-term, as well as the benefits compared to the risks. Additionally, placement of recipients on the national organ waiting list is determined by a standardized national kidney allocation system, not the MaineHealth Transplant Program. It is not possible for a program or provider to place a recipient on a waiting list at a lower priority.

Again, we strongly oppose LD 1055 as it takes particular medical conditions out of the context of which they must be considered for transplant safety and medical benefit. Existing laws already prohibit our program from discriminating on the basis of disability, and we urge you to vote Ought Not to Pass.

Thank you for the opportunity and I would be happy to answer any questions that you may have.