AST Webinar 'Financial Barriers to Living Kidney Donation: Educational Strategies for Potential Donors to Minimize Risk'

Additional Q&A

Speakers:

Lara Tushla, LCSW • Rush Transplant Center

Andrea Tietjen, CPA, MBA · Saint Barnabas Medical Center

Moderator: Rebecca Hays, MSW • University of Wisconsin Transplant Clinic

1. Q: How does a foreign donor w/ only a tourist VISA donate?

A: First, confirm your center's policy on acceptance of foreign donors. Costs of the donor's pre workup and donation would be covered under the recipient's insurance... but, you would have to assess for the long term plan for donor complications, if the donor returns to their home country. Also, consider what the plan of care would be if a medical condition was discovered during the workup. What is your center's position on this? Recipient insurance would not cover any donor treatment. This assessment and education need to take place early on, so you can determine if this donor is appropriate. From a financial perspective, the foreign donor would be covered if the recipient had adequate coverage as any other donor would be. The difference would be what resources would be available to the foreign donor to seek care if treatment was needed or if the patient returned to their home country. Does the recipient have means? As a "tourist" the donor would have very limited, if any, access to public resources. charges in the US would be covered via recipient insurance/Cost Acquisition just like any other donor but getting care in the home country will not be covered by recipient insurance and may be a real risk for this population—both routine follow-up and access to care in the case of a complication or new onset problem

In addition to what Andrea shared, in our center it starts with the screening questions and eligibility criteria that are pertinent to any donor.

Will the donor...

- be able to stay near the transplant center for our required period of time,
- be able to do the required follow up care up,
- be able to stay in the area longer if there are complications

Unique to foreign donors, <u>assuming the donor is already in the US</u>... when does the donor need to return to the home country? Tourist VISAs are good for up to 6 months. While living donor evaluations typically can be accomplished quickly, there are times when either the donor or recipient has findings in the testing which delay the process. Will the person have access to care (geographically and financially) in the home country for the labs, office visits, or if there are any donation related complications? It seems highly unlikely that a US insurance plan or OACC would be able to reimburse a health care provider out of the country.

For donors <u>who are currently outside the US</u> and want to come to donate, we have had limited success with donors successfully getting VISAs. It has seemed the most difficult barrier is for the Embassy to have confidence that the person will return to their home country within the allotted time. The next hurdle has been getting basic medical information regarding the donor (blood type, blood pressure readings, height, weight, basic medical

history, etc) while they are still in their home country. It does not make sense to have a donor come the US if they do not meet our criteria. Given the uncertainty of timing for swaps and exchanges, a person in the US on a 6 month Tourist VISA does not seem like an appropriate swap candidate.

2. Q: Do you have experience with recipients having a "donor champion," which is someone who asks, or tries to get a donor for the recipient. If so, how well has this worked.

A: We are not using a donor champion but we have successfully implemented two other methods to assist in identifying donors:

- a. Our center created education to help the recipient to seek donors. It is an education tool that guides patients through the process
- b. We have also initiated professional training for our multi-disciplinary team on how to discuss donation and assist patients in identifying donors. The consultative group, Effective Arts, a group that also trains OPOs on how to approach potential deceased donor families, provides this training series to our team.

We are also not currently using a donor champion program. The literature I have seen about trained Live Donor Champions has been from the experiences at Johns Hopkins University. Their pilot programs have showed a significant improvement in donor referrals and transplant.

3. Q: why doesn't the NDLAC assist the altruistic donor?

A: Please contact the NDLAC regarding this question. They can address their current process as well as pending changes and enhancements.