

# A Congressional Perspective on Organ Allocation

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Try to imagine an attempt by the Federal Government to nationalize the system of organ allocation. Imagine a plan to put the decision about who will get a liver, kidney, or other vital organ—the decision of who lives and who dies—in the hands of a Washington bureaucrat instead of local doctors. If you think it sounds like something out of George Orwell and that it couldn't happen in America, think again. Bill Clinton's Department of Health and Human Services has already attempted to do just that.

In April, HHS Secretary Donna Shalala tampered with the Organ Transplant Act and tried to impose a mandatory organ allocation scheme that would dramatically alter, centralize, and politicize the current system.

Experts from Louisiana and all over the country wrote, called, and even visited me in Washington to enlist my help to stop this bureaucratic power grab from taking effect. They explained that this new rule would cause an actual increase in waiting times as patients in areas with strong organ donation response and short waiting lists would be put on hold as organs were shipped to other parts of the country.

Some fear that smaller transplant centers all over the country would be forced to close in favor of a few large medical centers. If those local centers close, what happens to people who can't afford to travel to large centers? Medicare isn't going to pay for travel and lodging costs. Even if they could get to one of the few large regional transplant centers for the transplant operations, would they be forced to travel repeatedly for check-ups? Would they have time to travel thousands of miles if emergencies arose?

Finally, there was real anxiety concerning the establishment of a centralized system that could become politicized and corrupt. Doctors, not federal bureaucrats who are beholden to political masters, should make these critical medical decisions. As one gentleman who called my office to protest the change said, "I'll remove my name from the donor list if they let Big Brother take over the transplant system." He wondered aloud if you'd have to pass a political litmus

test before you or a loved one received an organ. He wasn't alone in that suspicion.

To remedy the situation, I've added a legislative provision to the Labor, Health, and Human Services and Education Appropriations Bill placing a 1-year moratorium on the implementation of Secretary Shalala's new regulations. This allows the current system to continue making improvements while it remains intact. And I intend to work on a permanent solution in the next legislative session.

It's no secret that people prefer to have transplant surgery close to home, where strong support systems are already in place. And it's no surprise that a higher percentage of people will agree to become organ donors if they know that it will benefit a neighbor or relative in their home state. All wisdom does not reside in Washington, despite what Bill Clinton and Donna Shalala may think.