



GIFT of LIFE

DONOR PROGRAM

THE REGION'S ORGAN & TISSUE TRANSPLANT NETWORK

Donor Referrals:
800-KIDNEY-1
(800-543-6391)

Public Information:
800-DONORS-1
(800-366-6771)

www.donors1.org

July 1, 2026

via Electronic Submission

The Partnership for Quality Measurement
P.O. Box 1532
Brunswick, GA 31521

RE: CBE IDs: 5601, 5602, 5603, 5604

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Dear Partnership for Quality Measurement (PQM) Team:

Gift of Life Donor Program appreciates the opportunity to provide comments on the following measures:

- CBE ID: 5601 Rate of Hospital Referrals of Potential Organ Donors Made to the Organ Procurement Organization (OPO) from within the OPO's Donation Service Area in a Calendar Year.
- CBE ID: 5602 Rate of Referred Patients that are Approached for an Organ Donation in the Organ Procurement Organization's Donation Service Area in a Calendar Year.
- CBE ID: 5603 Authorization Rate for Organ Donation Among Approached, Referred Potential Organ Donors in the Organ Procurement Organization's Donation Service Area in a Calendar Year.
- CBE ID: 5604 Rate of the Number of Organ Donors to the Potential Donors in an Organ Procurement Organization's Donation Service Area in a Calendar Year.

As a member of the Organ Procurement Organizations (OPO) community, we firmly support the proposed measures for endorsement.

BACKGROUND

Gift of Life Donor Program is a federally designated nonprofit OPO headquartered in Philadelphia, Pennsylvania. It is one of the largest OPOs in the United States, serving more than 11.3 million people across the eastern half of Pennsylvania, southern New Jersey and Delaware. Gift of Life consistently ranks in the highest-performing tier of the Centers for Medicare & Medicaid Services (CMS) for donation and transplant rate metrics, and in 2025 achieved a new national record coordinating the most life-saving organs transplanted of any OPO in the U.S. Since the start of the U.S. national system in 1988, Gift of Life has coordinated the transplantation of almost 44,000 organs across the country, the most of any OPO.



A Donate Life Organization

The non-profit organization serving patients, families and hospitals in the eastern half of Pennsylvania, southern New Jersey and Delaware.

DISCUSSION

Improvements in the organ donation system cannot happen unless there are strong metrics that accurately measure the performance of the different stakeholders in the system. The metrics, and oversight within the system, should reflect what each part of the system actually does and not just the final outcome. When metrics are inaccurate, they not only affect organizations; they can also affect patients waiting for lifesaving transplants. Good measurement leads to better decisions, stronger accountability, and more lives saved.

The two current CMS metrics - donation and transplant rate - do not fully reflect the role of OPOs in the system. Additionally, the current transplant rate reflects the performance of the entire system, including transplant centers and logistics, not just OPOs. This makes it difficult to fairly evaluate performance or identify where improvements are truly needed. As a result, the current framework risks unintended consequences for patients and system stability. Under the current framework, nearly half of OPOs could face decertification or competition this year. Based on current data, OPOs serving up to 72 percent of the U.S. population will be impacted by the end of 2026. This creates the potential for widespread disruption across the donation system. Organ donation is a highly coordinated, time-sensitive process, and instability anywhere can impact patients everywhere. The focus should be on improving performance while maintaining continuity of care for patients and donor families.

AOPO, in partnership with 53 OPOs and Econometrica, Inc., launched a national effort to develop better performance metrics identified as the four measures mentioned above. These measures are the result of a rigorous, multi-stakeholder development process that included independent measure development experts, technical expert panel input, stakeholder interviews, site visits, literature review, and testing consistent with CMS measure development standards. This coordinated effort has ensured the metrics are objective, scientifically sound, and trusted by policymakers.

Additionally, they focus on the work OPOs actually do. These four measures provide a comprehensive assessment of the organ donation process - from referral and approach through authorization and donation. This allows OPOs and stakeholders to identify opportunities for improvement at specific stages of the donation process and implement targeted quality improvement efforts. This level of transparency and actionable insight is not possible when performance is evaluated solely through end-stage outcome measures.

At Gift of Life Donor Program, data is a core component of our quality improvement program. We routinely analyze referral, approach, authorization, and donation performance to identify trends, measure outcomes, and guide targeted improvement efforts across our Donation Service Area.

Our teams use hospital-level and process-level performance data to identify opportunities to strengthen referral practices, improve the timeliness and consistency of donor evaluation, enhance family authorization processes, and maximize organ donation and transplant opportunities. Performance data are shared with hospital partners and internal operational teams

to support collaborative quality improvement initiatives, staff education, and ongoing performance monitoring.

We also use this data to evaluate the effectiveness of process changes, identify variations in practice, perform root cause analyses when opportunities are missed, and prioritize quality improvement efforts where they can have the greatest impact. This continuous feedback loop allows us to make evidence-based operational decisions and monitor the results of interventions over time.

The proposed measures align more closely with how OPOs already use performance data to improve the donation process. By providing standardized, stage-specific measures across referral, approach, authorization, and donation, they will further strengthen quality improvement efforts, promote accountability, and enable more meaningful benchmarking across OPOs while ultimately increasing opportunities to save lives through transplantation.

A fundamental limitation of the current CMS donation and transplant rate measures is the definition of the potential donor population used as the denominator. The current methodology relies on a broad proxy population derived from death certificate data that is approximately two years old at the time OPO performance is measured. As a result, OPOs are evaluated using a historical population that does not reflect current clinical practice or patient demographics and are unable to meaningfully assess the impact of process improvements or respond to performance trends in a timely manner. In addition, the death certificate-based denominator includes many patients with documented medical contraindications to organ donation and others who were never realistic donation candidates. As a result, OPO performance may be assessed against opportunities that did not truly exist.

The proposed measures represent a meaningful improvement by using a more clinically relevant potential donor population that excludes patients with documented contraindications to organ donation and better aligns with the population OPOs are expected to evaluate. While this denominator remains a proxy for true donation potential, it provides a substantially more accurate and actionable foundation for performance measurement than the current CMS methodology.

While these measures represent a substantial improvement over the current CMS framework, we also encourage continued refinement of organ donation performance measurement. In particular, further development of standardized process measures, enhanced national data collection, and consistent validation methodologies would allow future measures to more precisely identify true donation potential and distinguish opportunities for improvement throughout the donation process. As data quality, standardization, and the availability of timely data continue to improve, the donation community should continue working toward measures that directly assess performance rather than relying on historical proxy populations.

These improved measures provide more actionable information to help ensure that every donation opportunity is maximized. They support better coordination across hospitals,

OPOs, transplant centers, and regulators by providing a more transparent understanding of where opportunities for improvement exist so organs reach patients faster, and they strengthen transparency and public trust, which is essential for donation. Ultimately, better measurement means more transplants and more lives saved.

CONCLUSION

Gift of Life Donor Program appreciates the opportunity to provide comments on the proposed measures—**CBE IDs 5601, 5602, 5603, and 5604**—for endorsement. As an organization committed to advancing strategies that increase the number of lives saved through organ donation and transplantation, Gift of Life Donor Program offers these comments in support of that mission.

Sincerely,



Richard D. Hasz
President & CEO