Providers have a misconception that people with disabilities, especially those with intellectual and developmental disabilities (IDD), are unable to manage complicated post-operative treatment and would not benefit from a transplant. Providers may also assume that people with disabilities have a lower quality of life than those without disabilities and would not benefit from life-saving transplants.

**WHY IS THIS BILL NEEDED?**

Misconceptions about people with disabilities

Providers have a misconception that people with disabilities, especially those with intellectual and developmental disabilities (IDD), are unable to manage complicated post-operative treatment and would not benefit from a transplant.

Providers may also assume that people with disabilities have a lower quality of life than those without disabilities and would not benefit from life-saving transplants.

**THE FACTS**

The Stanford University Study

A 2008 survey of 88 transplant centers conducted by researchers found that 85% of pediatric transplant centers consider intellectual or developmental disability as a factor in their determinations of transplant eligibility at least some of the time.*

Charlotte Woodward received a heart transplant in 2012. Since then she has tirelessly advocated against discrimination.


71% of heart programs surveyed “always” or “usually” considered IDD diagnoses when deciding eligibility for transplantation.

52% of people with IDD receive a referral for a specialist evaluation.**

33% of those who are referred are never evaluated.**