

“Lives at Stake: Holding Tax-Exempt Organ Procurement Organizations Accountable”

Prepared Testimony to the House Ways and Means Oversight Subcommittee

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Nycki Martin

Kentucky Organ Donor Affiliates Whistleblower

Chairman Smith, Ranking Member Neal, Chairman Schweikert, and Ranking Member Sewell.

Thank you for the essential work your committee is undertaking to bring transparency to the corruption, dangers, and systemic deception embedded in the organ procurement industry.

I previously worked as a surgical preservationist at an OPO. My role there was to assist in the safe recovery and preservation of organs for lifesaving transplants.

From my firsthand experience, it appeared that my former employer was exploiting a regulatory loophole to advance its metrics and increase Medicare reimbursements at the expense of organ donors and their families, who I believed were being misled and taken advantage of.

In 2021, TJ Hoover was brought to the hospital in cardiac arrest. As a registered organ donor, his family agreed to honor his wishes. TJ remained unresponsive for several days regaining consciousness during his cardiac catheterization. Immediately upon waking, he was paralyzed and sedated. Hospital staff described the situation as “inhumane”, and akin to “human euthanasia.” The cardiologist present advised TJ should never have been given a grave prognosis with no meaningful recovery given his reflexes present.

Despite being alerted to these concerns, the OPO’s staff returned TJ to the ICU without performing the required repeat neurological exam. Even more alarming, and to the best of my knowledge, the family was never informed that TJ had regained consciousness and had shown meaningful emotion and purposeful movement. Under my former employer’s own protocol, the case should have been halted immediately once neurological function improved. The failure to do so represents a profound breach of medical standards and ethical responsibility.

Following TJ’s case, an Organ Operations Manager convened a staff debriefing. It quickly became clear that my former employer was attempting to contain the situation. Despite multiple staff urging reporting the case to appropriate authorities, we were told the OPO would handle it internally, our access to TJ’s records was restricted. We were silenced. This experience resonated when I read this Committee’s letter to the New Jersey Sharing Network. The parallels between those whistleblower allegations and my own are unmistakable—patterns of concerning organ-recovery practices, document destruction, and retaliation against those reporting legitimate concerns—highlighting systemic failures that demand urgent accountability and reform.

After I came forward as a whistleblower, the Health Resources and Services Administration launched an investigation into my former employer. In just 89 days, there were 103 cases in which the organ donation process was initiated in error. What is even more frightening is that the investigation only examined cases in which the patient survived. We have no way of knowing how many times organs may have been recovered from patients who would have otherwise lived. The scope of this risk is staggering and underscores a systemic failure that cannot be ignored.

This OPO's mission under their current leadership is described as one focused on restoring public trust, enforcing ethical and medical standards, and prioritizing donor and patient safety over metrics. As far as I am aware, the administrative leaders involved in the decisions surrounding TJ's case are still serving in leadership roles at the OPO. The organization overseeing donation has not admitted wrongdoing, nor has it shown compassion, remorse, or any commitment to real change. This lack of accountability is precisely why organ donation in some states remains unsafe.

The pursuit of metrics can never supersede the fundamental mission of saving lives through transplantation, nor justify misleading families who are already in the depths of grief and counting on their loved one's donation to make a difference. OPOs must be held accountable for wrongdoing so that Americans can trust that organ donation is safe, ethical, and worthy of their generosity.

I urge this Committee to do all it can to continue its' investigations into OPOs and UNOS. I believe in organ donation and have devoted much of my life to it, and I am now pleading with Congress to do everything in its power to make this process safe by working with HHS, CMS, and HRSA to identify and replace dangerous actors and protect our most vulnerable patients.