About LifeCenter Northwest

Founded in 1997, LifeCenter Northwest is the nonprofit organization responsible for coordinating deceased organ and tissue donation across Alaska, Montana, North Idaho, and Washington. As one of 55 federally designated Organ Procurement Organizations (OPOs), LifeCenter Northwest operates within a highly regulated federal framework and is uniquely positioned to:

- **Manage the nation's largest and most complex donation service area:** Coordinate time-sensitive organ and tissue recovery and transport across vast geographic distances, extreme weather conditions, and limited transportation infrastructure – capabilities unmatched by any other OPO in the country.
- **Provide specialized, compassionate support to donor families:** Deliver 24/7, trauma-informed care before, during, and after donation, including post-donation bereavement support and opportunities to honor donors through local and region-wide commemorative events and legacy programs that recognize the life-saving impact of their loved one's gift.
- **Lead community education and trust-building efforts:** Conduct evidence-based public education and outreach across diverse rural and urban communities to increase donor registration, counter misinformation, and strengthen public trust in the donation and transplantation system.

About the LifeCenter Northwest Team

The positions we provide offer stable, well-compensated employment with meaningful career pathways, contributing to a skilled local workforce and strong economic outcomes for constituents.

- **325+ team members living throughout our service area**
    - 11 residing in Alaska
    - 8 residing in North Idaho
    - 32 residing in Montana
    - 283 residing in Washington
- **Roles:**
    - 70% clinical
    - 15% administrative
    - 15% leadership
- **Team member backgrounds include:**
    - Licensed medical professionals including MDs, RNs, NPs, Surgical Technicians, Respiratory Therapists
    - Paramedics and Emergency Medical Technicians

    - Social Workers / Counselors
    - Chaplaincy
    - Certified Business and Non-profit Professionals
    - Hospital Administrators and Industry Executives
    - Military Veterans

LifeCenter Northwest Donation Service Area

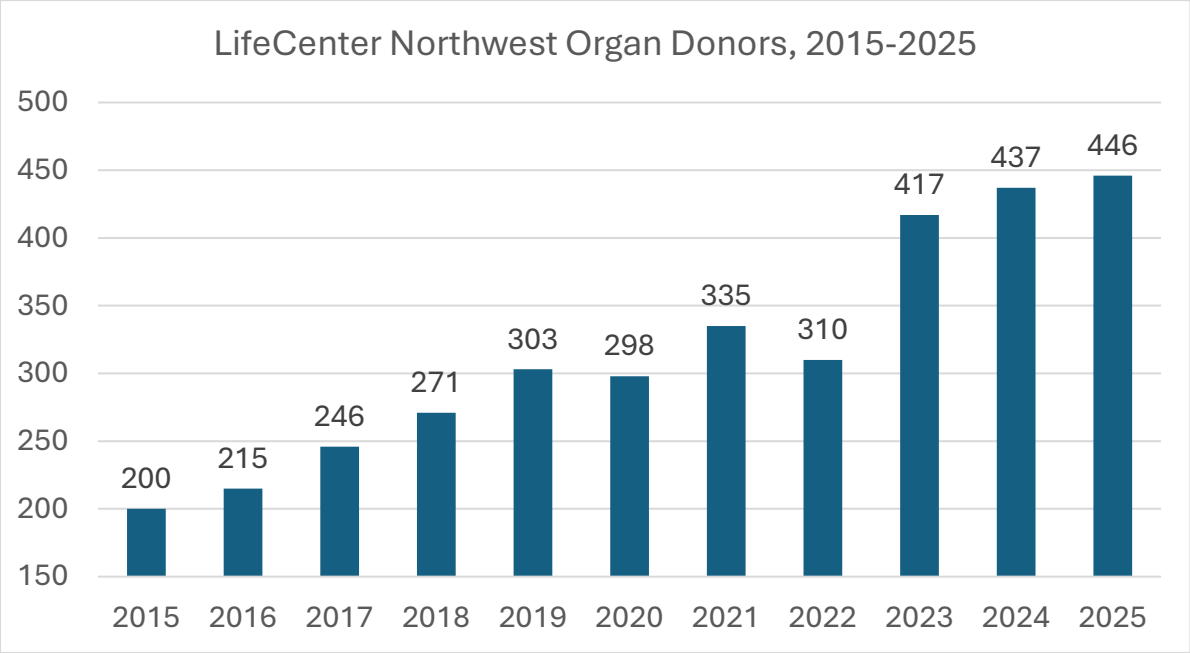
LifeCenter serves the largest organ donation service area in the country, much of it rural and geographically remote. Notably, there are only four states without transplant centers in the entire U.S., and three of them – Alaska, Idaho, and Montana – are in our service area. This means organs recovered in other states must be transported quickly over long distances to reach patients awaiting transplant. Notably, more than 55% of the organs we recover are transplanted outside of Washington transplant programs, underscoring both the complexity of our service area and the national impact of our organ placement efforts.

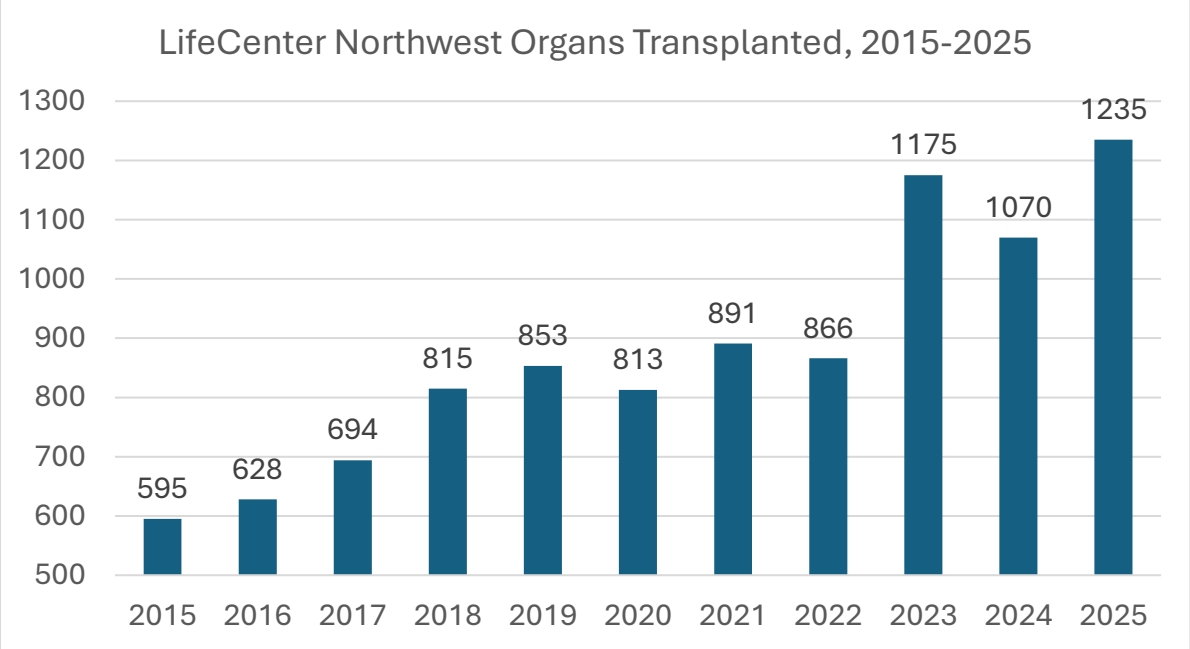
These challenges are further compounded by the need to move organs from Alaska and across coast-to-coast routes within very limited time windows. Despite these constraints, LifeCenter coordinates complex, time-sensitive transportation and leverages innovative preservation technologies to ensure organs reach transplant centers safely and without delay.

- Largest geographical footprint of any Organ Procurement Organization
- 808,360 square miles
- 10.4 million people in diverse communities
- 100+ languages spoken
- 271 Indigenous Tribes
- 230+ hospitals
- 108+ driver's license offices (Montana and Washington)
- Medical examiners and coroner's offices
- Only five local transplant centers
    - Providence Sacred Heart Medical Center – Spokane, Wash.
    - Seattle Children's Hospital – Seattle, Wash.
    - Swedish Medical Center – Seattle, Wash.
    - University of Washington Medical Center – Seattle, Wash.
    - Virgina Mason Medical Center – Seattle, Wash.

LifeCenter Northwest performance

In 2025, collaboration with donor families and hospital partners across the state led to a record-breaking number of lives saved through organ donation – the highest total in the organization's 28-year history. These results not only reflect the strength of our partnerships and shared commitment but also demonstrate growth that significantly outpaced the national industry average over the last decade, marking a milestone year of measurable impact and lifesaving progress.





Protecting Public Trust in Organ Donation

LifeCenter Northwest continues to significantly expand its investment in community education and outreach across the largest organ donation service area in the country, serving both rural and urban communities. This investment supports well-paying, mission-driven local jobs and strengthens trust at the community level. Impact highlights include:

- **Expanded local investment:** Deployed a team of 12 External Affairs professionals in the past year to strengthen community-based education and engagement.
- **Increased constituent reach:** Increased our presence at community events from 13 to 36+ across our region, nearly tripling direct community engagement.
- **Urgent need:** Rising misinformation and sensationalized narratives about organ donation, a growing challenge nationwide, have led to a measurable increase in donor registry removals in multiple communities.
- **Evidence-based response:** We counter misinformation with trusted, local voices – healthcare professionals, donor families, transplant recipients, and care teams – who bring real-world experience and credibility.
- **Impact:** This approach protects public trust, supports informed decision-making, and ultimately saves lives.

LifeCenter Northwest Technology and Clinical Advances

At LifeCenter, we are committed to saving more lives through the adoption of innovative clinical practices and advanced technology. Examples of this work include:

- **Advanced organ tracking technology:** Deploying real-time 5G tracking devices to monitor location, temperature, and other critical conditions for organs in transit, helping ensure organ viability from recovery to transplant.
- **Expanded use of Normothermic Regional Perfusion (NRP):** Increasing access to transplantation by expanding the use of NRP, an innovative organ preservation technique. To date, LifeCenter Northwest has supported 10 NRP donors, resulting in 34 transplanted organs – many of which would not have been viable without NRP.
- **Virtual reality clinical training:** Developing a virtual reality simulation program to train clinical staff, featuring a fully immersive virtual ICU environment. This scalable platform enables consistent, high-quality training for staff across all regions, regardless of location.
- **Addressing geographic and logistical challenges in organ transplantation:** Successfully coordinating long-distance organ transport across vast regions to ensure organs reach recipients in need, including:

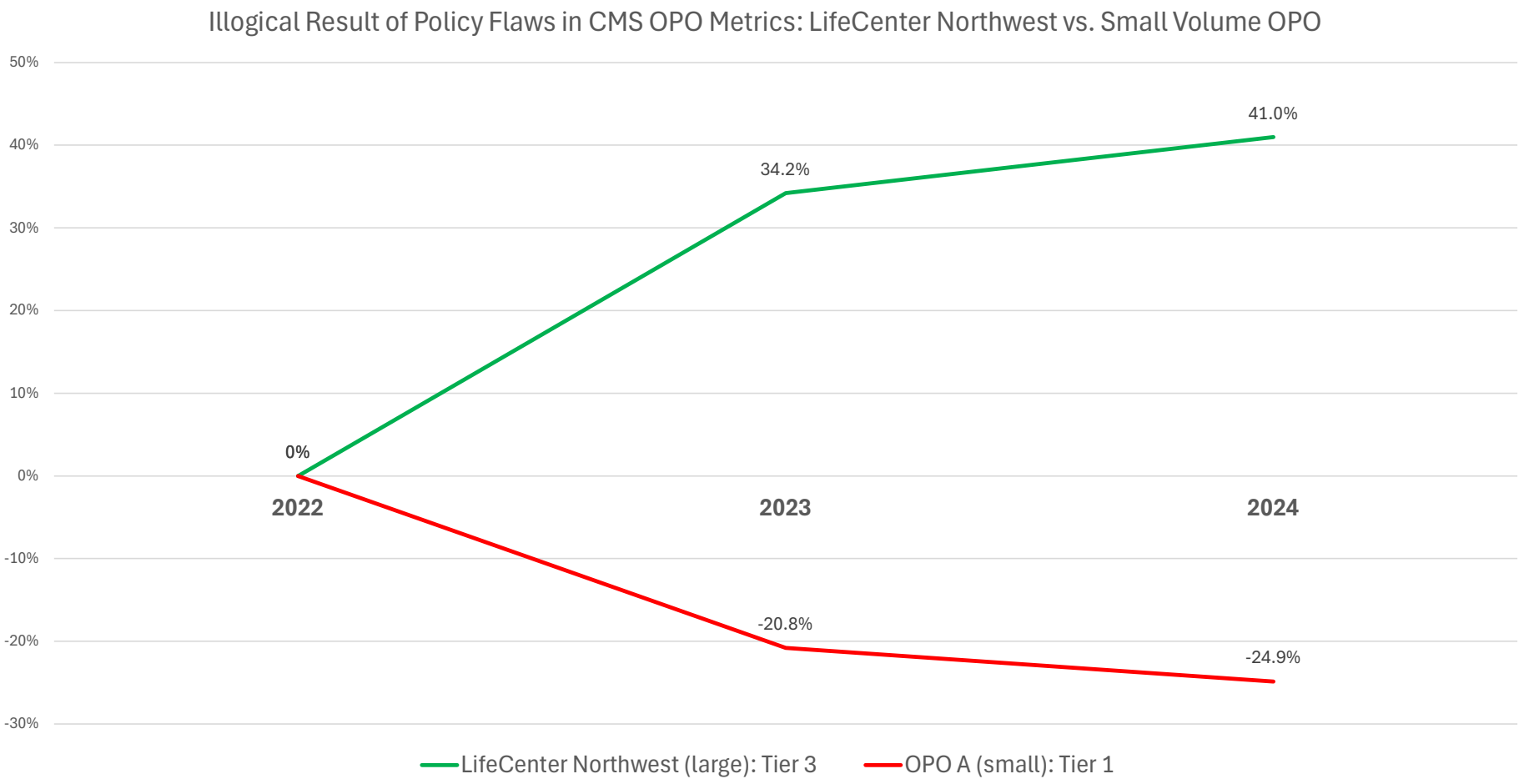
- A liver recovered by the LifeCenter Northwest team traveled more than 3,500 nautical miles and was preserved for 20 hours on a perfusion device while a recipient was identified, ultimately resulting in a successful transplant.
- A heart transported 2,506 miles from Juneau, Alaska to Boston – the longest-distance heart transplant at the time – using an innovative cooling and mobile monitoring system to maintain optimal organ conditions throughout the journey.

Your Support Matters

We ask Members of Congress to send a letter to CMS Administrator Oz urging him to stop further implementation of the OPO evaluation system established in the 2020 Final Rule governing OPOs and make common sense changes to replace it with one that is consistent with CMS' standard approach to other healthcare industries. These changes are essential to align CMS' goal to increase donation and transplantation with the realities of the donation and transplant ecosystem and to avoid interruption to the critical lifesaving work of OPOs and transplant centers.

CMS must take steps to ensure stability and continuity in OPO functions in 2026 and beyond. The implementation of an evaluation system for recertification that accurately and reliably measures OPO performance using objectively verifiable data, consistent with CMS's approach to all other health care entities, will provide an effective tool to drive performance improvement.

Your support in advancing effective system reform will directly benefit patients waiting for a life-saving transplant and honor the individuals and their families who selflessly choose to donate. With timely and thoughtful action, we can prevent disruption and ensure that this vital system continues to serve those who depend on it most.



Source: Organ Procurement & Transplantation Network (OPTN)

About LifeCenter Northwest

LifeCenter Northwest is the nonprofit organization dedicated to saving lives through deceased organ and tissue donation in Alaska, Montana, North Idaho and Washington. As one of 55 federally designated Organ Procurement Organizations (OPOs) in the United States, we are uniquely designed to:

- Orchestrate the deceased organ and tissue donation process
- Support donor families
- Educate communities

Donation Service Area

Largest geographical footprint of any Organ Procurement Organization:

- 808,360 square miles
- 10.4 million people in diverse communities
- 100+ languages spoken
- 271 Indigenous Tribes
- 230+ hospitals
- 108+ driver's license offices across Montana and Washington
- Medical examiners and coroner's offices
- 5 transplant centers – 3 of the 4 states we serve do not have a transplant center

Transplant Partners

Montana is one of only four states that does not have a transplant center.
Patients in need of a transplant and all recovered organs from Montana donors must travel out of state. The closest transplant centers are located in Washington state.

- Providence Sacred Heart Medical Center – Spokane, Wash.
- Seattle Children's Hospital – Seattle, Wash.
- Swedish Medical Center – Seattle, Wash.
- University of Washington Medical Center – Seattle, Wash.
- Virgina Mason Medical Center – Seattle, Wash.

About the LifeCenter Northwest Team

325+ team members living in our donation service area

Team member backgrounds include:

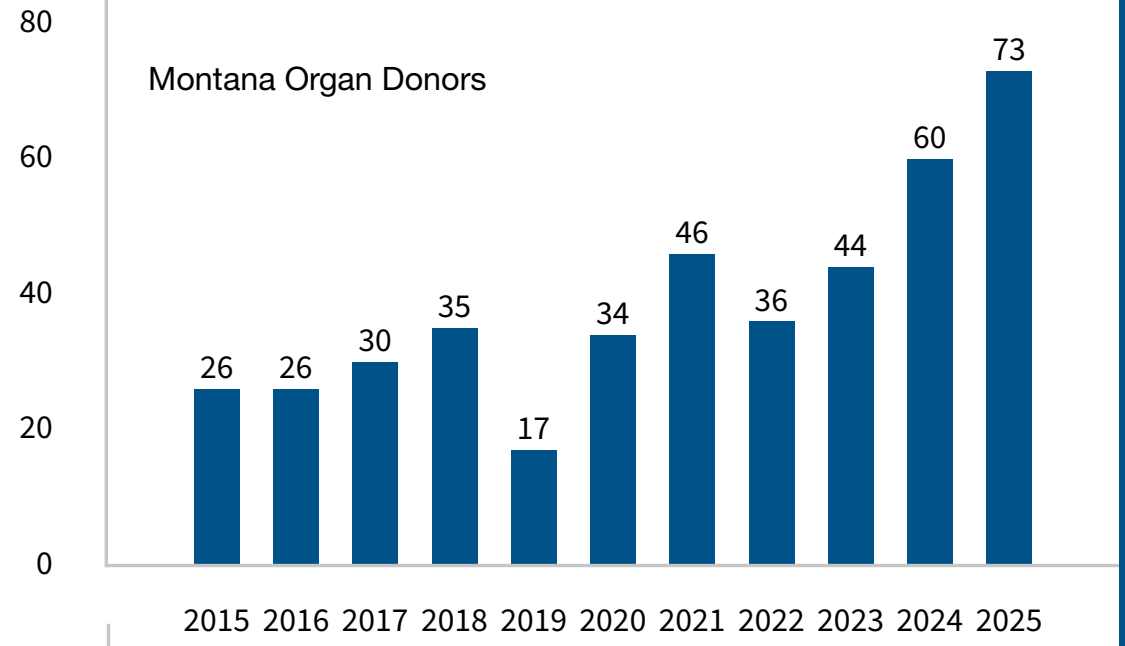
- Licensed medical professionals including:
  - MDs, RNs, NPs
  - Surgical Technicians, Respiratory Therapists
- Paramedics and Emergency Medical Technicians
- Social Workers / Counselors / Chaplaincy
- Certified Business and Non-profit Professionals
- Hospital Administrators and Industry Executives
- Military Veterans

32 Montana staff

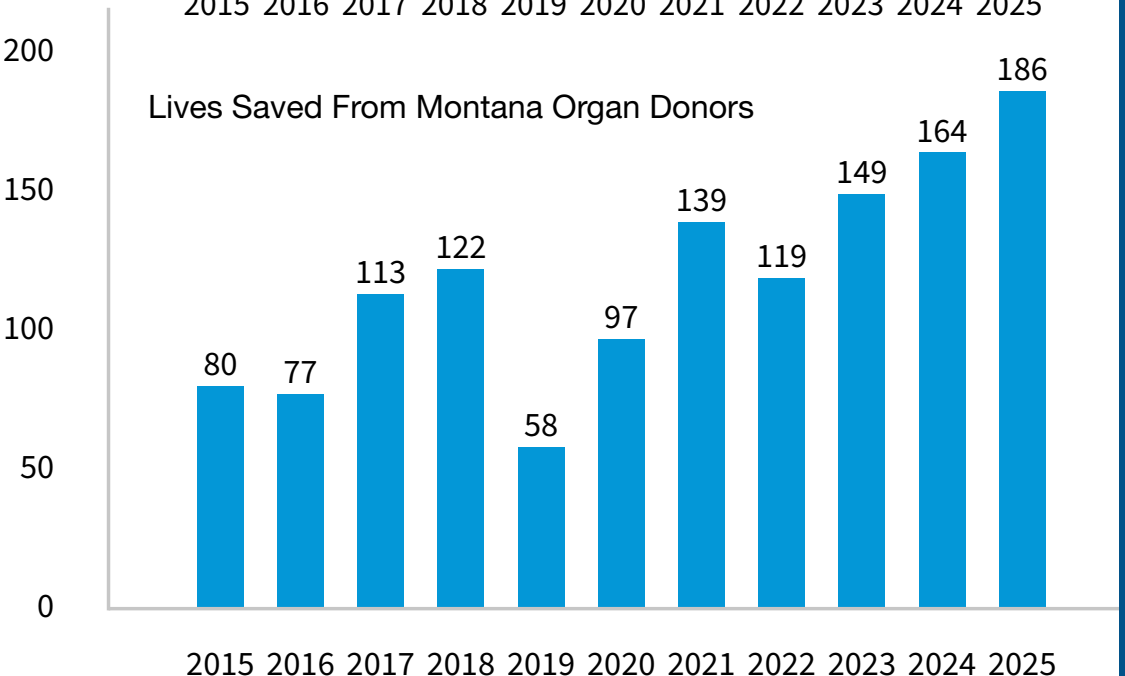
Roles:

- 70% clinical
- 15% administrative
- 15% leadership

Donation by the Numbers



181% increase in organ donors from 2015 to 2025



133% increase in the number of lives saved by Montana donors from 2015 to 2025

Organ Procurement Organization (OPO) – CMS Outcome Metrics

Background and Concerns

LifeCenter Northwest is the nonprofit organization dedicated to saving lives through organ and tissue donation in Alaska, Montana, North Idaho and Washington. As one of 55 federally designated Organ Procurement Organizations (OPOs) in the United States, we are uniquely designed to:

- Orchestrate the organ and tissue donation process
- Support donor families
- Educate communities

The ability for LifeCenter Northwest to carry out our mission depends on trusted partnerships, deep community engagement, and the expertise of highly trained staff. We rely on a network of critical collaborators including donor hospitals, transplant programs, and the community to ensure that every individual and family wishing to give the gift of life through organ and tissue donation can do so.

As the organ procurement organization serving the nation's largest and most complex geographic area, our work is uniquely shaped by vast distances, diverse terrain, extreme weather – particularly in Alaska and Montana – and the realities of serving rural and remote communities. These factors add to the complexity and critical need for timely coordination and rapid response, as the window for donation and organ viability after recovery is limited. Despite these challenges, we remain deeply committed to honoring every donor's legacy and ensuring that life-saving opportunities are not missed.

As an OPO with demonstrated continuous growth, LifeCenter Northwest is committed to improving the nation's organ donation and transplantation system by collaborating with clinical colleagues, government entities, and community partners to increase organs available for transplant, reduce disparities in donation and transplantation, drive innovation in the field, and advocate for policies that promote effective, system-wide reform.

Unfortunately, CMS has created a fundamentally flawed OPO evaluation system that ignores well-documented and widespread concerns with its performance metrics and introduces unprecedented, draconian, and nonsensical decertification outcomes for high-performing OPOs like ours and threatens to harm patients and the communities we serve. Importantly, the metrics are inadequate to distinguish high and low performing OPOs.

We need your support to help ensure the stability and sustainability of our nation's donation and transplant system by urging CMS to make common sense modifications to its evaluation system and outcome metrics, replacing the flawed construct currently applicable to OPOs with one that accurately, fairly and transparently measures true performance.

CMS Outcome Metrics Will Destabilize Organ Donation System

In 2020, CMS finalized new rules for OPO performance measurement that apply to the 2022-2026 certification cycle.

The system that CMS established is based on two highly correlated outcome metrics:

Donation Rate
The number of deceased donors divided by potential donors* within an OPO's donation service area (DSA).

Organ Transplant Rate
The number of organs transplanted from an OPO's deceased donors divided by potential donors* within an OPO's DSA.

*Potential Donors = the number of deceased individuals within an OPO's DSA identified by death certificate data with a primary cause of death that is consistent with organ donation but without exclusions for contraindications for donation such as underlying cancer, systemic infection, and non-ventilated deaths.

Tier Structure – Recertification in 2026

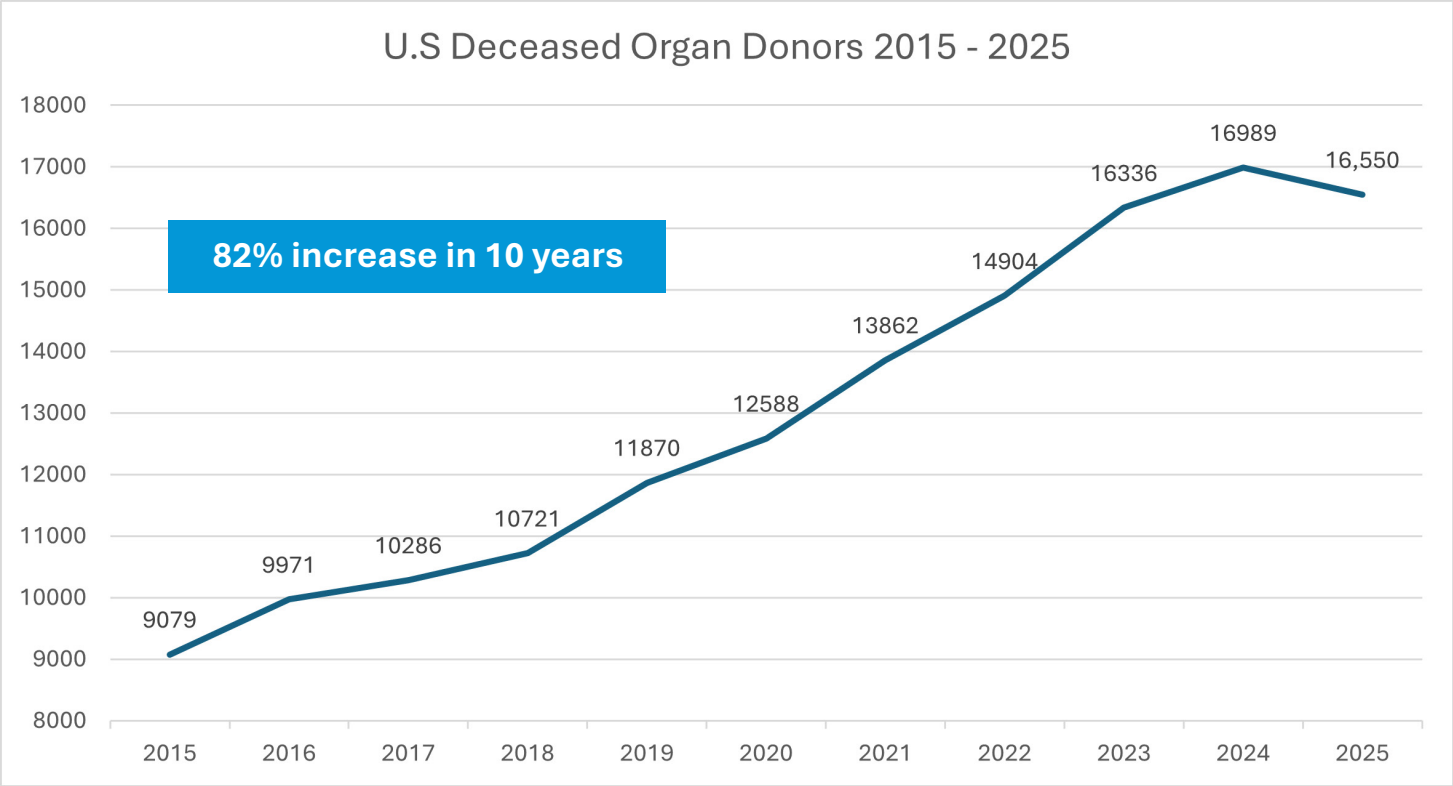
A benchmark with the median and top 25% thresholds is established for 2024 based on the performance of all OPOs from the prior year period (2023).

OPOs are placed into three tiers based on performance against the benchmark using data from a single 12-month assessment period (2024).

Note: Both the donation and the transplant rate metrics must meet the thresholds; otherwise, the OPO is placed in the lower of the two tiers.

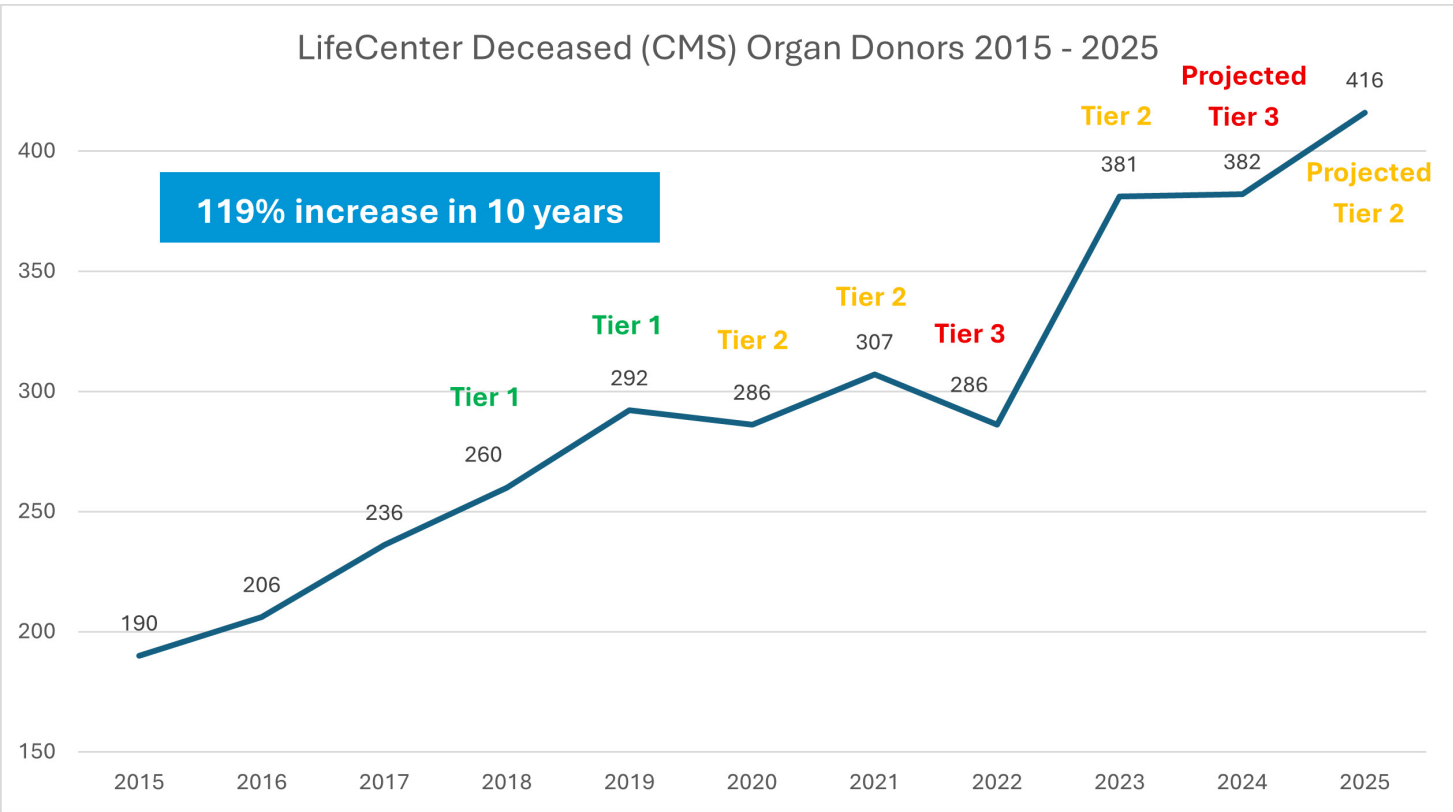
Tier 1:	Top 25% of the median — OPO recertified
Tier 2:	Above the median, below top 25% — OPO threatened with potential replacement and loss of service area
Tier 3:	Below the median — OPO automatically decertified and prohibited from participating in the nation's donation system

Progress in Improving Organ Donation System



Source: https://optn.transplant.hrsa.gov/data/view-data-reports/

Critics describe the system as chaotic and failing, but the evidence clearly shows this is not a system in decline. LifeCenter Northwest has a long-standing history of continuous improvement and growth.



Source: https://optn.transplant.hrsa.gov/data/view-data-reports/

CMS Outcome Metrics Will Destabilize Organ Donation System

Despite record growth and achievement across the country, OPOs serving 71.5% of the U.S. population are projected to face automatic decertification or be required to compete for their service area in 2026 based on CMS' fundamentally flawed performance metrics and evaluation system.

CMS' performance metric system for OPOs is unlike any other performance metric CMS has implemented for other health care entities, including donor hospitals and transplant programs. Importantly, modern performance metric systems:

- are based on balanced sets of metrics (including activity, quality, safety, and patient satisfaction scores);
- are adjusted for underlying characteristics that make comparison across entities fair and reasonable;
- compare "like" organizations;
- benchmark key performance indicators to the median performance and entities demonstrating highest levels of growth and improvement; and recognize and incentivize year-over-year improvements

The current OPO performance metric system includes none of these standards and baseline features. Further, the OPO regulations include draconian and unprecedented consequences for OPOs that fail to meet the flawed outcome metrics in a single year, regardless of overall performance or year-over-year growth during the four-year recertification cycle.

More specifically, the following are just some of the faulty aspects:

1. **OPOs with one metric below the median in 2024 will be automatically decertified.**

Why this matters:
Use of top 25% as a cutoff for recertification is unprecedented and nonsensical – it mandates substantially above-average performance for all OPOs, masks high performance and growth of larger OPOs, ignores year-over-year improvement, and threatens widespread decertification of strong performers.

CMS Outcome Metrics Will Destabilize Organ Donation System

2. CMS evaluates performance using only two closely correlated metrics and, contrary to the statute, doesn't apply process measures or multiple outcome measures.

Why this matters:
Congress directed CMS to apply both process and multiple outcome measures to evaluate OPO performance. CMS's two closely correlated outcome metrics do not include any process measures and do not accurately or reliably evaluate performance.

3. OPOs are held responsible for a transplant rate when they do not have direct control over the outcome.

Why this matters:
Transplant surgeons, not OPOs, decide whether an available organ is transplanted.

Importantly, while organs made available for transplant continue to increase each year, the national rate of organs going unused by transplant centers also continues to rise. For example, in 2023, 28% of all recovered kidneys went unused, despite 26,253,656 offers being made by OPOs to place those 8,570 kidneys.

Then in 2024, according to the Scientific Registry of Transplant Recipients, the percentage of non-used kidneys climbed to more than 25% in 2024; this meant nearly 9,500 kidneys were offered and went unused, while more than 3,000 patients died on the waitlist awaiting a kidney.

[**Ref:** www.srtr.org/tools/donation-and-transplant-system-explorer]

4. The regulations do not account for important differences in geography of service areas – including distance from transplant centers, number of local transplant programs, and activity levels of the nearest transplant centers.

Why this matters:
While LifeCenter Northwest serves the nation's largest geographic area, it's also among the OPOs with the most limited access to robust transplant programs. For OPOs like ours that are distant from hubs of active transplant centers, organs must travel much farther to their destination.

Why this matters, cont.:
Increased distance makes it less likely those organs are accepted for transplant for a variety of reasons, including how long an organ will be outside the body before transplant, transplant program travel and timing impact, and increased cost to the transplant program.

LifeCenter Northwest has less access to transplant centers than any other OPO. Three of the four states we serve (Alaska, Idaho, and Montana) do not have a transplant center. The only other state that does not have a transplant center is Wyoming. Transplant center proximity and transplant volumes were the driving force behind LifeCenter Northwest exporting more than 50% of the organs we recovered in 2024. For kidney transplants, LifeCenter Northwest placed 55% of its kidneys within 250 nautical miles from the recovery site, compared to the national average of 82%.

The current metrics fail to account for these and other clear and impactful differences and therefore fail to accurately and consistently measure OPO performance.

5. Donor potential calculation is based on death certificates.

Why this matters:
Death certificates are a flawed data source resulting in inaccurate and delayed calculation of donor potential. CMS acknowledges these flaws but has not taken steps to use better data. Problems include, for example:

- Accuracy differs substantially by locality
- Do not include ventilator status at death (a patient must die in a hospital on ventilated support to be considered for organ donation)
- Do not consistently include factors that would automatically rule a patient out for donation so they do not accurately measure potential (i.e., includes deaths that would never be considered suitable for donation, such as patients with systemic infection or who died from underlying cancer)
- Data lags by 18 months

June 25, 2025 | LifeCenter Northwest Blog Post

https://lcnw.org/2025/06/cms-performance-report-flawed-metrics-need-reform/

CMS Performance Report: Flawed Metrics Need Reform

Stakes are high for patients on the transplant waiting list

In May of 2025, the Centers for Medicare & Medicaid Services (CMS) issued its **Organ Procurement Organization (OPO) Public Aggregated Performance** 2024 and 2025 Reports for data years 2022 and 2023 — importantly, CMS data lags two full years.

LifeCenter Northwest was ranked as a "Tier 2" OPO based on our 2023 performance; meaning we were above average but below the top 25 percent of performers. This ranking stands in contrast to LifeCenter's strong performance over the past five years, during which we set annual records for organ donation and transplant in our Donation Service Area (DSA) and increased the number of organ donors by 34% between 2020 and 2024. The number of lifesaving organs provided by LifeCenter for transplant rose by 32% at the same time.

What, then, accounts for the disconnect between the strong performance of LifeCenter Northwest and the CMS-assigned Tier 2 ranking? In short, the two metrics used by the federal government to rank OPO performance are insufficient and unvalidated.

For background, the CMS metrics rank OPO performance by donation rate and transplant rate and uses those rankings to assign each OPO to one of three tiers. OPOs below the median are placed in Tier 3. OPOs in the top 25% are assigned to Tier 1. OPOs performing above the median but below the top 25% are labelled as Tier 2.

The flaws in both the metrics and system of evaluation are obvious. Rather than judging OPOs by a fixed standard, the metrics grade all OPOs on a constantly shifting curve relative to median without accounting for the underlying conditions, making the comparison unfair and unjust. This means that even if an OPO maintains strong performance, it could still fall below the median and face severe consequences. In fact, under this flawed system, any OPO ranked below the median in 2026 faces decertification, a move that could throw the entire donation and transplant system into chaos.

Meanwhile, Tier 2 OPOs will not be recertified but instead forced to enter an undefined "competition" to continue their lifesaving organ donation work. The stakes are high for the patients awaiting transplant who may be left waiting longer because of disarray in the system if the sole OPO serving their area loses its ability to recover organs or spends its time and resources on a competitive process. This tiering system and its associated consequences are unlike any other healthcare entity that CMS regulates.

Furthermore, CMS' metrics are inaccurate and do not reflect actual OPO performance. Therefore, the likelihood is high that OPOs that are performing well will nonetheless be closed by the federal government and later replaced by a recovery agency that performs at a lower level than the previous OPO or has insufficient experience in solving for the problems that would increase donation in the acquired service area. This is evident given actual examples such as **OPOs being assigned to Tier 1 despite substantially decreasing numbers of organ donors** over the past several years. There are many reasons why the metrics do not accurately measure and rank OPO performance — the following focuses on two that significantly impact LifeCenter Northwest:

OPOs are held responsible for a transplant rate when they do not have direct control over the outcome.

Transplant surgeons, not OPOs, decide whether an available organ is transplanted. Importantly, while organs made available for transplant continue to increase each year, the national rate of organs going unused by transplant centers also continues to rise. For example, in 2023, 28% of all recovered kidneys went unused, despite 26,253,656 offers being made by OPOs to place those 8,570 kidneys.

In 2024, according to the **Scientific Registry of Transplant Recipients,** the percentage of non-used kidneys was more than 25%. This meant the number of kidneys offered that went unused climbed to nearly 9,500 kidneys, while more than 3,000 patients died on the waiting list awaiting a kidney.

These regulations do not account for important differences in geography of service areas.

LifeCenter Northwest is a prime example of this problem. We serve the largest geographic area in the country; much of our donation service area is rural or remote, and we also have the most limited access to larger transplant programs of any region in the country. Consequently, many of the organs we recover must travel much farther to reach a transplant center. Increased distance makes it less likely that the organs we recover are accepted for transplant for a variety of reasons, including longer time outside the body before transplant, transplant program travel and timing impact, and increased travel costs to the transplant program.

Importantly, LifeCenter Northwest is the only OPO without transplant centers in three states in our four-state service area (Alaska, Idaho, and Montana). Only one other state in the country has no transplant program (Wyoming). Transplant center proximity and transplant volumes were the driving force behind LifeCenter Northwest exporting more than 50% of the organs we recovered in 2024. For kidney transplants alone, LifeCenter

Northwest placed only 55% of kidneys recovered within 250 nautical miles of the recovery site, compared to the national average of 82%.

The current metrics fail to account for these clear and impactful differences, and therefore fail to accurately and consistently measure LifeCenter Northwest's performance.

There is broad agreement across the donation and transplant community that performance metrics are necessary to drive improvement and hold organizations accountable for their outcomes. There is also broad agreement in the community that such important metrics be accurate. The flawed measurement system currently in place does not meet that goal.

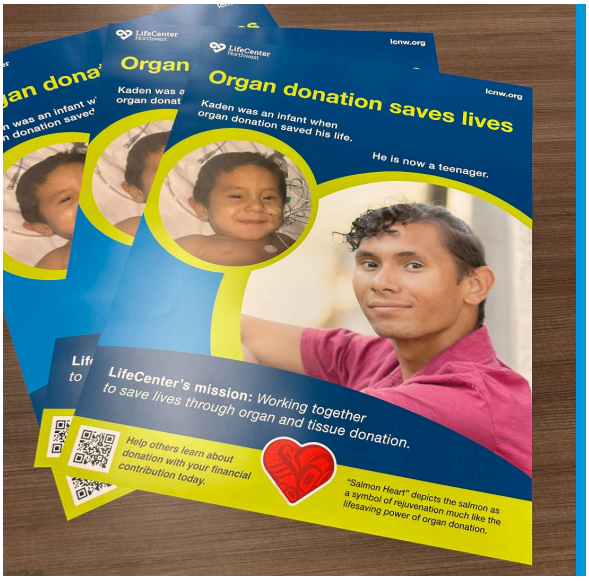
It is time for CMS to reform and improve its regulatory metrics and OPO evaluation system so that our nation's world-leading donation and transplant system isn't hindered by bureaucratic missteps.

Community Education and Engagement

Community education is an important service to inform our community members about the important gift of organ donation and transplantation. LifeCenter Northwest invests time and resources in breaking down barriers so people will say “yes” to organ donation and save the lives of those in desperate need of a transplant.

The Driver's License

Most people register as an organ, eye and tissue donor by checking the box at their local licensing office when receiving or renewing their driver’s license, permit or state-issued ID. The interaction with the MVD/DMV is a crucial part of the donation process. LifeCenter provides MVD/DMV-based outreach and training in Montana and Washington.



In Washington, every licensing office displays posters featuring a young transplant recipient, emphasizing donor registration. Offices with waiting-area TVs also show slides highlighting donors and recipients, reinforcing the donor registry question.

In both Washington and Montana, mailed licenses and state IDs include an insert explaining organ donor registration and providing contact information. More than 2 million inserts are printed annually.

Driver Training and Education

In Washington, organ donation education is a legislative requirement [WAC 308-108-150, Number 7] where instructors are to distribute organ donation educational materials to students. LifeCenter Northwest has the sole responsibility to develop and provide these materials for use by the state. In 2025, we understand that our materials reached nearly 67,000 students.

LifeCenter meets with Driver Instructors each year at their annual conferences (Montana Traffic Education Association and Washington Traffic Education Association). We provide educational materials, deliver presentation(s), and actively work to build relationships with attendees. In Montana, new driver instructors receive organ donation education from LifeCenter during their certification training each year.

Note, LifeCenter Northwest manages the donor registry in Montana and Washington. Alaska's donor registry is managed by Life Alaska Donor Services and Idaho's donor registry is managed by the Organ Procurement Organization, DonorConnect in Utah.

Realtime Community Resource

LifeCenter Northwest handles an average of 800 public inquiries per year about organ and tissue donation.

Staff provide accurate information, address concerns, and guide callers through the donation process. These calls may include questions about how to register as a donor, the impact of donation, eligibility criteria, deceased vs. living donation, and the difference between organ and tissue donation.

We provide thoughtful, compassionate responses and direct callers to additional resources as needed. Educating the public through these conversations helps dispel myths, encourages informed decision-making about donation, and can grow the registry to meet the needs of those in need of a transplant.

Community Events

LifeCenter Northwest is a community-based organization. We live and work in the states we serve and it's our neighbors who are waiting for transplants and who will be donors. LifeCenter teams are active and present in the community, participating in a variety of events throughout the region we serve.

Community Events, cont.

LifeCenter Northwest has been an active participant and sponsor of the annual Alaska Federation of Natives (AFN) conference in Anchorage since 2022.

This sustained presence ensures that organ donation education remains visible, accessible and rooted in partnership at one of the most important gatherings for Alaska Native leaders and families.

Our outreach efforts in the Black community are crucial in increasing minority representation on the donor registry. Black communities make up 13% of the U.S. population, but 35% of people with kidney failure. In Washington state, there are more than 130 Black patients on the organ transplant waiting list, almost all of them are waiting for a kidney transplant.

We also attend local Pride events, Native Powwows, health and wellness fairs held within churches and temples, and are regularly onsite with our hospital partners throughout our region.

The relationships we build and nurture at events like these, along with the trust we cultivate within each community, are essential to LifeCenter Northwest's mission and success.

Honoring the Gift of Life

The support that LifeCenter Northwest provides to donors and their families extends far beyond the moment of donation. We remain committed to honoring donors and their loved ones for years to come, recognizing the profound impact of their life-saving gifts. Throughout our service area, we host a variety of meaningful events that celebrate and commemorate their generosity.

One of our more meaningful traditions is the Governor's Gift of Life Award Ceremony, held in Alaska, Montana, and Washington. These ceremonies provide a formal opportunity for the governor and legislators in each state to acknowledge the heroic actions of organ donors and their families.

In addition, LifeCenter Northwest organizes Donation Celebrations in Anchorage, Alaska; Billings and Missoula, Montana; and Seattle and Spokane, Washington. These gatherings bring together donor families, transplant recipients, and community advocates to honor and celebrate the lives of organ, tissue and cornea donors.

Donor and Recipient Stories

Honoring donor John Francis Davis

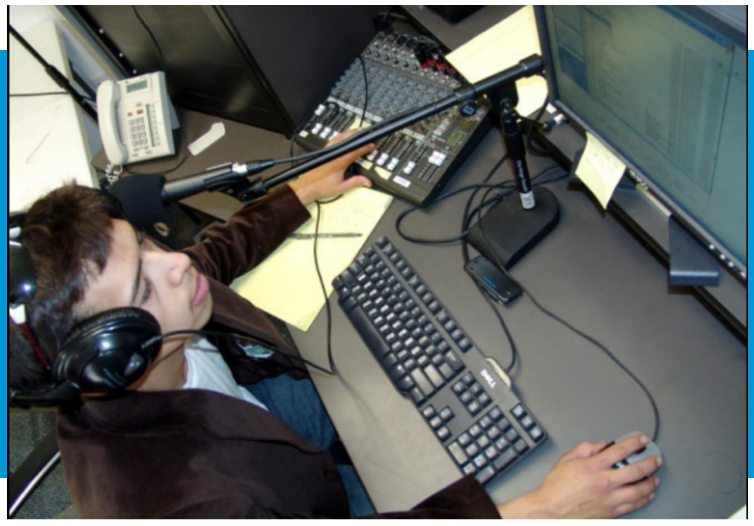
John Francis White Eagle Davis, also known in Blackfeet Nation as “The Captain,” was a high-spirited young man who possessed a special gift: He could connect with people of all ages and backgrounds. It was this gift that inspired him to volunteer as a disc jockey at 107.5 FM Thunder Radio in Browning, Mont., to amplify the voices of Blackfeet people.

"He loved everybody and he was civic-minded,” said Debra, John's mother.

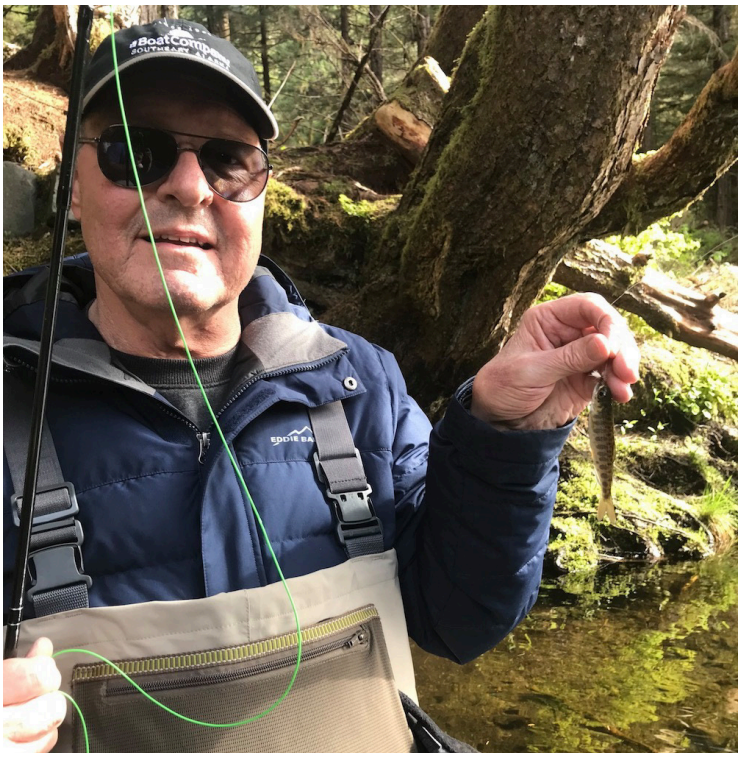
John was a registered organ donor and had reaffirmed his donor registration only two months prior to his unexpected death. LifeCenter Northwest coordinated an honor walk for John and his family, and John ultimately gave life to five people by donating his heart, lungs, liver and kidneys. He was also a tissue and cornea donor.

"It was so special," said Tim, John's father.

"We're so grateful that he was a donor. Honored, really. It has helped us a lot.”



Recipient Rev. Jim Shelden



At 76, Rev. Jim Shelden from Bozeman, Mont., moves through life with the steady gratitude of a man who knows every step is a gift.

Growing up, Jim always had heart trouble. A murmur was detected during his Navy physical after high school, but no further care was recommended.

Years later, while training for a 12K race, he blacked out mid-run and woke up on a stranger's lawn. The episode frightened him enough to finally see a cardiologist.

Jim endured three open-heart surgeries, two valve replacements, a pacemaker, ablations and every available medication over 35 years. His doctor delivered the final option: a heart transplant.

On Oct. 3, 2014, at 65 years old, Jim received a new heart. His donor was a 26-year-old man named Nelson from Washington.

A year later, Jim met Nelson's family. Today, that young man's heart allows Jim to keep up with his grandchildren — a legacy of love still beating strong.