

Unrelated Donor: Procurement Costs

When a patient requires a transplant from an unrelated donor, the physician will choose either umbilical cord blood or marrow or peripheral (circulating) blood cells (also called PBSC) from an adult donor based on a variety of factors, including the patient’s age and severity of disease.

Procurement costs

The cost of procuring unrelated donor cells varies greatly depending on the cell type and transplant protocol. Costs may be as low as \$30,000 or more than \$60,000 in cases where two simultaneous infusions of cells, such as a double cord blood transplant is needed.

Unrelated donor cell sources

Type	Procurement process
Marrow	Typically an outpatient procedure that takes place in a hospital. The donor receives anesthesia and cells are collected with a needle from the back of the pelvic bones.
PBSC	Outpatient procedure that takes place in a blood center or outpatient hospital unit. Leading up to donation, the donor is given injections of the drug filgrastim to increase the number of blood stem cells in the peripheral blood. Cells are collected via apheresis.
Cord Blood Unit	Frozen cord blood is delivered to the transplant center. The cells are thawed and infused. Depending on the required cell dose, a patient may need two simultaneous cord blood units, doubling the cost.

Costs also vary based on the location of the selected donor or cord blood unit. We work with registries across the world to access international donors. Each registry sets its own price for donor products. Cord blood unit prices vary by cord blood bank, as each sets its own fees.

Additional costs

About 10 percent of patients require a subsequent infusion of cells from an original donor to aid the success of the original transplant. These cells may include whole blood, T cells, leukocytes, and in some cases, a subsequent infusion of marrow or PBSC.

Transplant centers will likely incur additional costs not included in our cell procurement charges for search coordination, HLA expertise and additional donor testing lab fees.

Cancellation fee

If a transplant is cancelled, we charge transplant centers for services provided. These costs differ depending on the progress of the donor assessment and cell acquisitions.

EXAMPLE >

This is for illustrative purposes only; each situation is unique.

Once donor samples are tested, the patient’s physician requests procurement from the best possible donor. The physician also identifies a backup donor and two cord blood units.

Cells are collected either by marrow or PBSC donation, depending on the preferences of the physician and a donor’s willingness and/or medical eligibility to donate. The transplant center is charged a **procurement fee** that is the combined cost for the donor information session, donor physical exam(s), U.S. donor life, medical and disability insurance, preparative medications or supplies needed for collection, repeat donor infectious disease marker testing and cell collection.

If an adult donor is unavailable or not identified, the patient’s physician may request procurement of a single or (depending on cell volume and the size of the patient) two cord blood units. The transplant center is charged a fee that includes the procurement and shipment of each cord blood unit.

After the transplant, the physician may request additional therapeutic cells from the same donor to use for a donor leukocyte infusion (DLI) to help boost the patient’s immune system. The transplant center will be charged a **fee for acquiring a second product** from the donor.



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