OPTN Network Operations Oversight Committee
Meeting Summary
January 9th, 2023
Webex

Edward Hollinger, MD, PhD, Chair

Introduction

The Network Operations Oversight Committee (NOOC) met via Webex on 01/09/2023 to discuss the following agenda items:

1. Welcome
2. Security Project and Public Comment Updates
3. OPTN API Commitments for FY 2023
4. Revised NOOC Deliverables

The following is a summary of the committee's discussions.

1. Welcome

Ed Hollinger, Chair of the Network Operations Oversight Committee (NOOC), welcomed the committee and gave an overview of the meeting agenda.

2. Security Project and Public Comment Updates

Rebecca Murdock, Senior Policy Counsel, gave the committee a brief overview of what is currently happening with the security project. The committee was informed that any substantive changes made to the policy language or the project during public comment will require a revote from the committee. The outstanding items for the committee to address about the project are monitoring and compliance, third-party applicability, and the rolling implementation timeline.

Multiple committee members will present the project at their regional meetings to give the community a better understanding of the project when offering their feedback during public comment. The project is expected to follow a rolling implementation throughout 2023-2024.

3. OPTN API Commitments for FY 2023

Marty Crenlon, Healthcare Integration Program Manager, presented Fiscal Year 2023 projected API milestones. These milestones include delivering three or more new APIs, two adoption goals to increase the adoption of the API for electronic transmission of unacceptable antigens to at least 50% of transplant centers, increase adoption of the local deceased donor record to at least 80% by OPOS in a given month for at least 3 months, and to produce a standard member-level API adoption dashboard for quarterly review by HRSA and the NOOC. The OPTN contract requires that the OPTN deliver at least three new APIs in 2023, however, the OPTN plans to deliver four. These APIs include:

- Lung CAS Calculator
- Deceased Donor HLA Submission
- Organ Check-In
- Deceased Donor Creation

Mr. Crenlon shared the new API developed for the Lung CAS Calculator which is used to determine a lung candidates' continuous allocation score (CAS), to replace the current lung allocation score (LAS) calculator API. Lung continuous distribution is planned for implementation in March 2023. This new calculation was requested by EHR vendors due to calculation complexity. The OPTN expects the API to be used by the community quickly and the OPTN will utilize the API internally as well to update their system and follow a modern software engineering architecture.

The new API of Deceased Donor HLA Submission provides a unique capability and is an expansion of the 2022 Deceased Donor HLA Retrieval API for the OPTN Donor Data and Matching System. This was specifically used to facilitate crossmatch workflows so that labs can quickly pull information rather than transcribe the information manually and allow labs to submit this information discreetly. This API is more self-contained and is more modern in terms of architecture and is more consistent with current lab practices. This API is planned to be implemented in the end of the fiscal year 2023. The OPTN has partnered with Accenture Federal Services to provide their development support, while the OPTN Contractor is leading the design requirements and building out the cloud API capabilities.

Mr. Crenlon also discussed the new API for Organ Check-In which will help document the receipt of an organ package at the transplant facility. This will allow for an easier check-in process which will hopefully lead to more organs being checked in overall.

The committee also heard about a new API for deceased donor creation, which would enable the creation of a new Deceased Donor API based on limited demographics set. This new API streamlines the setup necessary for use of current Local Deceased Donor Record import. The OPTN contractor is partnering with Accenture Federal on this API as well.

When discussing engagement with Donor Record APIs, the committee noted ways in which the OPTN plans to engage with OPOs that are not currently using the Donor Record API. While most OPOs used the Donor Record API during FY 2022, only 28% of OPOs used the API consistently. The committee discussed possible reasons OPOs may be slow in adopting this API and the difficulties it may cause on their end. The goal of this API is for OPOs to use the file upload and to not manually enter the data into the system.

The committee also discussed engagement efforts to address Unacceptable Antigen APIs. The OPTN plans to engage histocompatibility labs that do not currently use the Unacceptable Antigen API. The OPTN is encouraging histocompatibility labs to utilize this API because the manual entry of Unacceptable Antigens can be tedious, time-consuming, and error-prone, and the Unacceptable Antigen API would directly replace manual entry of data.

Engagement plans for the for OPTN Data Collection System APIs are for the OPTN to engage transplant centers to add OPTN Data Collection System API usage to existing automation. Currently, some transplant centers have automated certain OPTN Data Collection System forms but are not using APIs to transmit them. Similarly, some transplant centers are exporting OPTN Data Collection System forms with the API but are importing them manually.

Summary of Discussion:

When discussing the new API for Deceased Donor HLA Submission, a representative from HRSA asked what role Accenture Federal plays in this collaboration. Mr. Crenlon explained that Accenture is providing the developers for the project, while the OPTN is providing the design. The HRSA representative then asked if Accenture's collaboration is similar to their input when it came to predictive analytics. Mr. Ghaffari, IT Software Engineer at UNOS, explained that it would follow a similar format as predictive analytics and shares some team members that were used with predictive analytics. The team

from Accenture includes the cloud developers and the Azure developers. The representative also asked how labs are currently entering this data. Mr. Crenlon explained that the only integration that currently exists doesn't necessarily exclude labs, but it supports the movement of the entire donor record. This is more user-friendly for labs and does not include information that histocompatibility labs do not need. The representative also asked if OPOs are supportive of these changes, to which Mr. Crenlon confirmed that feedback has been positive. When asked whether any OPO representatives on the call had any opinions on this, a committee advisor explained that their main concern would be that the OPO would be looking in their donor management system for that information and if labs are sending that information directly to the OPTN system, then OPOs wouldn't have that data. They appreciated the idea to limit the connection between OPOs and the OPTN to get the information directly from the lab but suggested a two-way interface to do this. The committee advisor also asked what the initial reason was to prioritize and implement this, to which Mr. Crenlon explained that there were OPOs and labs that requested this. Bonnie Felice, Business Architect at UNOS, added that the OPTN Histocompatibility Committee also asked for this API. A representative from HRSA asked what entity at the OPTN will coordinate this effort; they asked what affect this could have on committees and whether the NOOC should delegate this coordination to OPTN committees. They asked whether the Histocompatibility Committee and Organ Procurement Organization (OPO) Committee will be involved in this process to ensure their member types are represented. UNOS staff confirmed that the new HLA submission has been presented to the Histocompatibility Committee and the committee is excited for the new API. The OPO Committee has not reviewed the API.

A representative from HRSA asked how API adoption is going to be enforced in histocompatibility labs and how OPOs will ensure labs are adopting the new Deceased Donor HLA Submission API. They asked if there were any plans to terminate the current process of requiring members to adopt the API. Ms. Felice explained that this was a long-term plan for the OPTN to eliminate any potential duplicate pathways of data entry.

When discussing the new API for Organ Check-In, a representative from HRSA asked who at transplant centers would be tasked with confirming and communicating the receipt of the organ. They asked if any consistent and uniform practices were being recommended along with the new API adoption. Ms. Felice explained that it could be someone on the transplant floor because the new API allows for a seamless check-in process. UNOS staff confirmed that the number of organ check-ins has already increased. It was noted that organ check-in is not currently required by OPTN policy so adoption will be voluntary. HRSA encouraged the NOOC to monitor the adoption of this API overtime and analyze which systems are using the API, and how it is contributing to overall safety and efficiency within these programs.

A representative from HRSA asked if the OPTN API adoption commitments would be relevant to present at regional meetings this winter. A committee member concurred that this could potentially be presented at regional meetings but that the presentation should be at a broader scope. A committee member commented that if there is a lack of API adoption by transplant centers, they do not think it is due to the centers not waiting the APIs but instead may have to do more with their institutions not having adequate resources to adopt them.

A representative from HRSA suggested that the NOOC play a role in API adoption and in making API adoption mandatory for member institutions. They also asked if it were possible to remove the manual entry option for the Donor Record API to require API adoption. UNOS staff explained that removing the manual entry option is not an option for this API and removing the manual entry option would break the API flow.

A committee advisor commented on Donor Record API adoption and suggested the OPTN consider creating deadlines for implementation. They equated the creation of hard deadlines for implementation

to the OPTN Organ Labeling, Packaging and Tracking System and thought that the process could be modified for API adoption. They also suggested creating a business continuity plan for API integration in the event of a system outage to avoid manual input.

Next Steps:

UNOS staff agreed to present on the new API for Deceased Donor HLA Submission to the OPO Committee so they are aware of how the API will be utilized by OPOs.

Committee Chair, Dr. Ed Hollinger, suggested that in the future the NOOC have a meeting to discuss the process on driving API adoption.

4. Revised NOOC deliverables

Mr. Rob McTier, Business Architect at UNOS, presented the new deliverables assigned to the NOOC since the new contract modification (PWS) from HRSA. The NOOC deliverables were divided into different groups to include meeting participants, specific IT metrics, specific deliverables, and the member security framework requirements required by the new PWS.

Specific participants of the NOOC stated that the committee shall include HRSA's Chief Information Officer, Chief Technology Officer, and Chief Information Security Officer. Some of the specific IT metrics in the modification included that the committee is to develop match run times, monitor implementation timelines for board policy projects, monitor deficit repair revisions occurring post-implementation, monitor API progress, and identify other IT performance metrics for the IT system.

Specific deliverables also include developing metrics to adopt more APIs, incorporating new metrics and vendor formats, develop a public facing dashboard, and integrate member security requirements. OPTN member security framework requirements that were listed in the modification have largely been addressed with the NOOC's public comment proposal. Mr. McTier listed the different requirements HRSA found important for the OPTN to include in their security framework.

There was no further discussion and the meeting adjourned.

Attendance

- **Committee Members and Advisors**
  - Adam Frank
  - Cliff Miles
  - Daniel Yip
  - Ed Hollinger
  - James Pittman
  - Kelley Hitchman
  - Kim Rallis
  - Melissa McQueen
- **HRSA Representatives**
  - Adriana Martinez
  - Chris McLaughlin
  - Cliff Myers
  - Vinay Vuyyuru
- **UNOS Staff**
  - Amy Putnam
  - Anna Messmer
  - Bonnie Felice
  - Bridgette Huff
  - Bruno Mastroianni
  - Courtney Jett
  - Krissy Laurie
  - Kristine Althaus
  - Marty Crenlon
  - Matt Belton
  - Maureen McBride
  - Michael Ghaffari
  - Morgan Jupe
  - Ralph Medina
  - Rebecca Murdock
  - Rob McTier
  - Roger Vacovsky
  - Sarah Payamps
  - Susie Sprinson
  - Terri Helfrich
  - Tiwan Nicholson
  - Tynisha Smith