

OPTN Policy Oversight Committee

Meeting Summary

March 28, 2022

Conference Call

Nicole Turgeon, MD, FACS, Chair

Jennifer Prinz, RN, BSN, MPH, CPTC, Vice Chair

Introduction

The Policy Oversight Committee (the Committee) met via teleconference on 03/28/2022 to discuss the following agenda items:

1. Redesign Map of OPTN Regions
2. New Project Review: Apply Transplant Program Notification Requirements for VCA Program Inactivation

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

1. Redesign Map of OPTN Regions

The Committee reviewed the OPTN Executive Committee's concept paper *Redesign Map of OPTN Regions* and provided feedback.

Data summary:

The project to review the map of the OPTN regions is part of a contract task identified by the Health Resources and Services Administration (HRSA). The current regions have not been examined since their inception in 1986, and have identified inequities in their representation of active OPTN members and board representation.

In considering their review of the existing regions, the Executive Committee partnered with an external vendor to assist in the balancing of members across regions. The vendor created several concepts for how a regional redesign could appear, ranging from rebalancing the existing 11 regions to shrinking down to 4 regions.

Public comment feedback indicated that there was not significant support for the redesign.

Summary of discussion:

The Vice-Chair of the Vascularized Composite Allograft (VCA) Committee was surprised there was not a significant push to redesign, given the current focus on geography and equity in transplant. They also added that, even if the map does not change, it still may be useful to examine regional meeting structure to determine if it can be improved as an educational and informative experience. The Executive Director of the OPTN responded that this review was one element of a much broader discussion of regional change. For example, they considered that over the past two years, video access has proved to be a core portion of the meeting. In addition, they noted that the Executive Committee has a workgroup specifically addressing regional meeting consistency and best practices; some regions have developed unique elements like a pre-meeting collaborative or sponsored discussions using the regional meeting as a core.

The Vice-Chair of the Transplant Coordinators Committee (TCC) noted that this project may be resource intensive, and it could be more productive to focus the resources towards higher priority projects. Additionally, they suggested this review may have come prematurely due to the organs shifting to continuous distribution.

The Organ Procurement Organization (OPO) Vice-Chair added that basing the regional boundaries off of state lines impacts some OPOs that exist on borders, specifically addressing an OPO based in Washington, D.C. Furthermore, if there were a redesign, some programs would have to sever historical collaborations with nearby transplant programs. They concluded saying that as the number of regions decrease, so too does the weight of individual voices from that region.

The Committee *ex officio* wondered if there had been any consideration to changing how regional representation is structured, rather than changing the maps themselves. The Executive Director replied that this question was a theme in public comment, and the committee was considering how feasible this could be.

The Executive Director proceeded to note that a strong theme from public comment was that there was a lot of value in the established relationships based on the current regional structure.

2. New Project Review: Apply Transplant Program Notification Requirements for VCA Program Inactivation

The Committee reviewed the project *Apply Transplant Program Notification Requirements for VCA Program Inactivation*, sponsored by the VCA Committee. This project is seeking approval from the Committee.

Data summary:

At present, VCA is excluded from the requirements that stipulate programs must report inactive patients to the OPTN. This proposal will require programs to report inactive patients to the OPTN. This proposal will not create any new functional inactivity requirements.

Summary of discussion:

A member supported this proposal due to it being non-controversial and low resource. With no further comments, the Committee supported this project unanimously.

Next steps:

The VCA Committee will continue their development of the project.

Upcoming Meeting

- April 11, 2022

Attendance

- **Committee Members**
 - Nicole Turgeon
 - Jennifer Prinz
 - Sandra Amaral
 - Scott Biggins
 - Richard Daly
 - Alden Doyle
 - Andrew Flescher
 - PJ Geraghty
 - Alexandra Glazier
 - Shelley Hall
 - Valinda Jones
 - Jim Kim
 - Molly McCarthy
 - Sumit Mohan
 - Natalie Santiago Blackwell
 - Zoe Stewart Lewis
 - Susan Zylicz
- **HRSA Representatives**
 - Vanessa Arriola
- **SRTR Staff**
 - Jon Snyder
- **UNOS Staff**
 - James Alcorn
 - Roger Brown
 - Amber Fritz
 - Rebecca Geoff
 - Chelsea Haynes
 - Courtney Jett
 - Lindsay Larkin
 - Krissy Laurie
 - Lauren Mauk
 - Meghan McDermott
 - Elizabeth Miller
 - Tina Rhoades
 - Laura Schmitt
 - Brian Shepard
 - Kaitlin Swanner
 - Susan Tlusty
 - Kimberly Uccellini