

OPTN/UNOS Patient Affairs Committee - INTERIM REPORT

Conference Call – February 8, 2011

- The Committee heard a presentation on the proposal for an OPO Performance Metrics. The proposal is jointly sponsored by the MPSC and OPO Committee's. The Committee's recommend implementing a statistical model to evaluate OPO performance to identify opportunities for improving organ yield using a comparison of observed to expected organs transplanted per donor.

After hearing the proposal, the following questions were raised,

- How would any backlog of reviews be handled within the MPSC?
Staffing and responsibility changes within the MPSC have already been made to address this issue should it arise
- How would the transplant community be impacted should an OPO actually be closed?
- It is rare that there is an OPO that does not have a nearby OPO to support them. However, the goal of the Metrics is to help OPO's to evaluate their practice, not to serve as a punitive measure. OPO's could continue to function as a Member-Not in Good Standing. Centers can accept organs from OPO's that are identified as Members- Not in good Standing
- Would the model address staffing differences between OPO's, as this might impact performance?
- Staff levels are a component of OPO practice and will be considered in the outcomes of the model
- Does the model consider geographic differences?
- The model will look for patterns in practice based on geographic differences
- Will the Metrics also address over-performing OPO's?
- Yes this will be considered
- Can OPO's 'game' the system?
- Practices such as OPO's only choosing the best donors will be picked up from the model.

The MPSC will evaluate the Metrics annually.

After discussion, and clarification of questions PAC voted in support of the Metrics as presented: Yes – 17; No – 0; Abstentions – 0. Two PAC members, who were unable to make the call voted via email prior to the meeting.

- The Liaison to the PAC was invited to attend a meeting to give feedback on the current KAS, and to discuss parts of the existing policy which may be too vague or complicated. This information will be considered in developing future kidney allocation policy. Committee members were invited to provide input on this question.

The Liaison provided an overview of the feedback received from the committee:

- Committee Feedback: Criteria for listing, Misconceptions about the waiting list, lack of national standard for kidney allocation, and perception that social status or wealth provide added benefit in allocation
- Phone Line Feedback: Accrual and transfer of time on the waiting list, Advantages of Multiple Listing, Position or number on the Waiting List, Waiting List Point System

Committee members were asked for additional input. The Committee cited misconceptions regarding position on the waiting list and multiple listing concerns as being the larger problems with understanding.

This information will be shared during the KAS Feedback Meeting on 2/15/2011.