OPTN Membership and Professional Standards Committee (MPSC) Update

Summer 2023

Topics



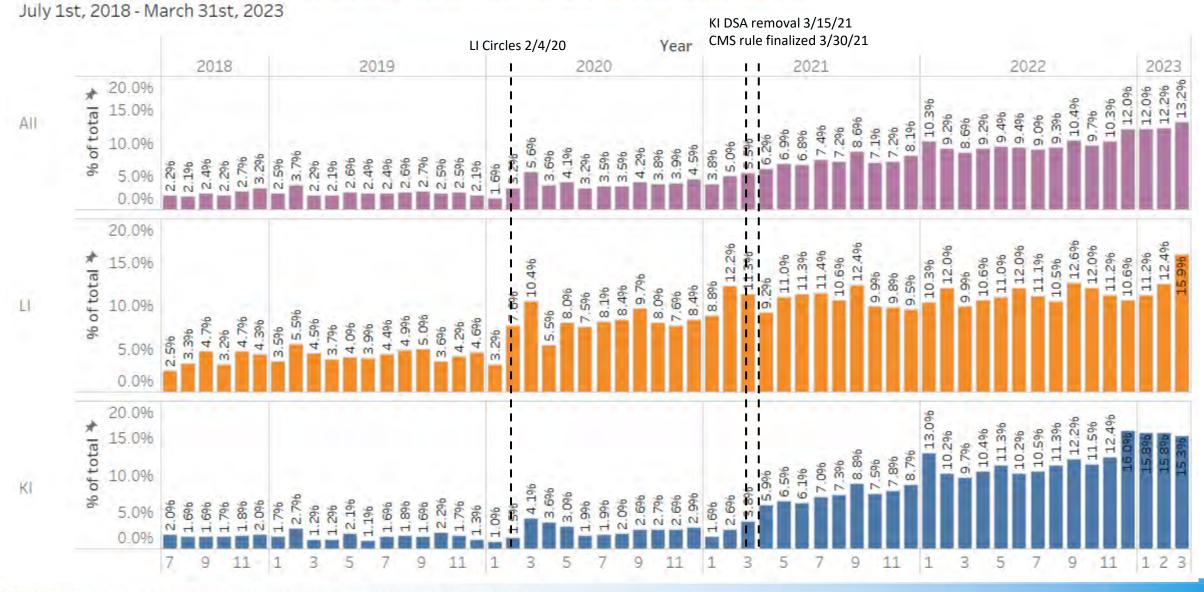


Allocations Monitoring Subcommittee

- The MPSC observed a large increase in the number of allocations out of sequence (AOOS)
- The MPSC has been evaluating data to identify potential improvements to monitoring and to inform recommendations for policy and programming improvements
- Working to determine root cause; noted increases coincide with:
 - Increase in organ utilization
 - New Centers for Medicare & Medicaid Services (CMS) OPO performance metrics
 - Changes to OPTN kidney and liver allocation policies
- The MPSC supports efforts to increase organ utilization and determines, in most instances, individual AOOS seem appropriate to ensure organs are successfully transplanted
 - Allocating harder-to-place organs
 - Decreasing cold ischemic time (CIT)
 - Placing organs after "late turndowns" by transplant programs

Percentage of organs that were allocated out of sequence

Shown are values for all organs combined, livers only (LI+LIS1+LIS2) and kidneys only (LKI+RKI+EKI)



Allocations Monitoring Subcommittee

- MPSC is focusing on improving monitoring of allocations out of sequence by:
 - Considering possible definitions of "late decline" and inquiring with transplant programs accordingly
 - Evaluating aggregate data to identify any concerning patterns and trends in AOOS
 - Creating specific triggers to identify individual allocations requiring in-depth review
 - Evaluating SRTR organ yield data to identify donor and/or recipient characteristics that suggest an organ will be hard-to-place and may not require in-depth review
 - Considering increased data collection that can improve allocation monitoring and make recommendations to the OPTN Data Advisory Committee as needed

OPO Performance Monitoring Enhancement

- The MPSC is evaluating potential changes to OPTN OPO performance monitoring
- Over the last 6 months, MPSC has
 - Received updates from SRTR on current state and suggestions to consider
 - Learned more about CMS OPO performance measures
 - Defined scope of the project and how to measure success of the project
 - Concluded that comprehensive "monitoring enhancements" are needed and not simply new "metrics"
- Sponsoring work group with representatives from various OPTN committees
- OPTN Board of Directors provided feedback on scope and prioritization of areas of this OPO performance monitoring enhancement work

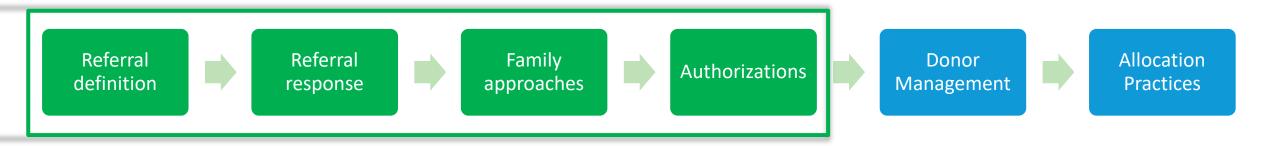
OPO Performance Monitoring Enhancement

- What differentiates an OPO that performs well from an OPO that does not perform well?
 - Adequate resources and training
 - Effective relationships and communication
 - Effective quality improvement processes
- What parts of the donation process are the responsibility of OPOs, OPOs can impact, and/or have wide variation across OPOs?
 - Referral definition and response rate
 - Authorization
 - Family approaches
 - Donor management case time
 - Allocation practices particularly with DCD, NRP, perfusion, medically complex donors
 - Communication and collaboration with donor hospitals and transplant programs

OPO Performance Monitoring Enhancement

- The MPSC feels the OPTN needs separate metrics from CMS but acknowledges metrics should be complimentary
- Improved transplant program offer acceptance rates are essential to increasing the transplantation rate
- Standardizing critical OPO processes and consistent data definitions are essential to improve member performance, effective data collection and efficiency of the system
- Increased data collection is required to proactively monitor and understand member behavior and improve transparency
 - For example, how do we gather donor-hospital level data to assess donor potential?

Parts of the donation process that are the OPOs responsibility that OPOs can impact:



Managing Relationships with Donor Hospitals and Transplant Hospitals

Questions?