

**OPTN Ethics Committee  
Multiple Listing Subcommittee  
Meeting Summary  
August 10, 2022  
Conference Call**

**David Bearl, MD, Chair**

## **Introduction**

The Multiple Listing Subcommittee met via Citrix GoToMeeting teleconference on 08/10/2022 to discuss the following agenda items:

1. Discuss Outline and Next Steps

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

### **1. Discuss Outline and Next Steps**

The subcommittee continued discussing the results of the data request and considered how they want to frame the white paper.

#### Summary of discussion:

##### *Data Discussion*

Members agreed that the data received showed a different story, anecdotally, than what they expected when submitting the data request. Members agreed that it was important to highlight how the data aligned and varied with their assumptions. There are still areas of inequity in multiple listing, but those differences have greater nuance. The group felt that it would be helpful to share this overall message with the transplant community and break down the areas where discrepancies exist to provide actionable guidance. The group agreed that providing an ethical analysis of multiple listing would be helpful as allocation continues to evolve into continuous distribution.

Members identified private insurance and advanced education as two characteristics that persisted across organ groups. When discussing insurance, a member noted the balance of cost and potential for burden to shift between the patient and healthcare system as a whole.

Members highlighted that an altruistic donor who wants to impact someone's life may want to do that in their own community, but multiple listing has the potential to bypass local patients in favor of those who are multiple listed. Alternatively, members of the community could also be multiple listed as well. Member considered that this concern may occur regionally and the second data request will likely answer some of their remaining questions about the impact of geography. A member highlighted the balance between allocating organs in the community they came from versus allocating to the most medically urgent patient, which they identified as a change in attitude amongst the transplant community.

A representative from HRSA inquired about publishing the data in addition to the subcommittee's plan to develop a white paper. Members were in agreement that this data is valuable and would be important to share with the community to better understand and frame the discussion around multiple listing.

### *Outline Discussion*

When discussing the original outline, a member inquired about the potential overlap of ethical considerations between the transplant system and the healthcare system as a whole. A representative from HRSA identified that the connection to the local community could be a driving decision maker for transplant centers, for example, not wanting to use taxpayer money to serve distant transplant candidates. A member noted that while the ethical implications for the transplant center and the healthcare system differ, the practical implications are exceedingly similar and the healthcare system is not a major decision maker in being multiple listed. Members noted the role of payers on the allocation system, which is ultimately a challenge of resource allocation for a small benefit. This highlighted the gap in incentives to individuals versus the incentives to the system.

The group considered revising the outline to highlight the consideration in practice that the data request has revealed. Some of these topics would include the impacts of geography, payer, and education. A member suggested including an analytical section that highlighted the trade-offs and discussion of multiple listing's purpose. . A member suggested including who the decision maker is to the revised outline, whether that be the patient, transplant center, or insurance. Members agreed that revising the outline in accordance with the data would strengthen the Committee's conclusion.

A member inquired if the outline revision would assume that multiple listing is an acceptable practice and policy. The subcommittee agreed that by organizing the data and literature together by practical implications, they could better identify the nuances and ethical impact in practice. A member noted the connection that multiple listing has to the Transparency in Program Selection white paper, where patients would benefit from knowing the implications of multiple listing, such as if a given center would delist them for pursuing multiple listing. Additionally, it would be beneficial for patients to understand the transplant rates for patients with their clinical presentation at that center and how that can be maximized across multiple centers.

#### Next steps:

The subcommittee will receive the second data request during their September meeting.

#### **Upcoming Meetings**

- September 14, 2022
- October 12, 2022

## Attendance

- **Subcommittee Members**
  - David Bearl
  - Keren Ladin
  - Sanjay Kulkarni
  - Sena Wilson-Sheehan
- **HRSA Representatives**
  - Jim Bowman
  - Marilyn Levi
- **UNOS Staff**
  - Christine Chyu
  - Cole Fox
  - Keighly Bradbrook
  - Kim Uccellini
  - Laura Schmitt
  - Stryker-Ann Vosteen