

**OPTN/UNOS Liver and Intestinal Organ Transplantation Committee**  
**Meeting Summary**  
**December 11, 2014**  
**Conference Call**

**David Mulligan, MD, Chair**  
**Ryutaro Hirose, MD, Vice Chair**

*Discussions of the full committee on December 11, 2014 are summarized below and will be reflected in the committee's next report to the OPTN/UNOS Board of Directors. Meeting summaries and reports to the Board are available at <http://optn.transplant.hrsa.gov/> .*

**Committee Projects**

**1. Proposal for Membership and Personnel Requirements for Intestine Transplant Programs**

The Proposal for Membership and Personnel Requirements for Intestine Transplant Programs made its second round of public comment from [March 14, 2014- June 13, 2014](#). While public comment was largely favorable, the Committee recognized an opportunity to further improve the proposal before presenting it to the Board for consideration.

A joint working group with members of the Intestinal Subcommittee and Membership and Professional Standards Committee (MPSC) met several times via conference call to redraft the proposal and address the concerns voiced by the community. During a conference call in early October, the working group presented the redrafted proposal to the MPSC. The MPSC recommended that Committee specifically reach out to the Pediatric Committee for feedback during public comment as they has previously opposed the proposal. Although no formal vote was taken the MPSC did endorse the proposal as written.

Taking the MPSC's recommendations under advisement, the Committee unanimously voted to present the redrafted proposal to the community during the spring 2015 public comment period.

**2. National Liver Review Board for MELD/PELD Exceptions**

In November 2013, the Board of Directors directed the Committee to develop a plan for a National Liver Review Board for MELD/PELD Exceptions. At the June 2014 Board meeting, the Committee presented the preliminary construct for an NRB and requested Board feedback. The Board was supportive of the concept and urged the Committee to continue the work.

The Committee began drafting the policy and updating the associated operational guidelines with the intent to circulate the proposal for public comment in the spring of 2015. Despite making significant progress in policy development, the Committee felt that rather than a simple redistribution of the workload from the current Regional Review Boards to a National Review Board, a more complete overhaul to the system would better benefit the community.

The Committee unanimously voted in opposition of presenting the proposal as written to the community during the spring 2015 public comment period. The Committee agreed

that they should instead seek feedback on specific aspects of the NRB construct and operational guidelines during the spring 2015 Regional Meetings. In a parallel effort, the Committee requested to extend the Regional Review Board Educational Materials currently in pilot in Region 5 to other regions.

### **3. Redesigning Liver Distribution**

In April 2014, the Committee endorsed the redistricting concepts and agreed to 1) educate the community about the concepts and 2) solicit feedback from the broader community before releasing a public comment proposal on the topic. In June, the Committee therefore released a [concept document along with a questionnaire](#) seeking community input on the concept. Responses to the concept document questionnaire were analyzed to form the basis of an agenda and to identify potential key speakers for a public forum on Redesigning Liver Distribution, held in Chicago on September 16, 2014.

The forum was successful in its intended purpose, which was to gather additional feedback, ideas and questions to help shape further policy development. The Committee agreed that additional study and community feedback is necessary and in response established the following working groups each composed partly of members of the committee and partly of additional subject matter experts:

- The Liver Ad Hoc Subcommittee on Metrics of Disparity and Optimization of Distribution
- The Liver Ad Hoc Subcommittee on Finances in Broader Sharing
- The Liver Ad Hoc Subcommittee on Logistics and Transportation

The Committee also revitalized and repurposed a previous subcommittee to focus efforts on Increasing Liver Donation and Utilization.

These Subcommittees will meet several times via conference call from December through April with the goal of developing recommendations to be shared with the full Committee to aid in the refinement of existing concepts for redesigning liver distribution or the development of new ones. The Committee plans to share these recommendations and seek additional feedback from the community during a spring forum. The Committee is currently considering dates and locations for the meeting and will finalize these details as the Subcommittees progress in their work.

## **Committee Projects Pending Implementation**

### **4. Adding Serum Sodium to the MELD Score**

The Board approved the proposal to incorporate serum sodium into the MELD score calculation in June 2014. This included a Board amendment that would restrict the additional points for sodium to only those candidates with a MELD score (as currently calculated) of 12 or higher.

This policy is pending programming and will become effective upon implementation. Once programmed, the system will automatically calculate candidates' new MELD score. The Committee has requested a 7-day "grace period" during implementation for those candidates whose scores would be moved from one recertification category to another, and may as a result require immediate recertification (i.e., the candidates would face an immediate "downgrade" of their MELD score). If a center has not recertified these

candidates on the 8<sup>th</sup> day after implementation, the candidates will be downgraded to their previous lower MELD score as is done currently when certification expires.

During the [September 17, 2014 meeting](#) the Committee agreed on language to be inserted into the policy to allow for this transition. Further discussion on the operationalization of this language revealed that from a programming standpoint, the description of the candidates who would qualify as “those who require immediate recertification” would not include those whose may require recertification any time within the 7-day grace period as the Committee initially intended. The Committee unanimously voted to amend the language previously agreed on. This language will be reviewed by the Executive Committee.

### **Upcoming Meeting**

- January 26, 2015