

**OPTN/UNOS Liver and Intestinal Organ Transplantation Committee  
Meeting Summary  
July 21, 2016  
Conference Call**

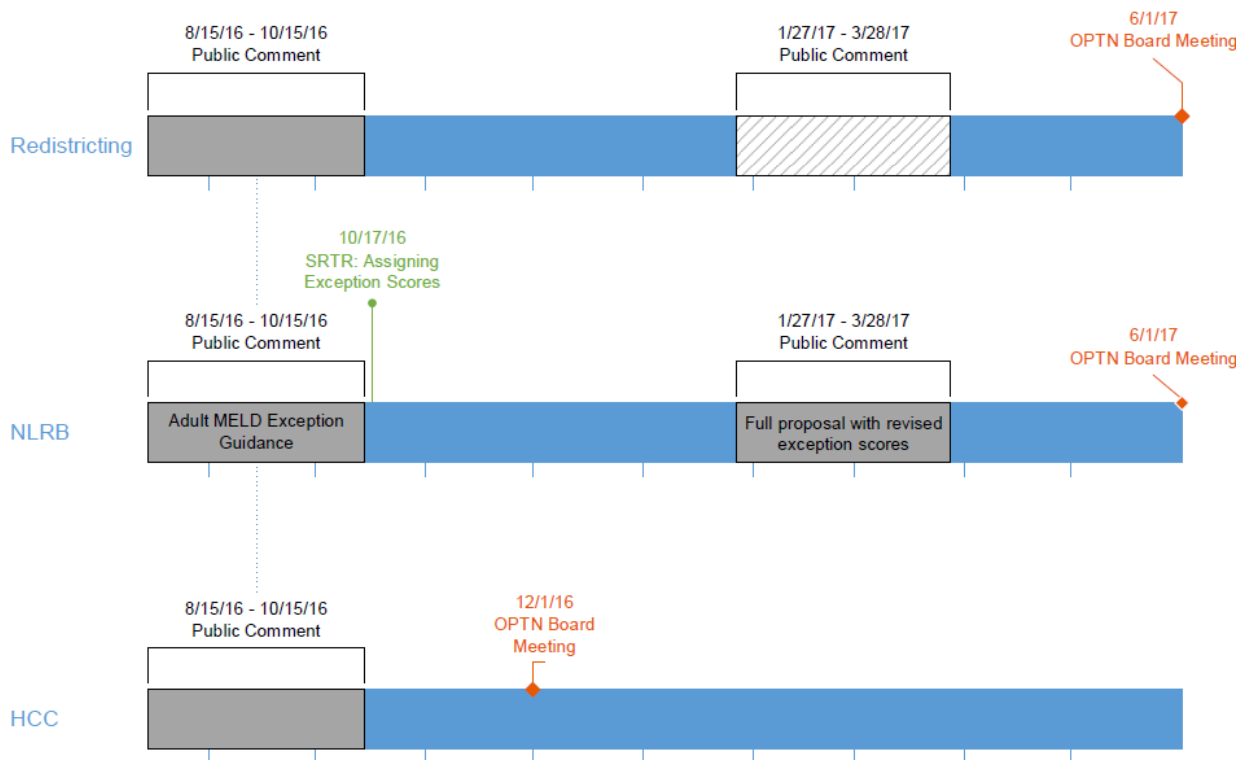
**Ryutaro Hirose, MD, Chair  
Julie Heimbach, MD, Vice Chair**

Discussions of the full committee on July 21, 2016 are summarized below. All committee meeting summaries are available at <https://optn.transplant.hrsa.gov>.

**Committee Projects**

Since this was the first meeting of the new service term, the Chair reviewed the Committee's 2016-2017 work plan, which is a series of interrelated projects that aim to improve equity in access to liver transplant (Figure 1).

**Figure 1. OPTN/UNOS Liver and Intestinal Organ Transplantation Committee 2016-2017 Work Plan**



**1. Liver Distribution Redesign Modeling (Redistricting of Regions)**

Currently there is significant variation in a liver transplant candidate's chances of receiving a lifesaving organ offer depending on where they live and the location of the transplant hospital where they are listed. The current regional boundaries often physically separate areas with a greater number of candidates from areas with comparably more eligible donors. The Committee has submitted a proposal for August public comment that seeks to modify these boundaries to better match organ supply with

demand, ensuring more equitable access for those in need of liver transplant regardless of their place of residence or listing.

The Redistricting Subcommittee is responsible for monitoring and responding to public comment for this proposal, as well as considering any alternative distribution concepts with the promise of reducing geographic variance in MELD at transplant.

## **2. National Liver Review Board**

The Committee seeks to mitigate geographic differences in the exception system by replacing RRBs with a National Liver Review Board (NLRB). This project has three parts, including:

- The proposed structure of a national review board and the operational guidelines that govern it
- Guidance for the NLRB members to use when assessing requests (this guidance will replace regional agreements)
- The optimal method for assigning exception scores

The Committee submitted the proposed structure and operational guidelines for the NLRB for public comment in January 2016. The Committee sought feedback from the community on the method for assigning MELD exception points and is currently gathering evidence to support the proposed change.

The proposed guidance for adult MELD exceptions is currently out for public comment, and the Committee welcomes community feedback as it continues to build clinical consensus for the recommendations.

This fall, the MELD Enhancements and Exceptions Subcommittee will further develop the proposal to include the MELD/PELD score assignment. The Committee anticipates releasing this for public comment in January 2017.

## **3. Changes to HCC Criteria for Standardized MELD Exception**

The Committee has submitted for August public comment proposed revisions to the eligibility criteria for Hepatocellular Carcinoma (HCC), the most common MELD exception. Members of the MELD Enhancements and Exceptions Subcommittee will monitor public comment and make any needed revisions to the proposal. If public comment is favorable, the Committee anticipates submitting the proposal for Board consideration in December.

### **Other Significant Items**

4. As required by policy, the Committee began reviewing use of the override feature in UNet<sup>SM</sup> for an unresolved MELD exception request.

### **Upcoming Meetings**

- August 18, 2016
- September 15, 2016