

OPTN/UNOS Liver & Intestinal Organ Transplantation Committee
Meeting Minutes
April 3, 2017
Conference Call

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

Introduction

The Liver & Intestinal Organ Transplantation Committee (hereafter, the Committee) met via Citrix GoToTraining teleconference on 04/03/2017 to discuss the following agenda items:

1. National Liver Review Board (NLRB) Post-public Comment Discussion
2. Liver Redistribution Update

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

1. NLRB Post-public Comment Discussion

The Committee reviewed public comment on the NLRB proposal and discussed post-public comment changes.

Summary of discussion:

Public Comment

The Committee was presented with the public comment on the *Proposal to Establish a National Liver Review Board*. This included feedback from the regional meetings, professional societies, and general public. The majority of feedback from the regional meetings was focused on the use of the Donor Service Area (DSA) or region, as the geographical unit for the calculation of a median MELD at Transplant (MMaT) calculation. The MMaT calculation is used as a fixed score for exception candidates. 7 regions supported the MMaT score by the DSA and supported the scoring be based on the Region. A Committee Member stated that the DSA was chosen because there is considerable variation by DSA in many regions. A Committee member also commented that even in regions with agreed upon regional sharing, there is still variation by DSA.

UNOS staff presented recent data on the MMaT by DSA in the country. This data was also stratified by blood type. Several regions had commented that the MMaT scoring should be blood type specific. A committee commented that it would be beneficial to see the MMaT data by region and certain blood types be grouped together. It was suggested that the Committee would like to see the MMaT stratified by blood type O, A, and then the B and AB blood types together. A Committee member was concerned about the idea of exception candidates in a DSA all being "stuck" at the same MELD with the proposed fixed-floor scoring. The scenario was suggested that in high-MELD areas, an exception candidate's score could be 34 and they would be placed ahead of lab-MELD candidates that have been on the waiting list longer and are arguably in greater need for a transplant. A Committee member proposed that in high-MELD areas, the scoring below MMaT should be greater than in other low-MELD areas.

The Committee discussed the relationship between the current NLRB proposal and the redistribution project. The modeling performed for the redistribution project included a MELD threshold for broader sharing at 29. The current NLRB proposal caps exception scores at a MELD 34 based on the current Share 35 policy. A Committee member stated that the Committee would need to revisit the NLRB policy to determine if exception scores should be

capped at 29 with the new threshold. In the current NLRB proposal, the MMaT score for standardized exception candidates is based on the DSA. A Committee member stated that the Committee would need to revisit the geographical unit for the exception scoring based on the broader sharing proposal chosen.

2. Liver Redistribution Update

The Committee reviewed the current status of the Liver Redistribution Project.

Summary of discussion:

The Committee discussed the use of Medically Underserved Areas (MUAs) as a tool to address concerns for access to transplant in response to a liver redistribution project. There has been preliminary efforts by UNOS staff to look at the relationship between MUAs and Donor Service Areas (DSAs). A Committee member re-iterated the definition of a MUA and stated that the MUA designation is based on criteria that may not be relevant for its use as a metric with liver transplantation. Recent analyses by UNOS staff were reviewed and the Committee discussed the merit of the analysis. The data looked at the percent of counties in each DSA, designated as a MUA. The issue with the analysis is that the MUA designation is based on census tracts, whereas the waiting list data is based on zip code. This creates an issue with data analysis because a zip code can have many census tracts. Therefore, it may be incorrect to try to assign MUA status to a candidate on the waiting list because their location in a zip code, may, or may not be within an MUA.

Upcoming Meetings

- April 20, 2017 (teleconference)
- May 8, 2017 (Chicago)
- May 18, 2017 (teleconference)

Attendance

- **Committee Members**
 - Scott Biggins
 - Sandy Florman
 - Ryutaro Hirose
 - Mary Keating
 - Scott Naugler
 - Nikolaos Pyrsopoulos
 - Michael Schilsky
 - Jennifer Watkins
 - William Chapman
 - Julie Heimbach
 - Shimul Shah
 - Ruben Quiros
 - Kym Watt
 - George Loss
 - Richard Hasz
 - Vivek Kohli
 - James Pomposelli
 - Sophoclis Alexopoulos
- **HRSA Representatives**
 - Joyce Hager
- **SRTR Staff**
 - Jessica Zeglin
 - Bert Kasiske
- **OPTN/UNOS Staff**
 - James Alcorn
 - Kim Combs
 - Shannon Edwards
 - Betsy Gans
 - Aaron Mckoy
 - Joel Newman
 - John Archer
 - Mary Ellison