

**OPTN/UNOS Ad Hoc Geography Committee  
Meeting Minutes  
January 16, 2018  
Teleconference**

**Kevin O'Connor, MS, PA, Chair**

**Introduction**

The OPTN/UNOS Ad Hoc Geography Committee met via teleconference on 01/16/2018 to discuss the following agenda items:

1. Committee Charge and Scope of Work
2. Introduction to Organ Distribution Principles
3. Introduction to Organ Distribution Frameworks and Models

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

**1. Committee Charge and Scope of Work**

The Committee Chair highlighted the purpose of the introductory meeting for the Geography Committee. The purpose was to discuss the key topics of geographic organ distribution at a high level to ensure that all committee members were on the same level of understanding before moving on to specific principles and models.

The Committee agreed with the proposed committee charge and scope of work, which is limited in authority and time.

The charge of the Ad Hoc Geography Committee is to:

- Establish defined guiding principles for the use of geographic constraints in organ allocation
- Review and recommend frameworks/models for incorporating geographic principles into allocation policies
- Identify uniform concepts for organ specific allocation policies in light of the requirements of the OPTN Final Rule

The scope of work for the Committee is limited to discussions and recommendations in line with its approved charge. The Committee's primary deliverable is to make written recommendations to the Executive Committee and Board of Directors during its June 2018 meeting. The Committee will not make policy changes and will not sponsor public comment proposals.

**2. Introduction to Organ Distribution Principles**

The Committee Chair introduced the topic of organ distribution principles by discussing that the various geographic allocation areas used to distribute organs are different dependant on the specific organ and current geographic areas, such as local or donor service areas (DSAs). There is variation among DSAs, including geographic size, population density, continuity, number of programs, and number of candidates. However, within the organ specific allocation policies, all DSAs are treated the same. DSAs are being used as an example but the same variation exists in other geographic areas, such as regions.

The Committee discussed examples of different organ policies and their geographic constraints:

- Liver distribution uses regions plus a geographic proximity circle
- Heart distribution uses geographic zones, composed of circles based on nautical miles
- Kidney distribution uses DSA, regional, and national geographic constraints based on candidate subtype

The Committee debated at a high level what principles would lead to an ideal system. It was established that the focus of the discussion should be on the governing principles, and that specific models or frameworks will be formed around those principles. Defined principles should be measurable and able to be analyzed. The Committee must focus on the goals of the principle constraints, so that as details change, there is always reasoning for why certain principles were established. Without diving into details, the Committee discussed examples of organ distribution principle categories and topics within those categories.

- Clinical principle topics
  - Medical urgency
  - Transplant benefit
- Operational principle topics
  - Supply and demand
  - Cost/benefit/logistics of transportation
  - Responsiveness to future policy changes
  - Donor location vs recipient location
  - Reduce organ wastage
- Ethical principle topics
  - Equity
  - Utility
  - Patient-centered
- Regulatory principle topics
  - NOTA
  - Final Rule

The focus of the Committee will revolve around principles and models of organ distribution, not organ allocation. Allocation involves many other factors besides geographic distribution, and discussing allocation principles or models is out of scope for the Committee charge.

The Committee will primarily focus on statements of organ distribution principles during the upcoming February 12, 2018 meeting.

### **3. Introduction to Organ Distribution Frameworks and Models**

The Committee Chair introduced the topic of organ distribution frameworks and models by discussing that the models should take into account turning those defined principles into distribution policy. The Committee will need to consider numerous models but focus on those that align with the defined principles that meet the Committee charge. There are various examples of models being used currently in distribution, as well as defined models that are currently being discussed as alternatives. The basic two model categories that were discussed are the static, fixed units and optimized, non-fixed based units.

The representative of HRSA reminded Committee members that new allocation policies must follow the Final Rule, and that the OPTN has a continual responsibility to ensure that allocation policies maintain alignment with the Final Rule.

The Committee ended their discussion by listing some topics that are working well in the current organ distribution models.

- Broader distribution of organs for medical urgent
- Wider range of information on DonorNet than available by phone
- Broader distribution of organs for highly sensitized

### **Upcoming Meetings**

- February 12, 2018 Teleconference
- February 26, 2018 Teleconference