OPTN/UNOS Liver and Intestinal Organ Transplantation Committee Meeting Minutes March 15, 2018 Conference Call

Julie Heimbach, MD, Chair James Trotter, MD, Vice Chair

Introduction

The OPTN/UNOS Liver and Intestinal Organ Transplantation met via Citrix GoToTraining teleconference on 02/15/2018 to discuss the following agenda items:

- 1. Review of SRTR LSAM Modeling
- 2. Presentation of DTAC Public Comment Proposal
- 3. Update on National Liver Review Board (NLRB) Implementation

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

1. Review of SRTR LSAM Modeling

Summary of discussion:

The Committee was presented with the results of a recent Liver Simulated Allocation Model (LSAM) analysis of the changes to liver distribution approved by the OPTN/UNOS Board of Directors in December 2017.

A committee member asked for clarification on whether this modeling was based on the previous regional review board structure, or the new changes as part of the NLRB. SRTR staff confirmed that the references to "current" in the LSAM modeling represents the exception system in place today and not the changes with NLRB pending implementation. A committee member stated that the proximity points could have been restricted to just candidates with a MELD/PELD of at least 29, since the DSA is the unit of distribution following the broader distribution to candidates in the region and circle with a MELD/PELD of at least 29. Other committee members reiterated that points are provided to candidates with a MELD/PELD of at least 15 because the spirit of the policy is to provide additional priority to candidates in the DSA and within the proximity circle. After candidates in the DSA with a MELD/PELD of at least 15 are allocated to, the liver is then offered to candidates in the region or circle with a MELD/PELD of at least 15. In this allocation classification the motivation for providing proximity points to candidates within proximity of the donor is utilized by providing 3 points to candidates with a MELD/PELD of at least 15.

A committee member stated that the Committee should review these same metrics following implementation, but also monitor new metrics, specifically acceptance rates at transplant programs and the number offers turned down.

2. Presentation of DTAC Public Comment Proposal

Summary of discussion:

The Committee was presented with the Clarify Informed Consent of Transmittable Conditions proposal by the Chair of Ad Hoc Disease Transmission Advisory Committee (DTAC).

A committee member from an intestine program commented that the CMV status was not important to them and requiring consent only leads to confusion for the patient. Committee members additionally expressed concern over requiring patient signature. Committee members

commented that this was a practice already performed at several centers, but disagree with making it a requirement. It was stated that requiring patient signature or documentation of discussion would be inconsistent with what is currently required for PHS increased risk donors. The Committee unanimously agreed that a signature or documentation of discussion should not be required.

3. Update on National Liver Review Board (NLRB) Implementation

Summary of discussion:

The Committee was presented an update on the current status of the NLRB implementation by the Chair of the Committee. It was stated that the current schedule has educational offerings being provided in May, June, and July/August on the NLRB policy. This includes training on the new scoring, new processes for the NLRB, and training for NLRB representatives and alternates. The release date for NLRB is currently scheduled for October 2018. It was emphasized that the *System Optimizations* and NLRB would be implemented prior to the changes to liver distribution.

Committee members were provided an update on the changes to how the exception submission process will look with the NLRB. UNOS staff presented an example of the current design of the exception "wizard", which will be used to guide programs in requesting a MELD/PELD exception. A committee member stated that the specific score for the diagnosis the program is requesting should be provided on the final screen. A committee member underscored the importance for the NLRB member to know how far away from the median MELD of PELD score is that the program is requesting. Committee members reiterated their support for the current design of the request wizard. UNOS staff reiterated that there would be additional scenarios and further discussion on the design during the upcoming in-person meeting in Chicago.

Upcoming Meetings

- March 29, 2018 (Chicago, IL)
- April 19, 2018 (Conference Call)