Introduction

The Transplant Administrators Committee (TAC) met via Citrix GoTo Meeting Teleconference on 01/23/19 to discuss the following agenda items:

1. TAC’s public comment on concept paper.

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

1. **TAC’s public comment on concept paper: Eliminate the Use of DSAs and Regions in Kidney and Pancreas Distribution.**

TAC was asked to give feedback on five new policy solution models that eliminate the use of DSAs and regions in kidney and pancreas distribution. These models aim to increase equity in organ allocation and better comply with the Final Rule.

**Data summary:**

The following link is the presentation given by the OPTN/UNOS Kidney and Pancreas Committees to the members of TAC. Five new models explained possible policy solutions. At the conclusion of the presentation, TAC members were asked to give feedback on these potential solutions.


**Summary of discussion:**

Below is a list of the committee’s comments and concerns during the meeting.

- A committee member was concerned that some cities would not have access to organs, even with a 500 NM distribution circle.
  - The presenter responded that both the Kidney and the Pancreas committees were considering this challenge, due to the geographical distances of Hawaii and Puerto Rico. He did not have answers at this time.

- Committee members showed general concern that the projected numbers of transplants under all five new models were less than current volume of transplants numbers. One member felt that a decrease in access to organs could lead to a higher waitlist mortality rate. He asked if by choosing one of these new models and eliminating DSAs to become compliant with NOTA from a geological perspective, was it possible that we could negatively impact our compliance with NOTA surrounding the issues of access?
  - The presenter said that the KP workgroup did not predict an increase in rates of waitlist mortality across the five models, although the number of transplants may decrease across some of the presented solutions. He also said that these models aim to increase equity and better align with the OPTN/UNOS strategic plan.
• TAC members expressed disappointment with the projected outcomes of the models. Members agreed that they did not think changes in behavior and eventual accepted practices would raise the number of transplants enough to increase transplants above current rates.
  o The presenter reminded TAC that the baseline numbers of transplants used in the predictive modeling is higher because they are based off of current accepted behaviors, while the five proposed solutions do not take into account potential change in behavior. He reported that he believes the number of transplants will increase once behavior changes and a model is considered an accepted practice.

Next steps:
UNOS Staff will draft a public comment for TAC based upon the feedback shared. The draft will be sent to the chair and vice chair for further editing before UNOS staff post the comment on behalf of the committee during the public comment period.

Upcoming Meeting
• February, 27 2019