

**OPTN Liver and Intestinal Transplantation Committee
National Liver Review Board (NLRB) Workgroup
Meeting Minutes
August 8, 2019
Conference Call**

**Julie Heimbach, MD, Subcommittee Chair
James Trotter, MD, Committee Chair
James Pomposelli, MD, Committee Vice Chair**

Introduction

The National Liver Review Board (NLRB) Subcommittee (the Subcommittee) met via teleconference on 08/08/2019 to discuss the following agenda items:

1. Evaluation of NLRB Consistency
2. Dual-listed Candidates
3. NLRB Reviewer Education
4. Recap and Questions

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

1. Evaluation of NLRB Consistency

The Subcommittee discussed ways to ensure that the NLRB reviewers are evaluating cases consistently.

Summary of discussion:

The Subcommittee Chair noted that there has been some feedback that not all cases seem to be reviewed consistently between different reviewers. The Subcommittee discussed ways to educate the NLRB reviewers as a group, to improve the guidance, and to update policy language.

It was previously suggested that the Subcommittee review a random sample of de-identified exception applications with de-identified reviewer votes and comments to quantify the extent of the consistency issue and begin to identify themes. The Subcommittee Chair asked which subset of cases the Subcommittee should review. UNOS staff noted that the OPTN Thoracic Transplantation Committee just submitted a request to do something similar and the Subcommittee could use their request as a reference. The Subcommittee agreed to review a random sample of initial exception applications and all initial appeals.

The Subcommittee Chair then asked how they would review this sample of cases. The Subcommittee agreed that they should be sent approximately 20 cases to review prior to the Subcommittee meetings. Each member would receive the same group of cases and they would then discuss them during the next call. A Subcommittee member suggested that they use a standardized grading rubric when reviewing the cases. The Subcommittee agreed that an electronic scoring sheet would make the process more efficient and allow the Subcommittee to only discuss those cases that need to be reviewed. The Subcommittee Chair noted that they should focus on those diagnoses where there is clear variation in reviewer results.

The Subcommittee Chair stated that the Subcommittee will try to identify other trends such as if there are reviewers who are approving/denying an unexpected number of cases or themes in the comments that are not in line with the type of review expected.

The Committee Chair asked if it would be possible to provide individual reviewers with the number of times they voted in line with the majority of other reviewers on their cases.

Next Steps

The Subcommittee will start reviewing a sample of cases for reviewer consistency.

2. Dual-listed Candidates

If a candidate is listed at multiple centers, each center must apply for an exception for that candidate and any resulting exception score is specific to that center. It is not clear what should happen when the exception for the candidate is granted at one center but not the other.

Summary of discussion:

The Subcommittee Chair noted that these cases are similar to test cases on reviewer consistency. UNOS staff stated that it is not possible to integrate artificial test cases into the NLRB system. The Subcommittee noted that it will be rare to have a multi-listed candidate that gets an exception approved at one program and not the other. The Subcommittee also noted that it would be interesting to see if how the narratives were written for the same candidate at different programs was related to different outcomes. The Subcommittee agreed to track these cases to the extent possible.

Next steps:

The Subcommittee will continue to track outcomes for multi-listed candidates.

3. NLRB Reviewer Education

The Subcommittee is working on providing additional education and resources for NLRB reviewers.

Summary of discussion:

The Subcommittee Chair asked members to note sample cases of “good” and “bad” reviewer feedback to identify themes. The Subcommittee will use the themes to better educate NLRB reviewers.

Next steps:

Subcommittee members will note sample cases of reviewer feedback for future discussion.

4. Recap and Questions

Subcommittee members previously volunteered to draft updated sections of the NLRB guidance document and OPTN policy.

Summary of discussion:

UNOS staff stated that the Committee will likely be sponsoring a first round of updates to the guidance document and policy related to the NLRB during the spring 2020 public comment cycle. The Committee will need to vote on language to go out for public comment at their in-person meeting in October. There may be a second round of public comment changes during the fall of 2020.

The Committee Chair asked if it would be possible to identify why hepatocellular carcinoma (HCC) cases are going to the HCC review board and are not being auto-approved. UNOS staff stated that the turn-down reason is provided and it should be noted in the case history. The Subcommittee felt that many of the HCC cases going to the HCC review board should be auto-approved and it would be helpful to know

why the cases were not auto-approved. UNOS staff will provide the Subcommittee with more information on why HCC cases are not being auto-approved.

UNOS staff also informed the Subcommittee that candidates who missed an extension deadline can get back on the auto-approval track if they continue to meet inclusion criteria. The Subcommittee will continue to discuss how HCC exception candidates can get back on the auto-approval track if they miss a deadline.

The Subcommittee discussed adding frailty to the NLRB guidance. The Subcommittee agreed that there is not enough evidence on the impact of frailty on post-transplant outcomes so it should not be included in the NLRB guidance as a diagnosis that warrants an exception. The Subcommittee also agreed that ascites does not warrant an exception and the NLRB guidance should remain the same for this diagnosis.

A Subcommittee member has been working on updating the policy for cholangiocarcinoma (CCA). The Subcommittee member noted that the dropout rate has previously been shown to be higher than HCC, but asked for more recent data on the dropout rate and time to transplant for CCA and HCC. The Subcommittee also asked for data on survival after transplant.

Next steps:

The Subcommittee will continue to work on updating OPTN policy and the NLRB guidance document.

Upcoming Meeting

- September 12, 2019