OPIN Transplant Administrators Committee
Meeting Summary
March 25, 2020
Conference Call

Nancy Metzler, Chair
Susan Zylicz, MHA, BSN, RN, CCTC, Vice Chair

Introduction
The Transplant Administrators Committee (TAC) met via Citrix GoTo teleconference on 03/25/2020 to discuss the following agenda items:

1. Refusal Codes Project Update
2. Policy Oversight Committee Update
3. Other Business

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

1. Refusal Codes Project Update

UNOS staff presented to TAC an update on the refusal codes project. The committee reviewed the current refusal codes and categories as well as a list of the proposed category changes and additional reason codes that are scheduled to be added.

Summary of discussion:
One member stated that the refusal codes project is extremely important and there is definitely a need for these changes. UNOS staff reviewed the project process:

- UNOS staff refined reasons and categories internally
- UNOS staff solicited feedback from the following committees:
  - Transplant Coordinators Committee (TCC)
  - Data Advisory Committee (DAC)
  - Membership and Professional Standards Committee (MPSC)
  - TAC
- Implementation is expected in 2021

One member stated that everyone is in support of having additional data and raised a question regarding what the data would actually be used for. They further commented that this data could potentially drive future policy or provide input on a problem that could help with resource allocation. It could also be used to help better align the sharing of information between dialysis programs and transplant hospitals. They stated there is a real need for the specific reason code “Inability to Contact Patient.” This code is needed when transplant hospitals try to locate patients but are unable to. This should be a turndown reason, especially for kidney. Several members agreed, noting that the code “Candidate is Unavailable” does not drill down deep enough. UNOS staff asked if it would help if the proposed code could be combined with the current code. The member suggested deleting the current code and replacing it with “Unable to Locate Patient.”
One member stated there is a need for the ability to add comments. Some staff are adding the secondary code, 898, so they can then add free text. Members can review the free text, which helps with retrospective reviews. A request was made to add free text to all codes. UNOS staff commented there would be a generic comment box that will show up regardless of what the code selected. The member stated that would be a big help.

A member stated the 830 code is used because many times there are numerous factors. They asked if there will be guidance on how to choose the correct/best code. UNOS staff stated they looked into the potential to make it a multi-select list, but the technical architecture behind that is too detailed and would substantially delay the project timeline, so the decision was made to keep the primary and secondary selections.

2. Policy Oversight Committee Update

Susan Zylicz, the Committee Vice Chair, provided a Policy Oversight Committee (POC) Update.

Summary of discussion:

The Committee discussed the prioritization exercise in use as part of the Continuous Distribution of Lungs project. One member stated there was a similar survey sent out three or four years ago regarding kidney prioritization. It was stated that UNOS put this survey out and the questions were controversial. The member asked if that former survey was referenced in the development of the current survey. The Vice Chair stated it was unknown if that survey was referenced, but would inquire about it. No one else on the committee was familiar with that former survey. A member listed all 15 comparisons from the current survey to the committee.

The efficient matching policy projects were listed and one member confirmed that POC was looking for prioritization of the list of projects. The Committee prioritized the below as having a significant impact on administrators:

- Local backup
- Addressing high Kidney Donor Profile Index (KDPI) discards
- Acceptance rates

The Vice Chair reviewed the current projects that have TAC listed as a stakeholder. The Committee agreed on the list and plan to submit comments and suggestions at the appropriate time.

3. Other Business

The Committee had open dialogue regarding how COVID-19 is affecting the transplant community. Below are some takeaways from those conversations:

- Are teams still flying for organs?
  - Some say yes, but it is case by case
  - There is a worry that hospitals may refuse surgeons because they are from out of state. No one has heard of this yet, but agree that is a possibility on the near future.
- CMS recent guidance lists transplant surgeries as essential
- One member sent notifications to all of their transplant hospitals that surgeons are essential personnel and they will follow all local protocols
- Majority of hospitals in California are not letting any visitors in. All their numbers are decreasing and more hospitals are becoming on alert
- What are the transplant hospitals experiencing? Individual comments below:
  - No visitors except under extreme circumstances
Only one living donor in the past two weeks
Safety perspective – communication with patients as calls are ramping up
Stay in place orders have been put into effect
3/24 – shelter in place in Houston
One member said they are moving into the next phase of reduction of transplants, which they are starting to restrict due to increased number of COVID-19 cases in the community and the hospital itself
New Jersey – suspended deceased donor kidney
One member noted that they have a number of transplant programs, and one has moved their clinic that was attached to the hospital and relocated it into a shared oncology space
Numerous transplant hospitals have suspended all living donor programs
Numerous transplant hospitals are cautiously looking at deceased donor programs

Upcoming Meetings

- April – TMF Cancelled, no meeting date
- May 27, 4:00 – 5:00 ET
- Save the Date – July 22, 2020 In-Person Meeting – Richmond, VA