

**OPTN Liver and Intestinal Organ Transplantation Committee
Acuity Circles Subcommittee
Meeting Summary
March 11, 2020
Conference Call**

**James Trotter, MD, Chair
James Pomposelli, MD, PhD, Vice Chair**

Introduction

The Acuity Circles Subcommittee (the Subcommittee) met via teleconference on 03/11/2020 to discuss the following agenda items:

1. MMaT Calculation Data Request and Discussion

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

1. MMaT Calculation Data Request and Discussion

The Subcommittee revisited a previously discussed data request for Median MELD at Transplant (MMaT) calculations.¹

Summary of Data:

The data request asked for results of calculations for MMaT within 250 NM and 500 NM of each liver transplant program.

The Subcommittee reviewed results of three different MMaT calculations:

- MMaT Calculation 1
 - Median of all transplants with a MELD score within 500 NM of each transplant program
 - Excludes:
 - Status 1A and 1B transplants
 - Living donor transplants
 - DCD transplants
 - Transplants from donors at donor hospitals greater than 500 NM from the transplant program
- MMaT Calculation 2
 - Median of all transplants with a MELD score within 250 NM of each transplant program
 - Excludes:
 - Status 1A and 1B transplants
 - Living donor transplants
 - DCD transplants
 - Transplants from donors at donor hospitals greater than 500 NM from the transplant program
- Transplants based on an exception MELD score

¹ For full details on how MMaT is calculated, please see OPTN Policy available at <https://optn.transplant.hrsa.gov/>

- **MMaT Calculation 3**
 - Median of all transplants with a MELD score within 500 NM of each transplant program
 - Excludes:
 - Status 1A and 1B transplants
 - Living donor transplants
 - DCD transplants
 - Transplants from donors at donor hospitals greater than 500 NM from the transplant program
 - Transplants based on an exception MELD score

The data shows MMaT within 250 NM tends to be more variable than within 500 NM and MMaT excluding exception transplants tends to be higher than MMaT with all transplants. However, the Subcommittee was informed that since acuity circles have only been implemented a short amount of time, there is a lack of substantial available outcomes data.

Summary of discussion:

The Subcommittee reviewed MMaT calculation scenarios by OPTN region. Some Subcommittee members suggested looking at data at the program level via a map to see how programs look in close proximity to each other. Another Subcommittee member suggested looking at the OPO data this way as well.

The Subcommittee discussed if the available data provides enough justification for a change to MMaT calculation. The Subcommittee identified four possible options:

1. Continue to monitor data week by week, adding comparative information from the same timeframe from the previous year
2. Increase circle size to 500 NM
3. Remove exception candidates from calculation
4. Dynamic MMaT score based on location of donor

The Subcommittee discussed tie-breaker scenarios between exception and non-exception scores under the fourth option. Some Subcommittee members thought non-exception patients should be allocated above exception patients as exception patients would keep their score. Subcommittee members also considered the complexity of being able to program the fourth option within the allocation system.

The Chair recommended evaluating current data compared to the same timeframe from the previous year to determine the HCC patient's likelihood to receive offers. The Subcommittee also requested additional data for review including:

- Overall number of deceased donor liver transplants with an HCC exception and by allocation sequence, score, and DSA
- Number of offers for liver waiting list candidates with an HCC exception by DSA
- Median MELD at transplant calculated within 250 and 500 NM of each donor hospital, with the current exclusions (Status 1a/1b transplants, living donor transplants, DCDs, transplants from donors greater than 500 NM away)

Next steps:

The Subcommittee agreed to keep monitoring this potential issue and review the results of the one month report once available along with the additional requested data. UNOS staff will evaluate the complexity of the different proposed options to help inform the Subcommittee's decisions going forward.

Upcoming Meetings

- April 8 at 5:00 PM EST