Introduction

The National Liver Review Board (NLRB) Subcommittee (the Subcommittee) met via teleconference on 5/14/2020 to discuss the following agenda items:

1. Review proposed changes to criteria for standard portopulmonary hypertension (POPH) exceptions
2. Review draft language for NLRB enhancements, Part 2

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

1. Review proposed changes to criteria for standard portopulmonary hypertension (POPH) exceptions

The Subcommittee reviewed the proposed language for NLRB enhancements that will be released for Summer Public Comment. As part of the proposed language, the Subcommittee reviewed changes to POPH standard criteria.

Summary of Data

The Subcommittee reviewed draft updated language for POPH exceptions.

Summary of Discussion

The Subcommittee was asked if they feel it’s necessary to specify if values must be obtained via heart catheterization. The Subcommittee decided to include this specification in the language. If other methods are developed to obtain these values, the Subcommittee will revisit the policy language.

Regarding the addition of “2. Other causes of pulmonary hypertension have been excluded”, some Subcommittee members commented determining other causes of primary pulmonary hypertension is difficult to distinguish. The Subcommittee changed the language to read “2. Other causes of pulmonary hypertension have been assessed and determined to not be a significant contributing factor.”

The Subcommittee also updated language under “5. Document via heart catheterization within 90 days prior to submission of initial exception either of the following” to read:

- Post-treatment MPAP less than 35 mmHg and post-treatment PVR less than 400 dynes*sec/cm⁵ (or less than 5.1 Wood units (WU)). These values must be from the same test date.
Post-treatment MPAP 35 mmHg to 45 mmHg and post-treatment PVR less than 240 dynes*sec/cm^5 (or less than 3 Wood units (WU)). These values must be from the same test date.

Regarding the addition of “6. Calculated MELD or PELD greater than 12”, the Subcommittee discussed if the language should be kept as is or use alternate text. After some discussion, the Subcommittee agreed that a specific MELD or PELD threshold was not appropriate but that there still needs to be documentation of liver disease. Therefore the Subcommittee changed language to read “6. Documentation of portal hypertension at the time of initial exception” rather than tying the requirement to a specific MELD or PELD score.

2. Review draft language for NLRB enhancements, Part 2

The Subcommittee reviewed draft language for operational guidelines of the NLRB to be included in the NLRB enhancements proposal.

Summary of Discussion:

The Subcommittee was presented with options for revisions to the Appeals Review Team (ART) guidelines. The Subcommittee decided to propose the following language changes:

At the beginning of each new service term, nine NLRB members are randomly assigned to serve each month of the year on the Adult ART and nine Pediatric NLRB members are assigned to serve each month of the year on the Pediatric ART. There may be multiple ARTs, depending on the volume of cases. An NLRB member will be selected to serve for no more than one month each year on the ART. The ART meets each week; however calls may be rescheduled in advance to accommodate federal holidays.

ART appeals from the Adult Other Diagnosis and Adult HCC specialty boards will be heard by the Adult ART. ART appeals from the Pediatric specialty board will be heard by the Pediatric ART.

Next Steps

The proposed language will go to the full committee to review.

Upcoming Meetings

- June 11, 2020