

OPTN Transplant Administrators Committee

Meeting Summary

June 24, 2020

Conference Call

Nancy Metzler, Chair

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

Introduction

The OPTN Transplant Administrator Committee met via Citrix GoToTraining teleconference on 06/24/2020 to discuss the following agenda items:

1. Gratitude
2. Fiscal Impact Workgroup Update
3. Potential Project Discussion
4. August Public Comment Preview
5. Other Business

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

1. Gratitude

The Chair thanked the members who are rolling off the Transplant Administrators Committee (TAC) at the end of June.

Summary of discussion:

The Chair thanked Renee Bennett, Yvette Chapman, Audrey Kleet, Derek Ginos, Betsy Stein, James Pittman, Meg Rogers, and Diesa Samp for their contributions to the committee.

2. Fiscal Impact Workgroup Update

A member provided an overview of recent work completed by the Fiscal Impact Workgroup (FIG).

Summary of discussion:

The presenting member shared that the purpose of FIG is to evaluate the financial implications of committee project proposals. FIG is now brought in earlier in the project's lifecycle beginning at the development stage. Current members of FIG include representation from TAC, transplant hospitals, histocompatibility labs (Labs), organ procurement organizations (OPOs), and consultants. The members share their knowledge, experience, and perspectives when determining the impact of each project.

FIG evaluates the impact of each committee project proposal by OPTN member type. This evaluation process includes two meetings of small groups in which there is open discussion about the proposal's fiscal impact with a representative from the sponsoring committee as well as other subject matter experts as needed.

The member shared a summary of FIG's analysis on the proposals going out to public comment that were determined to have a fiscal impact.

The *Programming of Vascularized Composite Allograft (VCA) Allocation in UNetSM* proposal, sponsored by the VCA Committee, was deemed to have no fiscal impact to Labs. Transplant hospitals may need to provide staff training in UNetSM and OPOs may need to request updates from the medical record vendor.

The *Further Enhancements to the National Liver Review Board (NLRB) Membership Requirement Revisions* proposal, sponsored by the Liver Committee, was deemed to have no fiscal impact to Labs and OPOs and minimal fiscal impact to transplant hospitals. Transplant hospitals will need to familiarize staff with the updated submission form and guidance document.

The *Update Policy 14 to Include VCA Living Donors*, sponsored by the Living Donor Committee, was deemed to have no fiscal impact to OPOs or Labs. Transplant hospitals will need to commit resources to create protocols for informed consent, psychosocial evaluation, and medical evaluation requirements. The level of impact is dependent on the volume of VCA transplants.

The *Modify Data Collection on VCA Living Donor* proposal, sponsored by the VCA Committee, was deemed to have no fiscal impact on OPOs or Labs. Transplant hospital staff will need to allocate time for additional data entry, primarily to record uterus donor information. The level of impact is dependent on the volume of VCA transplants.

The member described FIG's next steps. She shared that the input from FIG members have been compiled and will be included in the proposals going out for public comment in August. Additional feedback will be collected during public comment and incorporated into the proposal. Once finalized, the proposals are reviewed by the OPTN Board of Directors (BOD) during the December BOD meeting.

The member shared that FIG is seeking 2-3 more members from TAC. She commented that the commitment is low with only 2-3 one-hour meetings twice a year and that UNOS staff helps with coordination, slide preparation, and collating responses which makes the committee's review of the proposals expeditious. She shared that a benefit of being on FIG is having the ability to participate in policy development early in the process.

Staff commented that FIG also evaluated a Membership and Professional Standards Committee's proposal which is no longer going out to public comment. FIG will review this proposal again during the next applicable cycle.

3. Potential Project Discussion

Staff invited the Committee to discuss the projects and priorities the Committee would like to address in the next year. He also invited the members to comment on potential agenda items for the meeting in July, reminding them that the Minority Affairs Committee (MAC) update will be one topic of discussion.

Summary of discussion:

A member proposed a project concerning the broad utilization of DCD, Hepatitis C, and warm perfused organs. He raised a concern that there is a gap in knowledge across the nation on how best to manage these programs clinically and financially. He proposed a project geared at educating the community on these topics.

The Chair asked the member if he considers his proposal as one project. The member responded saying they all have financial and operational models and could be grouped into categories. He commented that TAC could create awareness around the administrative considerations to take for providing post-transplant care for hepatitis C, HIV, or DCD donors that may have longer lengths of stay. The Chair shared that the Committee already has a session on managing the finances of hepatitis C patients as an agenda item for the Transplant Management Forum (TMF). She suggested that there could be virtual education sessions outside of TMF that invites experts to speak on these topics. She asked if this project

would be a workgroup of the committee or educational sessions. The member commented that he is interested in how hospitals are managing financially as organ care is increasing in cost. He asked if the Committee is obligated to provide consideration or discussion points for hospitals to refer to as they begin to offer DCD, hepatitis C, imports, and other organs that have a higher net cost.

A member responded that it is always good to share best practices with new administrators and financial managers. She agreed that there is an opportunity to identify who is doing what and share that information.

The Chair said the Committee will continue discussing how to fit these topics in as a priority and if the project will take the form of educational sessions or a Workgroup that studies these topics to create content for a TMF session or webinar.

4. August Public Comment Preview

Staff shared an overview of the committee project proposals going out to public comment on August 4th. He invited the Committee to add a deeper discussion of each proposal as an agenda item to their July meeting if they are interested.

Summary of discussion:

Staff summarized the following public comment proposals.

Resource for Transplant Hospitals on Transplant Candidate use of Social Media, sponsored by the Living Donor Committee

This proposal was intended to be included in the previous public comment cycle but was revised and resubmitted for this upcoming cycle.

This proposal addresses the use of social media by candidates to find living donors and best practices programs can implement to effectively manage a sudden increase in candidates interested in becoming a living donor in response to a social media campaign. Without best practices, there is a missed opportunity to utilize the networking power that social media platforms can provide to increase organ donations.

Staff asked the Committee if they would want more information on this proposal at the July meeting. The Chair commented that social media campaigns to find living donors is an important issue that hospitals face and should be discussed at the July meeting. A member agreed and added that this issue can cause an influx of potential living donors, adding a strain on their operations.

Guidance Addressing the Use of Pediatric Heart Exceptions, sponsored by the Thoracic Committee

Following the approval of the National Heart Review Board (NHRB) for Pediatrics, the Heart Committee created a guidance document to assist reviewers when making decisions on exception requests as well as increase the consistency of these decisions.

The Committee chose not to add this proposal to the July agenda as the proposal seems straightforward.

Lung Allocation Score (LAS) Refinements and Clean-up, sponsored by the Thoracic Committee

LAS is used in prioritizing the allocation of lungs for candidates over 12 years of age. This proposal updates the data being used in calculating this score to be consistent with a more recent cohort of lung candidates.

The Committee chose not to add this proposal to the July agenda. A member commented that their program is already well aware of this proposal and does not need additional information.

Adult Heart Exception Review, sponsored by the Thoracic Committee

This proposal provides clearer information for both transplant hospitals to submit exception requests and for regional review board members to evaluate these requests. Additionally, it amends policy to clarify when certain data needs to be submitted, as well as provide more appropriate and consistent timeframes for how long statuses should last.

The Committee chose not to add this proposal to the July agenda. A member commented that this topic has already been discussed at their center.

Modify Data Collection on Vascularized Composite Allograft (VCA) Living Donors, sponsored by the VCA Committee

This proposal requires that VCA living donor information is collected similarly to how living donor information is collected for other organs.

The Chair commented that most TAC members do not have VCA programs and asked the Committee for input. A member responded that because the VCA community is so small, they are already engaged in the conversation around this topic. The Committee chose not to add this proposal to the July agenda.

Programming VCA Allocation into UNetSM, sponsored by the VCA Committee

This proposal adds VCA transplants to UNetSM making it so all organs are tracked and allocated in one system. This proposal will update policies by adding VCA allocation and data reporting in UNetSM.

The Committee chose not to add this proposal to the July agenda.

Modify Living Donation Policy to include Living VCA Donors, sponsored by the Living Donor Committee

This proposal updates existing Living Donation Policy to include living uterus and other potential VCA donors and adds new requirements specific to living uterus and other VCA donors.

The Chair commented that since this proposal could affect other donation in the future, the Committee should review it. The Committee chose to add this proposal to the July agenda.

Future Enhancements to the National Liver Review Board (NLRB), sponsored by the Liver and Intestines Committee

This proposal updates OPTN Policy, Guidance Documents, and Operational Guidelines for the NLRB based on initial experience with the NLRB.

A member commented that they would like to learn more about this proposal. The Chair agreed and the Committee chose to add this proposal to the July agenda.

April COVID-19 Omnibus Policy Package, sponsored by the Executive Committee

This proposal relaxes data submission requirements of transplant hospitals due to COVID-19 and the limiting of non-emergency doctor visits.

The Chair and members agreed that they should discuss this proposal further and add to the agenda of the July meeting.

The Chair set the following priority list of presentations in case time is limited:

1. Resource for Transplant Hospitals on Transplant Candidate use of Social Media
2. April COVID-19 Omnibus Policy Package
3. Future Enhancements to the National Liver Review Board (NLRB)
4. Modify Living Donation Policy to include Living VCA

Staff encouraged Committee members to provide comment on these proposals when the public comment period opens on August 4th.

Staff reminded the Committee of the upcoming meeting on July 22nd and invited the members to submit agenda items.

Upcoming Meetings

- July 22, 2020
- August 26, 2020
- September 23, 2020