Policy Oversight Committee

Summer 2020
## Policy Oversight Committee Membership

<table>
<thead>
<tr>
<th>Committee Chair</th>
<th>Membership &amp; Prof. Standards</th>
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<tbody>
<tr>
<td>Alexandra Glazier, JD, MPH</td>
<td>Hueng Bae Kim, MD</td>
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<tr>
<td>Committee Chair</td>
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<td>Committee Vice Chair</td>
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<tr>
<td>Nicole Turgeon, MD, FACS</td>
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<td>VCA</td>
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<tr>
<td>Sandra Amaral, MD, MHS</td>
<td>Paulo Martins, MD, PhD</td>
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<tr>
<td>International Relations</td>
<td>Minority Affairs</td>
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<tr>
<td>Pramod Bonde, MD</td>
<td>Stacy McKean, RN</td>
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<tr>
<td>Lung</td>
<td>Transplant Coordinators</td>
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<tr>
<td>Marie Budev, DO, MPH</td>
<td>Sumit Mohan, MD, MPH</td>
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<tr>
<td>Heart</td>
<td>Data Advisory</td>
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<td>Rocky Daly, MD</td>
<td>Martha Pavlakis, MD</td>
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<td>Disease Transmission Advisory</td>
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<td>Lara Danziger-Isakov, MD, MPH</td>
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<tr>
<td>Operations and Safety</td>
<td>Emily Perito, MD, MAS</td>
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<td>Alden Doyle, MD, MPH</td>
<td>Pediatric</td>
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<tr>
<td>Garrett Erdle, MBA</td>
<td>James Pomposelli, MD, PhD, FACS</td>
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<tr>
<td>Patient Affairs</td>
<td>Liver &amp; Intestine</td>
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<tr>
<td>Andrew Flescher, PhD</td>
<td>Kurt Shutterly, RN, CPTC</td>
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<tr>
<td>Ethics</td>
<td>Organ Procurement Organization</td>
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<tr>
<td>Rachel Forbes, MD, MBA, FACS</td>
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<tr>
<td>Pancreas</td>
<td>Titte Srinivas, MD</td>
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<td>Susan Zylicz, MHA, BSN, RN, CCTC</td>
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<td>Living Donor</td>
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<td>Transplant Administrators</td>
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Policy Oversight Committee Role

Advises the Board of Directors and Executive Committee on:

- Developing strategic policy priorities
- Prioritizing and coordinating policy and committee projects
- Evaluating policy and committee proposals prior to public comment
- Assessing impact of implemented policy proposals
- Ensuring OPTN committees justify proposals in compliance with policy development requirements, NOTA, and Final Rule
Strategic Oversight

The Policy Oversight Committee helps balance committee work

- Identifies areas for coordination
- Considers sequencing for effectiveness
- Considers distribution of work
- Prioritizes based on impact and effort
Process for Strategic Policy Priorities

1. Determined policy priorities
2. Evaluated existing and new projects
3. Work plan and project sequencing
4. Develop projects
5. Proposals and public comment
6. Board approval and implementation
Strategic Policy Priorities

- Continuous distribution
- Efficient donor/recipient matching to increase utilization
- Improved equity for multiorgan and single organ candidates
Number of Projects by Strategic Policy Priority

- Continuous Distribution: 4 projects
- Efficient donor/recipient matching to increase utilization: 3 projects
- Improved Equity for Multiorgan and Single Organ Candidates: 1 project
- Other: n/a

% of Overall Effort for Each Strategic Policy Priority

- Continuous Distribution: 42% of total hours (23,810) - 4 projects
- Improved Equity for Multiorgan and Single Organ Candidates: 3% of total hours (1,469) - 1 project
- Efficient donor/recipient matching to increase utilization: 4% of total hours (2,450) - 4 projects
- Other: 54% of total hours (30,451) - 34 projects

Status:
- Orange: Analyzing the Problem
- Blue: Project Approval
- Green: Evidence Gathering
- Light Green: Public Comment Approval
## Continuous Distribution Sequence

<table>
<thead>
<tr>
<th>Organ</th>
<th>Current Status</th>
<th>Next Steps</th>
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<tbody>
<tr>
<td>Lung</td>
<td>Request for Feedback in <strong>Public Comment</strong></td>
<td>• Modeling</td>
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<td>• Proposal in <strong>Public Comment August 2021</strong></td>
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<tr>
<td>Kidney</td>
<td>Committee developing initial framework</td>
<td>Request for Feedback in <strong>Public Comment January 2021</strong></td>
</tr>
<tr>
<td>Pancreas</td>
<td>Committee developing initial framework</td>
<td>Request for Feedback in <strong>Public Comment January 2021</strong></td>
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<tr>
<td>Liver</td>
<td></td>
<td>Begin in winter 2021</td>
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<tr>
<td>Intestine</td>
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<td>Begin in winter 2021</td>
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<tr>
<td>Heart</td>
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<td>Begin in winter 2023</td>
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<tr>
<td>Vascularized Composite Allograft</td>
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<td>Begin in winter 2023</td>
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Efficient Matching – Increase Utilization

- New Data Advisory Committee project to improve data to allow evaluation of late turn downs
- Formed workgroups to evaluate problem
  - Provisional Yes
  - Local Recovery
  - Biopsy Practices
- Goal is for workgroups to identify path forward by December 2020
  - Identify whether guidance, policy change, or other solution is needed
  - Guidance and policy projects will be turned over to committees for further action
Provisional Yes – Possible Approaches

- Dynamic match run (as donor conditions may change that would alter provisional yes)
- Conditional yes option
- Increased offer filters (system implementation)
- Slowing the escalation pattern
- Limiting the number of offers, including provisional yes, that are sent by OPOs
- Consequences or regulation for centers that accept provisional yes but then turn down once primary
Local Recovery – Possible Approaches

- Enhance communications in DonorNet® to better facilitate local recovery

- Consider role of local procurement in expedited placement projects in OPTN policy (e.g. what happens when an organ is turned down by a recovering surgeon)
  - Guidance to promote consistent practices in local organ recovery process
  - Guidance addressing best practices in local organ recovery process
Biopsy Standards – Possible Approaches

- Set minimum criteria for donor kidney biopsy
- Set minimum criteria for pre-recovery liver biopsy
- Maximize use of image sharing
- Provide recommendations on type of pathological readings which can be performed with each tissue
- Provide recommendations on samples for pathology in clinical assessments of the donor suitability as well as other non-organ pathological assessments
Multiorgan Allocation

- OPO Committee is sponsoring updates to general multiorgan policy

- Goals:
  - Set clear rules for OPOs to promote consistency and transparency
  - Establish clear “sharing thresholds” using distance/criteria
    - Committee has discussed heart-liver and lung-liver using this framework
    - Committee is assessing kidney multiorgan combinations now

- Future projects will assess the need to develop medical eligibility criteria to include a safety net for those deemed not eligible for MOT
Questions