Introduction

The Acuity Circles Subcommittee (the Subcommittee) met via teleconference on 07/22/2020 to discuss the following agenda items:

1. Sorting within Liver Allocation Classifications Scenarios

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

1. Sorting within Liver Allocation Classifications Scenarios

The Subcommittee reviewed scenarios depicting the current state of liver allocation classifications and options for the proposed “Sorting within Liver Allocation Classifications” project.

Summary of Data:

Currently, within each MELD or PELD score allocation classification, all candidates are sorted in the following order:

1. MELD or PELD score (highest to lowest)
2. Identical blood types, compatible blood types, then incompatible blood types
3. Waiting time at the current or higher MELD or PELD score (highest to lowest)
4. Time since submission of initial approved MELD or PELD exception request (highest to lowest)
5. Total waiting time (highest to lowest)

The categories of concern are:

- Exception candidates should not be ranked by time at score or higher
- Ranking of exception vs. non-exception candidates of the same MELD/PELD score.

A proposed solution previously discussed is to change the classification to:

1. MELD or PELD score (highest to lowest)
2. Identical blood types, compatible blood types, then incompatible blood types
3. Match score time (highest to lowest)
   a. If calculated lab score is used by match for #1 above then
      Match score time = Waiting time at the current or higher MELD or PELD score
   b. If exception score is used by match for #1 above then
      Match score time = Time since submission of initial approved MELD or PELD exception request
4. Total waiting time (highest to lowest)

The Subcommittee reviewed test case examples comparing current state to the proposed solution.
Summary of Discussion:

The Subcommittee began discussions on the following questions:

- How should candidates of the same MELD/PELD with an exception and with a calculated lab score be ranked?
- Should time at exception score be equivalent to time at calculated score and higher?
- Should time at calculated score be weighted higher than time at exception score?
- What evidence do we need to demonstrate that time at calculated score should be weighted higher?
- How would we determine what additional weight time at calculated score should get?

The general consensus of the Subcommittee was that exception candidates should be counted based on the date the exception MELD or PELD score was awarded, not when the exception was approved. The Subcommittee agreed the ultimate goal of any change is to increase fairness and parity. The Subcommittee agreed lab MELD or PELD patients should be ranked ahead of exception patients in a tie.

Next Steps

The Subcommittee will continue their discussions and considerations of the proposed changes to the classification on the next call.

Upcoming Meetings

- August 12
- August 26