Introduction

The Acuity Circles Subcommittee (the Subcommittee) met via teleconference on 09/23/2020 to discuss the following agenda items:

1. MMaT around the donor hospital: Fixed Circle vs. Variable Circle
2. MMaT Calculation

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

1. **MMaT around the donor hospital: Fixed Circle vs. Variable Circle**

The Subcommittee reviewed the two framework options for MMaT around the donor:

- **Variable Circle Framework**: MMaT is based on smallest circle around donor hospital with sufficiently large cohort of transplants
- **Fixed Circle Framework**: MMaT is based on transplants performed within a fixed distance (i.e. 250 NM or 500 NM) of each donor hospital

In both frameworks, there would be a pathway to move to a larger circle if there was not a sufficiently large cohort in the initial circle. Either framework would be “variable” to a certain extent to allow for donor hospitals without transplant programs within their first circle.

The Subcommittee then reviewed example scenarios using each framework option for various geographic locations and population densities nationwide.

The Subcommittee also reviewed the following data points:

- Deceased donor, liver-alone transplants by exception status and distance from donor hospital to transplant program
- Deceased donor, liver-alone transplants by donor type, exception status and distance from donor hospital to transplant program
- Deceased donor, liver-alone transplants by allocation MELD or PELD score or status, exception status and distance from donor hospital to transplant program
- Number of liver transplant programs within 150NM, 250NM, and 500NM of each donor hospital with at least one MMaT qualifying transplant
- Count and percent of donor hospitals with fewer than 10, 25, and 50 transplants within 150 and 250NM
- Difference in MMaT within 150NM of donor hospitals and MMaT within 250NM of donor hospitals, all donor hospitals with at least one deceased liver donor recovered
- Transplant programs within 250NM for donor hospitals with zero programs within 150NM
Summary of Discussion:
The Subcommittee began discussing what the initial circle size should be used in the MMaT/donor hospital calculation. A member commented the larger the circle, the larger the cohort would be for calculating MMaT, however the cohort would vary depending on the volume of transplants at the programs within the circle. Another member recommended establishing a national MMaT with an elevator that would increase the exception score assigned to exception candidates the longer they are on the waitlist. A member commented they think the circle size should be 250NM except for the Southwest region where it should be 150NM.

The Subcommittee requested more detail on the volume of transplants performed by transplant programs within the different circle sizes in the donor hospital examples discussed.

Next Steps:
The Subcommittee will continue to discuss circle size options during the next meeting.

2. MMaT Calculation
The Subcommittee reviewed two options for calculating MMaT:

- Transplants: Calculate based on transplants that occurred within whichever distance of the donor hospital
- Transplant Programs: Calculate based on MMaT of transplant programs within whichever distance of the donor hospital

Next Steps
The Subcommittee requested illustrative examples of both options to review during the next meeting.

Upcoming Meetings
- October 14
- October 28
Attendance

- **Subcommittee Members**
  - Peter Abt
  - Diane Alonso
  - Sumeet Asrani
  - Derek DuBay
  - Julie Heimbach
  - Ray Lynch
  - Peter Matthews
  - Mark Orloff
  - Shekhar Kubal
  - James Pomposelli
  - Jorge Reyes
  - James Trotter

- **HRSA Representatives**
  - Jim Bowman
  - Marilyn Levi
  - Robert Walsh

- **SRTR Staff**
  - Michael Conboy
  - John Lake
  - Andrew Wey

- **UNOS Staff**
  - Matthew Cafarella
  - Betsy Gans
  - Lindsay Larkin
  - Samantha Noreen
  - Matt Prentice
  - Leah Slife
  - Karen Williams

- **Other Attendees**
  - Ryutaro Hirose