

**OPTN Kidney Transplantation Committee  
Meeting Summary  
December 21, 2020  
Conference Call**

**Vincent Casingal, MD, Chair  
Martha Pavlakis, MD, Vice Chair**

## **Introduction**

The Committee met via teleconference on 12/21/2020 to discuss the following agenda items:

1. Kidney and Pancreas Allocation Implementation Update and Discussion
2. Biopsy Best Practices Workgroup Update
3. Policy Oversight Committee Update

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

### **1. Kidney and Pancreas Allocation Implementation Update and Discussion**

The Committee received an update on the delay in policy implementation and the associated critical comment received by the Health and Human Services (HHS) Secretary.

#### Data summary:

- Kidney and Pancreas allocation policies were scheduled for implementation on December 15<sup>th</sup>.
- A critical comment was submitted to the HHS Secretary requesting a delay in implementation.
- Soon after, a complaint was filed requesting a temporary restraining order
- On December 14<sup>th</sup> Health Resources and Service Administration directed the OPTN to postpone implementation of kidney and pancreas allocation policies for 60 days while they review the critical comment
- OPTN sent notice of implementation delay the evening of December 14<sup>th</sup>

#### Summary of discussion:

Committee consensus was determined that COVID-19 will have minimal impact on policy change goals. Several members expressed the COVID-19 pandemic does not justify delaying implementation of this policy. There was no opposition from the Committee.

Several potential issues were discussed. Regarding the comment about the availability of commercial flights during the pandemic, multiple members expressed that a reason the committee favored the 250NM circle with two proximity points inside the circle and four proximity points outside the circle policy was because it will likely result in less reliance on commercial airlines. Another potential concern in the critical comment was the safety of OPO staff. The Chair commented that while change during a crisis is difficult that this policy will overall benefit the community. An OPO representative on the committee stated that their OPO is prepared to implement the new policy and that COVID-19 does not impact their ability to do so. A transplant hospital shared a similar sentiment that despite the pandemic, their hospital is prepared to implement this policy. Also mentioned during the discussion was the potential challenge in relationship development between OPOs and transplant hospitals not familiar with each other, but is not significant enough to warrant a delay implementation. Regarding the

comment about the scarcity of resources during the pandemic, one member commented that one potential challenge related to the pandemic was the lack of PPE for many healthcare facilities and how that could have impacted the decision for some programs to pause their work. Additionally, the member noted that rural areas may have seen a decrease in access to commercial flights compared to major city hubs. However, another member noted that 250 NM was estimated to have less reliance on commercial flights and so the concern of access to flights may not be substantive.

Overall, members shared disappointment in the decision to delay implementation because of the efforts required to develop the policy and prepare the community, as well as, confidence in implementation. Statements were made about the significant work the committee invested to develop a comprehensive, well founded, reliable policy that incorporated extensive feedback from stakeholders and brought to consensus by the Committee.

Next steps:

Staff will continue to update the committee on the implementation of the new allocation and other related policies.

## **2. Biopsy Best Practices Workgroup Update**

The Committee received an update on the recently assembled workgroup and their progress to date.

Summary of discussion:

The workgroup is currently in a fact finding stage and looking to establish standard criteria for biopsies. One committee member stated they are looking forward to what is coming, especially on the heels of the recently published paper on the same subject. The workgroup chair replied that we may not be able to drastically change behavior but we can try to make them as accurate and meaningful as possible.

One member suggested there should be a safety net for when the biopsy results are not as good as what was reported. A member of the Scientific Registry of Transplant Recipients clarified that the organization does take into consideration biopsy findings when calculating program specific reports.

Next steps:

The workgroup will continue their project work and regularly update the full committee.

## **3. Policy Oversight Committee Update**

The Vice Chair provided an update to the committee of the work of the Policy Oversight Committee.

Summary of discussion:

There was no discussion from the committee.

### **Upcoming Meetings**

- January 25, 2021
- February 22, 2021

## Attendance

- **Committee Members**
  - Ajay Israni
  - Alejandro Diez
  - Amy Evenson
  - Andy Weiss
  - Bea Concepcion
  - Cathi Murphey
  - Deirdre Sawinski
  - Dev Desai
  - Elliot Grodstein
  - Jim Kim
  - Julianne Kemink
  - Marilee Clites
  - Martha Pavlakis
  - Peter Kennealey
  - Asif Sharfuddin
  - Erica Simonich
- **HRSA Representatives**
  - Adriana Martinez
  - Jim Bowman
  - Raelene Skerda
- **SRTR Staff**
  - Bryn Thompson
  - Jodi Smith
  - Jonathan Miller
  - Nick Salkowski
- **UNOS Staff**
  - Amanda Robinson
  - Ben Welford
  - Craig Connors
  - Joel Newman
  - Kiana Stewart
  - Lauren Motley
  - Liz Robbins Callahan
  - Matt Prentice
  - Meghan McDermott
  - Nicole Benjamin
  - Olga Kosachevsky
  - Sara Moriarty
  - Shannon Edwards
  - Tina Rhoades
  - Vincent Casingal