

Meeting Summary

OPTN Minority Affairs Committee
Meeting Summary
January 22, 2024
Conference Call

Alejandro Diez, MD, Chair Oscar Serrano, MD, Vice Chair

Introduction

The OPTN Minority Affairs Committee (the Committee) met via Webex teleconference on 1/22/2024 to discuss the following agenda items:

- 1. eGFR Update
- 2. New Project Analysis

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

1. eGFR Update

The Committee heard an update on the ongoing policy requirements for <u>Modify Waiting Time for</u> Candidates Affected by Race-Inclusive Estimated Glomerular Filtration Rate (eGFR) Calculations.

Ongoing policy requirements include the following:

- Transplant programs must continue to notify all newly registered kidney candidates of the requirements of the transplant program according to OPTN Policy 3.7.D.iv, <u>Reporting</u> <u>Requirements for Kidney Transplant Programs</u>.
- 2. Assess newly registered kidney candidates to determine eligibility
- 3. Submit completed waiting time modification requests to the OPTN for every candidate who should have qualified to accrue waiting time sooner.

Updated resources:

- FAQs for professionals
- FAQ for patients
- Candidate notification sample

Summary of discussion:

There were no further discussions.

2. New Project Analysis

The Committee continued their discussion from the $\underline{12/18}$ MAC meeting regarding the Committee's next project idea. During last month's meeting, the Committee determined that more information on the availability of incarcerated population data was needed before moving forward with the next project idea.

The Committee was asked which of the two projects they would like to address next and why.

- Incarcerated population project
- Race-neutral OPTN policy project

Summary of discussion:

Decision #1: The Committee determined that they would move forward with the incarcerated population project idea.

Incarcerated population

A member asked if there was data on why an incarcerated individual was removed from the waitlist. The presenter replied that the OPTN does not collect data on the incarcerated population and why they may have been removed from the waitlist. A member asked if there was any information regarding incarcerated individuals who may be a familial match to another patient. The presenter replied that there is OPTN data on familial matching, but there's no information about the individual's incarceration status - there may be more information about the incarcerated population on a program level.

A member commented that there is minimal data on why programs are willing or not willing to consider incarcerated individuals for transplant. He noted that if the Committee proceeds with this project idea, then it would be essential to know what barriers exist to incarcerated individuals receiving a transplant. He further commented that the jail system works autonomously; therefore, there's no one governing board that determines how this population of patients who have end-stage organ failure will be handled or managed if they are considered for a transplant. The member expressed interest in surveying programs because it would help understand the issues surrounding transplanting incarcerated individuals.

A member shared that at their program, they evaluated a patient who was incarcerated, and regardless of if they were incarcerated, they still did not meet the program's criteria because they did not have a social security number, a place to live, no income, or insurance. She highlighted that there were significant challenges associated with this individual trying to get a transplant.

Another member commented that many incarcerated individuals are not being referred; it is vital to understand the standard of care for caring for a patient who is involved in the penal system.

Incarceration vs. Race-neutral project idea discussion

A member noted that both projects are aligned with the Committee's charge, but the approach to the incarcerated project may vary, as it seems more opinion-based. Meanwhile, for the race-neutral project, it's critical to understand the disparities caused by tests that include race.

Regarding the race-neutral project, a member asked if the Committee could partner with other societies to narrow the scope of the project idea. The presenter replied that the Committee would need to identify where the issues are and that the Committee can look at more than one issue. For example, *OPTN Policy 9.5.B*, can involve race in the Forced Expiratory Volume (FEV1) test. If there are additional calculations and tests that include race, the Committee can address them within one project.

A member noted that it may be helpful to review OPTN policy and determine if other areas could be identified as race-based calculations or tests.

Regarding the incarcerated project, another member commented that the biggest challenge is that there's not a lot of data. She asked if there was a way to collect data on this project. She further commented that the scope of the race-neutral project needs to be narrowed down a little more. She referenced the previous race-neutral projects the Committee worked on and stated that removing race from eGFR took some time; therefore, looking at multiple areas where race is included can be complex and may take significant time to address.

Another member favored moving forward with the incarcerated project. They expressed that it's crucial to understand the biases shared amongst transplant programs for not transplanting an incarcerated individual so that the Committee can try to define which questions will require data collection. The member also noted that the race-neutral project seems vague and could be more challenging to address in a specified timeframe. Another member agreed that a guidance document on the incarcerated population may be helpful to centers.

Vote:

Incarcerated population project: 10 members

Race-neutral project: 3 members

Upcoming Meeting

• February 26, 2024, at 3 pm ET

Attendance

• Committee Members

- o Alejandro Diez
- o Oscar Serrano
- o Catherine Vascik
- o Tony Urey
- o Tatia Jackson
- o Jason Narverud
- o Sandra Edwards
- o April Stempien-Otero
- o Amaka Eneanya
- o Obi Ekwenna
- o Adrian Lawrence
- o Niviann Blondet
- o John Bayton

HRSA Representatives

- o Marilyn Levi
- o Mesmin Germain
- o Jim Bowman

• SRTR Staff

o Bryn Thompson

UNOS Staff

- o Kelley Poff
- o Tamika Watkins
- o Kaitlin Swanner
- o Houlder Hudgins
- o Jesse Howell
- o Betsy Gans