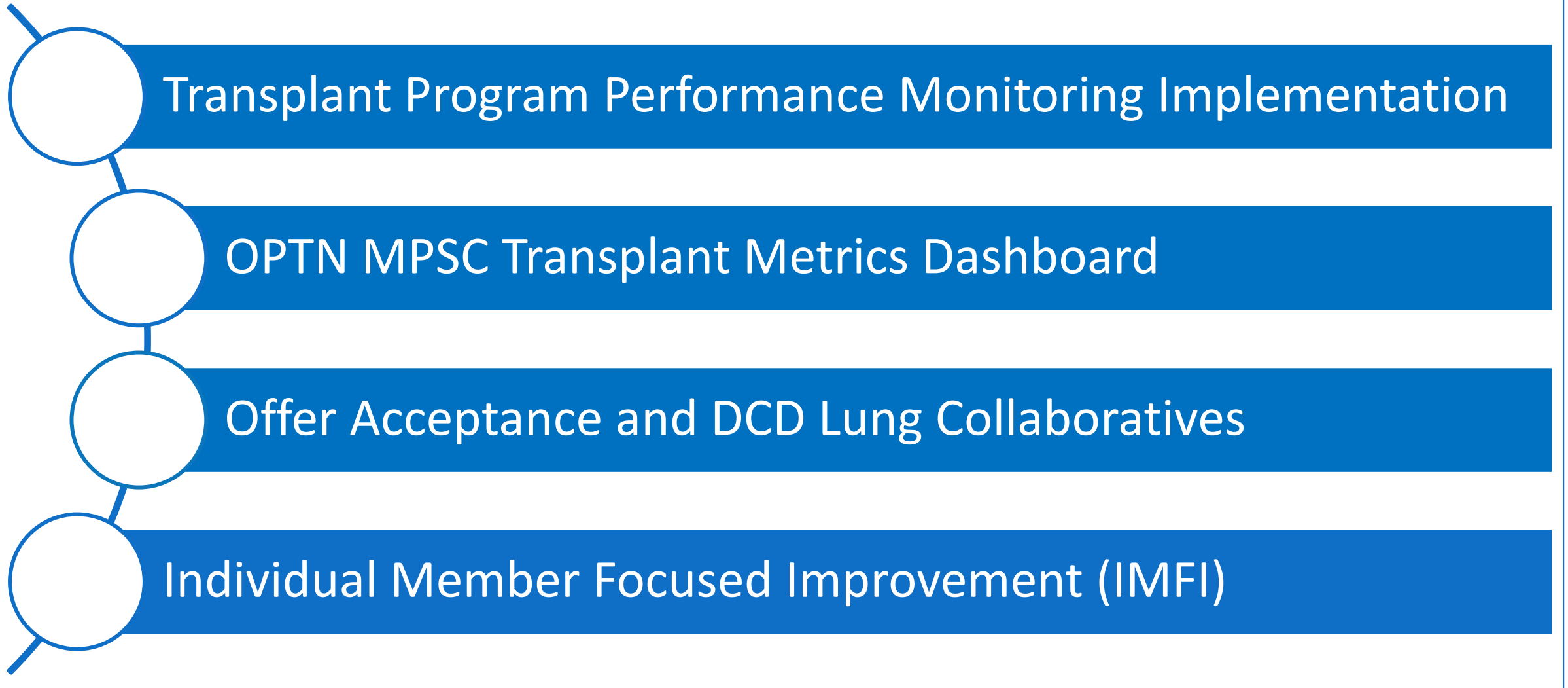


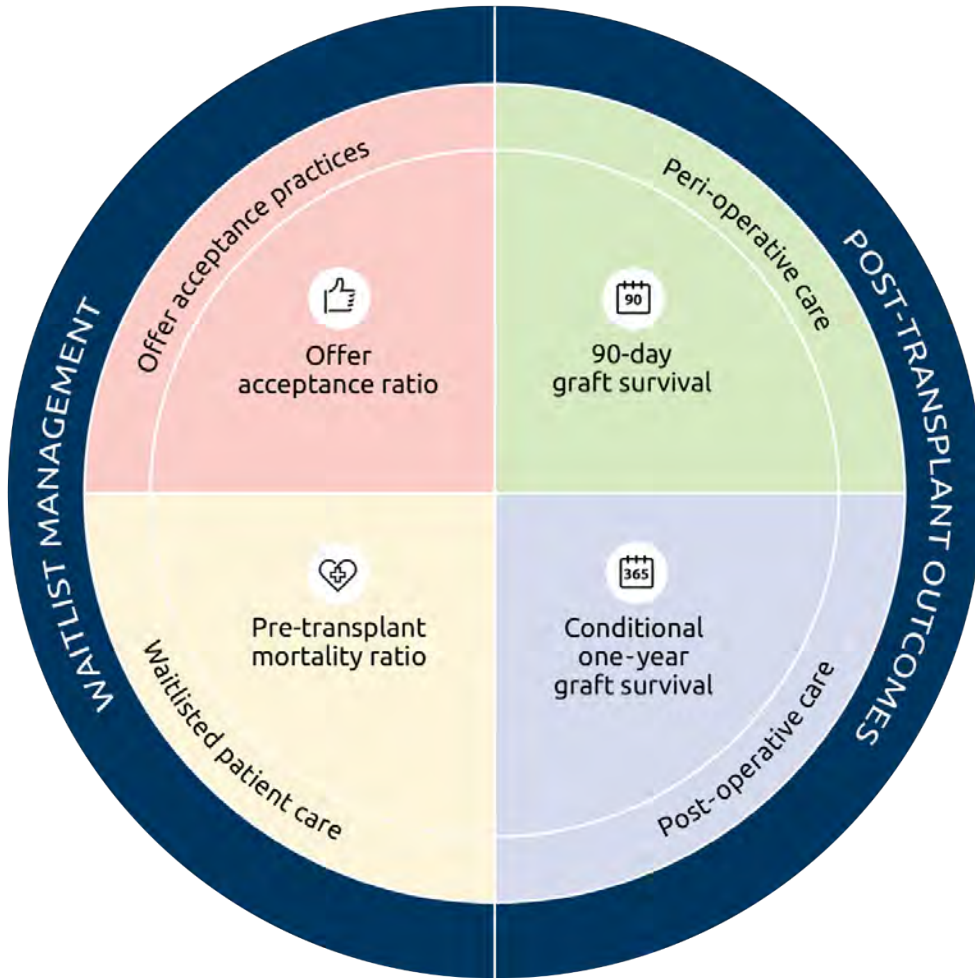
Member Quality Update

Summer 2023

Topics



Transplant Program Performance Monitoring



Implementation Timeline

Implemented July 2022:

- 90-day graft survival hazard ratio
- One-year graft survival conditional on 90-day graft survival hazard ratio

Implemented July 2023:

- Offer acceptance rate ratio
- First offer cohort: 1/2022 – 12/2022

July 2024:

- Pre-transplant mortality rate ratio
- First Observation window: 1/2022 – 12/2023

Offer Acceptance Rate Ratio

- MPSC sent out first inquiries based on the offer acceptance rate ratio in July
- MPSC chose to include the offer acceptance metric in the new transplant performance monitoring system because
 - There is significant variability between programs in performance
 - Transplant programs have significant, if not total, control over this metric
 - Encourages behaviors that will increase offer acceptance rates leading to an increase in transplants and efficiency in the system
- Offer acceptance rate ratio criteria
 - **Adult:** Greater than 50% probability that the transplant program's offer acceptance rate ratio is less than 0.30 during a 1 year period
 - **Pediatric:** Greater than 50% probability that the transplant program's offer acceptance rate ratio is less than 0.35 during a 1 year period

Offer Acceptance Rate Ratio Review Process

- Initial inquiry requests information on:
 - Composition of program
 - Process for consideration and acceptance of offers
 - Process for review of offer acceptance practices and acceptance rates
 - Plan for quality improvement and demonstrated improvement
- Programs provided
 - Overall offer acceptance rate ratio data and published SRTR subgroups for relevant organ
 - Information on offer acceptance data tools available in the OPTN Computer System Data Services portal
 - Offer of one-on-one education session with staff on offer acceptance data tools

OPTN Performance Metrics Toolkit

Additional Resources added to the OPTN Website

Enhance Transplant Program Performance Monitoring

Toolkit



Background



Bylaws changes



Implementation timeline



Risk-adjustment and performance evaluation



Education and resources

Background

In December 2021, the [OPTN Board of Directors approved bylaw changes](#) that will allow for a more holistic evaluation of transplant programs. [OPTN Bylaws](#) outline membership requirements for organizations and individuals to participate in the U.S. transplant network.

Education and resources

The proposal's [public comment page](#) has information and educational resources about the metrics, including:

- A **video introduction** of the changes outlining what's involved
- A recording of an Aug. 4, 2021, webinar with Rich Formica, M.D., providing a more **detailed analysis**
- A September 2021 recording of MPSC chair, Ian Jamieson, and SRTR director, Jon Snyder, discussing the **four evaluation metrics involved**, including risk-adjustment and frequently asked questions

Instruction

- **Download the PDF:** [Enhanced Transplant Program Performance Metrics](#) provides a quick review about how risk adjustment works for the four metrics used to evaluate performance
- **Download the PDF:** [Effective Practices to Improve Post-transplant Outcomes](#)
- **Download the PDF:** [Effective Practices to Improve Offer Acceptance](#)

[Use this link](#) to access these professional education resources and learning modules:

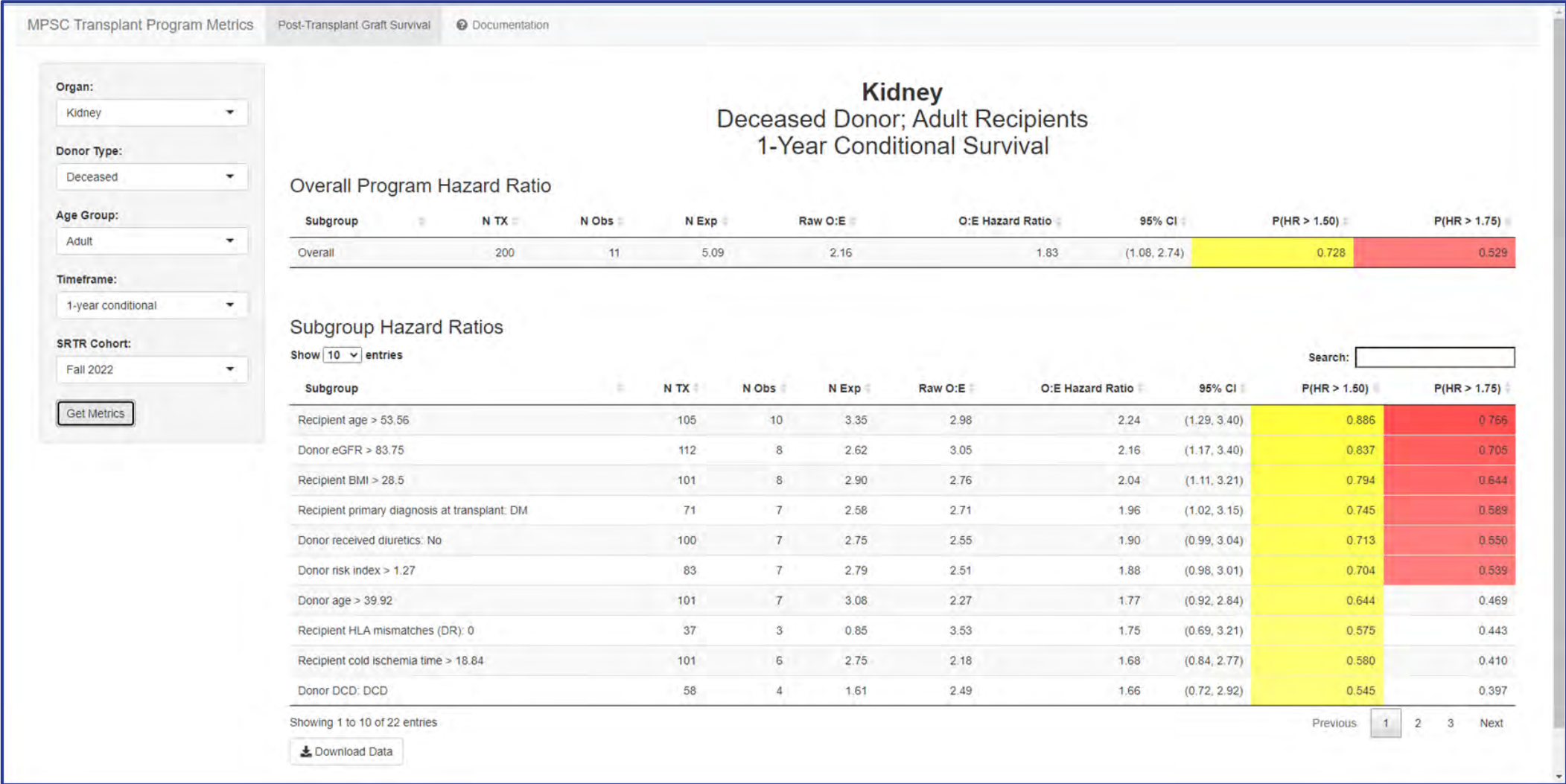
- **QLT150:** MPSC transplant program performance monitoring
- **QLT151:** MPSC post-transplant outcomes and risk adjustment (confers CEPTC credits)
- **QLT152:** MPSC Offer Acceptance Rate Ratio and Risk Adjustment (confers CEPTC credits)
- **QLT153:** MPSC pre-transplant mortality rate ratio and risk adjustment (confers CEPTC credits)
- **OPTN Offer Acceptance Collaborative Playlist** (confers CEPTC credits)
 - The modules have information about:
 - MPSC transplant program performance monitoring, the offer acceptance rate ratio, and OPTN tools to drive improvement.
 - Effective practices related to offer acceptance and hear lessons learned from previous collaborative participants.

Learn more about monitoring and performance reviews: [What to Expect: Performance Reviews](#)

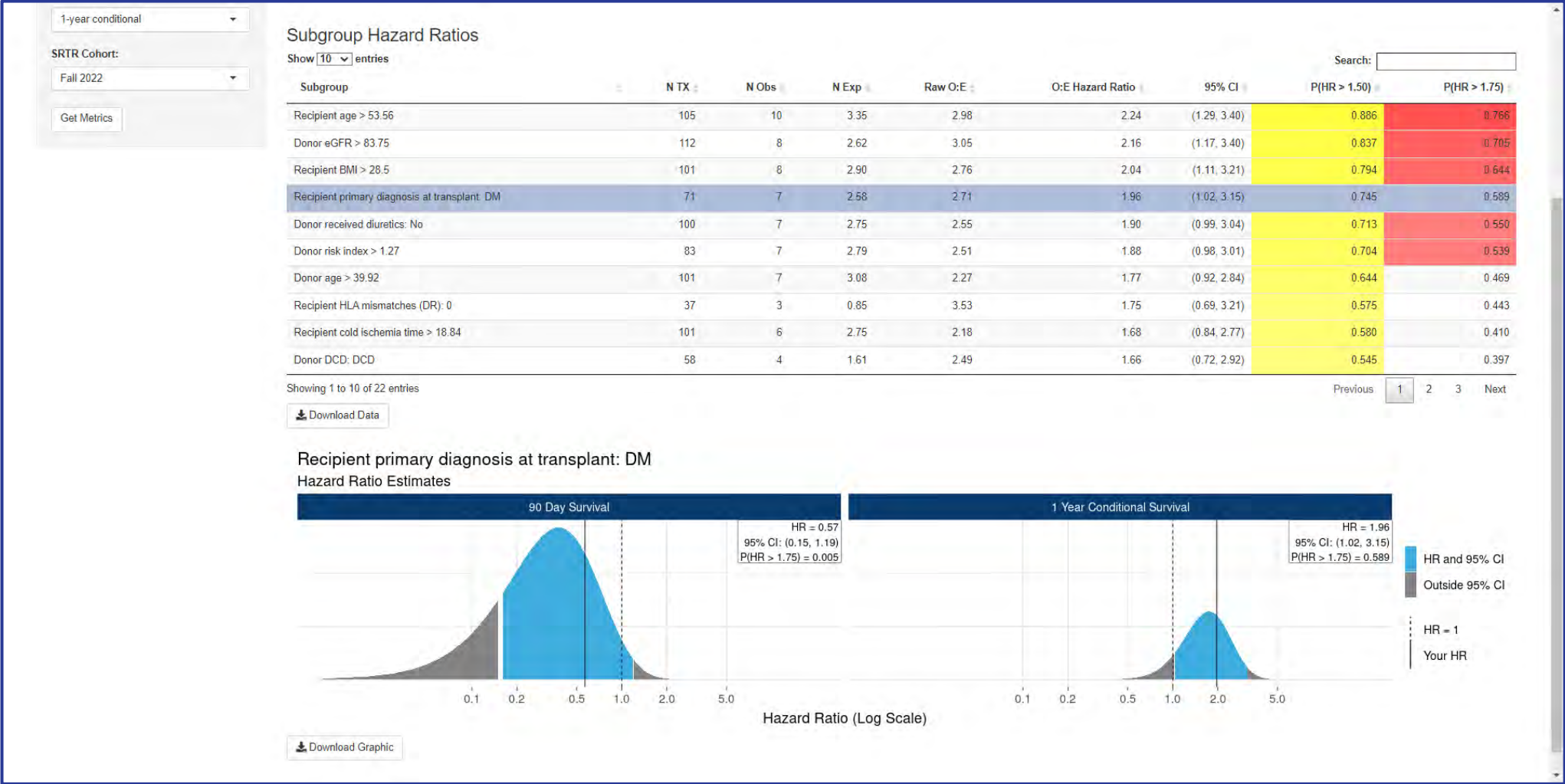
SRTR reporting

The SRTR has also added information to transplant programs' SRTR secure sites to help you understand whether your program meets the new MPSC performance monitoring criteria. This information is intended to support you as you plan and evaluate your program's performance.

New OPTN MPSC Transplant Metrics Dashboard



Subgroup Analysis





Collaborative Improvement Project Updates

Offer Acceptance Collaborative

83 transplant programs (adult and pediatric)

49 kidney, 12 liver, 17 heart, and 5 lung

Goal


Increase offer acceptance rates over the 6 months prior

Kidney by 20%

Liver, Heart, and Lung by 15%



Improvement Areas

- 
- Define and Revise Acceptance Criteria
 - Optimize Response to Organ Offers
 - Perform Retrospective Reviews
 - Strengthen Waitlist Management

Understanding data is critical to improvement!

DCD Lung Transplant Collaborative

29 adult lung programs (~45% of adult programs)

Goal

Increase DCD lung transplants by 30% over the previous 8-month period

Improvement Projects

Optimize internal processes and strengthen collaboration with OPOs

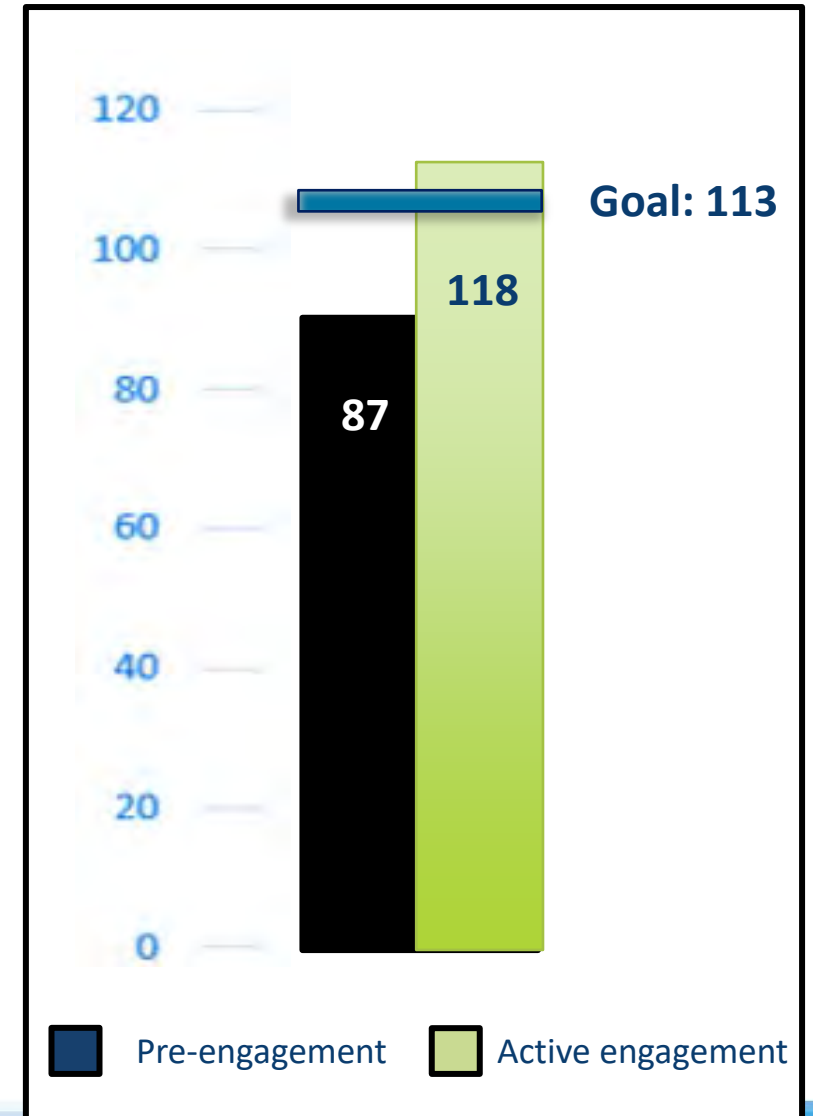
Engagement Activities

Collaborative Calls, Webinars, Coaching and more coaching!



DCD Lung Transplant Collaborative Progress

- Pre- engagement (April – November 2022)
n=87
- Cohort goal (December – July 2023)
n=113 (30% increase)
- As of July 14, 2023
n=118
- Project concludes July 31, 2023
 - Goal surpassed
 - Stay tuned for evaluation report



OPTN DCD Lung Collaborative *Learning Congress*

Marriott Riverwalk + San Antonio, TX

Sept. 26-27, 2023



1 ½ day in-person conference
2 people from every adult lung program will be invited
OPOs will be incorporated
Virtual options will be provided for broader audience

Highlight DCD lung improvement projects and continue the momentum of this effort!

What's Next?

- Evaluate current projects
- Disseminate findings
- Share resources
- Explore next project
 - ***DCD Liver Transplant Collaborative***



Questions?

Contact ci@unos.org

Individual Member Focused Improvement (IMFI)

Primary Aim	To develop a plan to increase efforts at monitoring and improving OPTN member performance using collaborative quality improvement opportunities.
Purpose	To help individual members improve through the use of quality improvement tools and engagements custom designed for the member and their unique need.
Participation	<ul style="list-style-type: none">• Broader deployment of initiative started as of 10/1/2022; IMFI is available to all OPTN members and is entirely voluntary• 9 pilot projects (eight transplant programs and one OPO have been completed as of July 2023)• 8 additional projects are underway as of July 2023
Timeframe	<ul style="list-style-type: none">• Discovery occurred during winter 2019/early 2020• Continue to iterate on what project structure, timeframe, and services work best for the members throughout 2023

IMFI

Individual Member Focused Improvement



IMFI Improvement Activities

OPTN Computer System Data Services Portal Education

- Data services tool review of Kidney Waiting List Management tool, ROO, & RUM, among other relevant tools
- Real-time troubleshooting with OPTN Subject Matter Expert

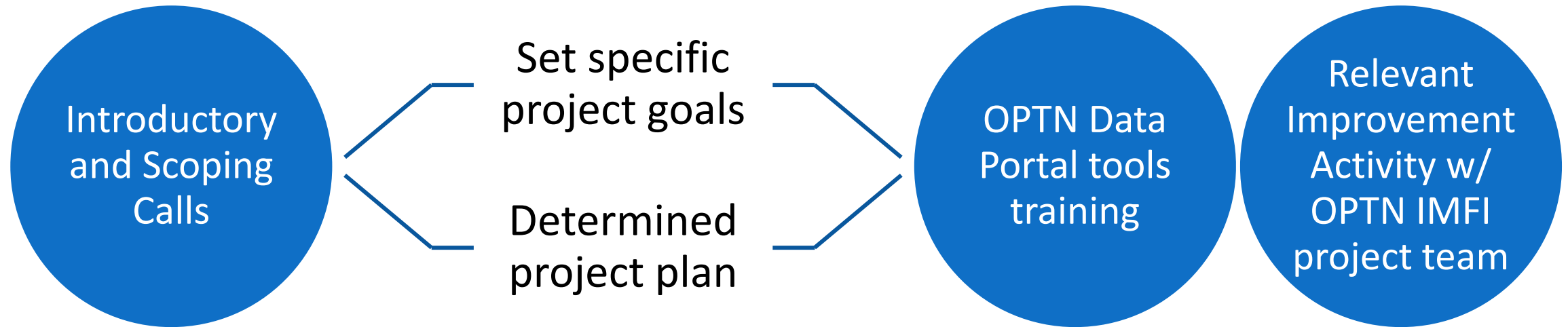
Process Mapping/Failure Modes and Effects Analysis/Fishbone

- Map the member's requested and relevant process in a collaborative session
- Identify pain points and recommendations for improvements

Peer Mentoring

- Peer mentors with relevant expertise
- Virtual session(s) where member can ask peers questions and for feedback about a variety of topics

General IMFI Engagement Process



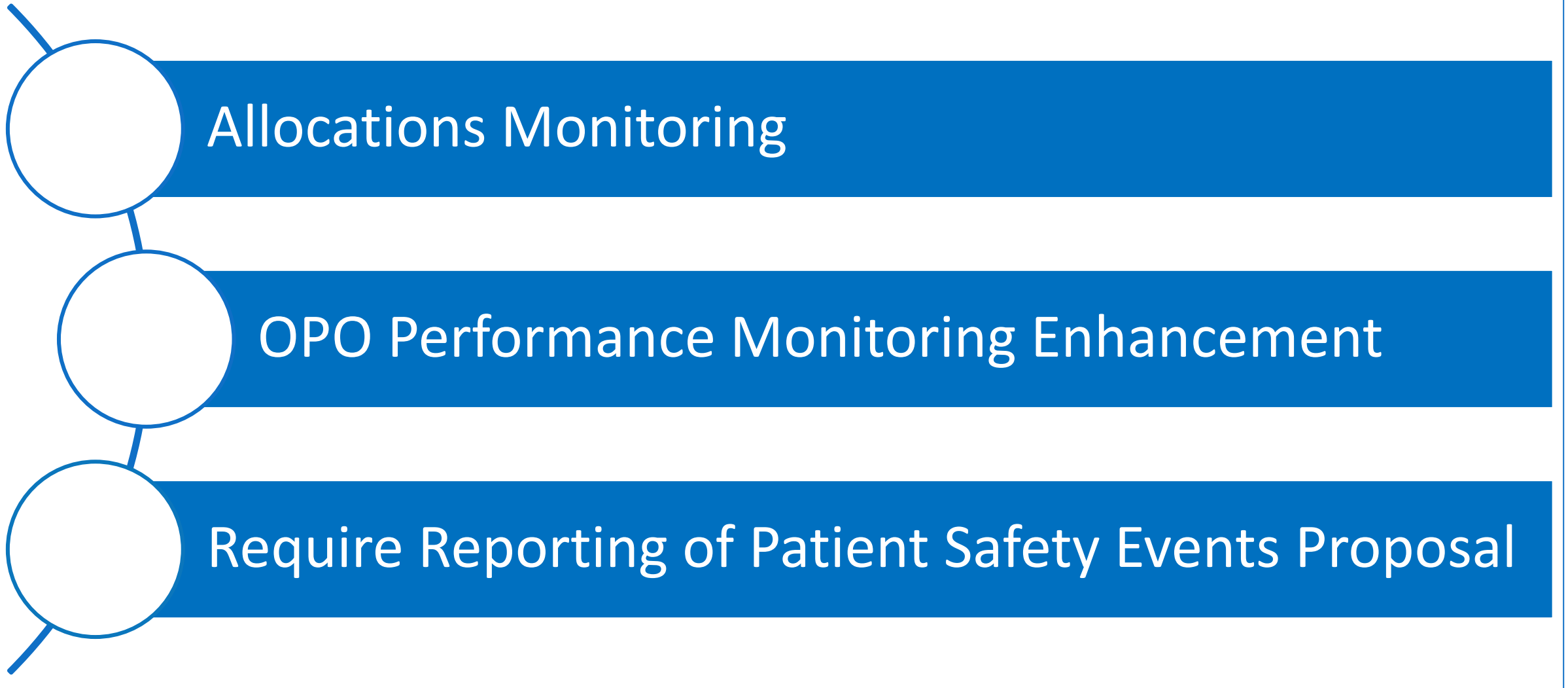
Examples of IMFI Project Goals

- To improve efficiency in a program's referral to listing process
- To improve management of waitlisted candidates and patient readiness
- To assist the establishment of a new program and prepare for growth following COVID
- To increase efficiency and effectiveness of peri-transplant OR processes
- To standardize and improve consistency of post-transplant care management practices

Feedback or Questions

- For performance monitoring, email MPSCReports@unos.org
- If you are interested in learning more about CI, email ci@unos.org
- If you are interested in learning more about IMFI, email MQFeedback@unos.org

Topics



Allocations Monitoring Subcommittee

- The MPSC observed a large increase in the number of allocations out of sequence (AOOS)
- The MPSC has been evaluating data to identify potential improvements to monitoring and to inform recommendations for policy and programming improvements
- Working to determine root cause; noted increases coincide with:
 - Increase in organ utilization
 - New Centers for Medicare & Medicaid Services (CMS) OPO performance metrics
 - Changes to OPTN kidney and liver allocation policies
- The MPSC supports efforts to increase organ utilization and determines, in most instances, individual AOOS seem appropriate to ensure organs are successfully transplanted
 - Allocating harder-to-place organs
 - Decreasing cold ischemic time (CIT)
 - Placing organs after “late turndowns” by transplant programs

Percentage of organs that were allocated out of sequence

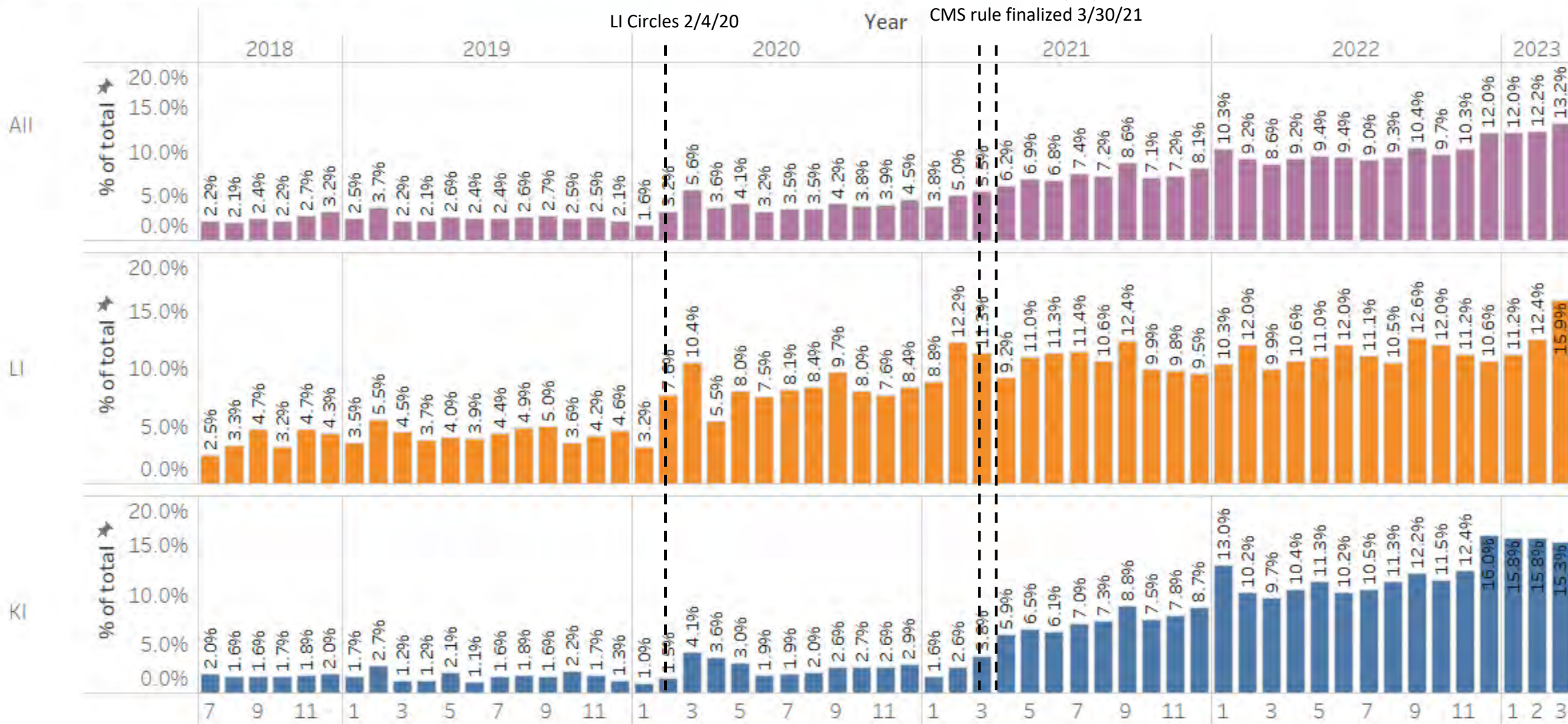
Shown are values for all organs combined, livers only (LI+LIS1+LIS2) and kidneys only (LKI+RKI+EKI)

July 1st, 2018 - March 31st, 2023

KI DSA removal 3/15/21

CMS rule finalized 3/30/21

LI Circles 2/4/20



Allocations Monitoring Subcommittee

- MPSC is focusing on improving monitoring of allocations out of sequence by:
 - **Considering possible definitions of “late decline” and inquiring with transplant programs accordingly**
 - Evaluating aggregate data to identify any concerning patterns and trends in AOOS
 - Creating specific triggers to identify individual allocations requiring in-depth review
 - Evaluating SRTR organ yield data to identify donor and/or recipient characteristics that suggest an organ will be hard-to-place and may not require in-depth review
 - Considering increased data collection that can improve allocation monitoring and make recommendations to the OPTN Data Advisory Committee as needed

OPO Performance Monitoring Enhancement

- The MPSC is evaluating potential changes to OPTN OPO performance monitoring
- Over the last 6 months, MPSC has
 - Received updates from SRTR on current state and suggestions to consider
 - Learned more about CMS OPO performance measures
 - Defined scope of the project and how to measure success of the project
 - Concluded that comprehensive "monitoring enhancements" are needed and not simply new “metrics”
- Sponsoring work group with representatives from various OPTN committees
- OPTN Board of Directors provided feedback on scope and prioritization of areas of this OPO performance monitoring enhancement work

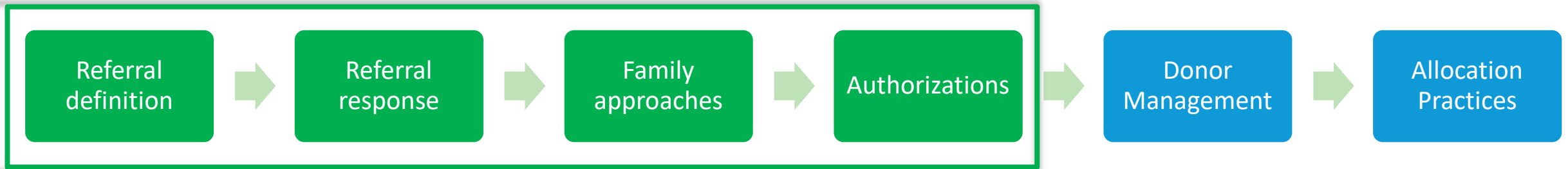
OPO Performance Monitoring Enhancement

- What differentiates an OPO that performs well from an OPO that does not perform well?
 - Adequate resources and training
 - Effective relationships and communication
 - Effective quality improvement processes
- What parts of the donation process are the responsibility of OPOs, OPOs can impact, and/or have wide variation across OPOs?
 - Referral definition and response rate
 - Authorization
 - Family approaches
 - Donor management – case time
 - Allocation practices – particularly with DCD, NRP, perfusion, medically complex donors
 - Communication and collaboration with donor hospitals and transplant programs

OPO Performance Monitoring Enhancement

- The MPSC feels the OPTN needs separate metrics from CMS but acknowledges metrics should be complimentary
- Improved transplant program offer acceptance rates are essential to increasing the transplantation rate
- Standardizing critical OPO processes and consistent data definitions are essential to improve member performance, effective data collection and efficiency of the system
- Increased data collection is required to proactively monitor and understand member behavior and improve transparency
 - For example, how do we gather donor-hospital level data to assess donor potential?

Parts of the donation process that are the OPOs responsibility that OPOs can impact:



Managing Relationships with Donor Hospitals and Transplant Hospitals

Questions?