

**OPTN Policy Oversight Committee  
Post-Implementation Monitoring Subcommittee  
Meeting Summary  
July 11, 2023  
Conference Call**

**Jesse Schold, PhD, MEd, MStat, Chair**

## **Introduction**

The Post-Implementation Monitoring Subcommittee (the Subcommittee) met via Citrix GoToMeeting teleconference on 07/11/2023 to discuss the following agenda items:

1. Welcome & Agenda
2. Eliminate Use of DSA and Region from Kidney Allocation: 2-year post-implementation monitoring report & recap of Kidney Committee feedback

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

### **1. Welcome and Agenda**

The Chair briefly reviewed the expectations of Subcommittee members and the expected goal of the meeting.

### **2. Eliminate Use of DSA and Region from Kidney Allocation: 2-year post-implementation monitoring report & recap of Kidney Committee feedback**

#### Data summary:

The 2-year post-implementation monitoring report provided insight on the impact of the kidney allocation policy changes implemented in March 2021. The policy eliminated the use of Donor Service Areas (DSAs) and regional boundaries, replacing them with a 250 NM circle and proximity points based on the distance between the listing center and the donor hospital.

The post-policy implementation period witnessed a significant increase in the number of kidney transplantations, as well as a faster rate of transplant. Particularly noteworthy was the substantial increase in pediatric rates across all age groups. This positive trend was also observed in deceased donor kidney transplant rates, which improved across different race/ethnicity groups. Moreover, deceased donor transplant rates showed an increase based on dialysis time.

One of the changes observed post-policy implementation was the increase in distance from the donor hospital for kidney transplants. The average distance traveled for kidney transplants rose from approximately 71 NM to 120 NM, leading to an increase in cold ischemia time from 17.2 hours to 19.5 hours. These longer distances were associated with higher rates of delayed graft function.

The monitoring report also highlighted an increase in deceased kidney donor recovery rates, which could potentially be attributed to both the policy change and changes in Organ Procurement Organization (OPO) oversight. However, there was a concerning rise in the rates of non-use/non-

recovery of deceased donor kidneys, which increased from 21% to 26%. This increase was observed not only for high-risk kidneys but also for standard-risk kidneys.

Summary of discussion:

Decision: No decisions made; the Subcommittee will be sending a memo of the discussion to the Kidney Committee following the meeting.

The Vice Chair of the Kidney Committee provided feedback that while the number of kidney offers increased following the policy change, acceptance rates by transplant centers decreased. This finding raises concerns about the need for improved filtering and criteria for accepting donors and recovering transplantable kidneys. The Kidney Committee feedback emphasized the positive impact of increased transplant rates but expressed concern about longer cold ischemia times and delayed graft function, attributing them to both the policy change and OPO aggressiveness in procurement.

Members discussed whether some of the statistics provided were not given enough context, and that perhaps including more context related to what numbers are clinically significant, particularly in relation to non-utilization, would be better for future reports.

Members expressed a desire for more granularity to be able to understand regional differences as well as OPO differences. A member brought up the importance of offer filters in relation to this policy change, highlighting that though OPOs might vary in their functionality, utilizing offer filters can have a big impact on the offers centers receive.

Members brought up the need for distinction between anticipated consequences and unintended consequences when evaluating policy success. A representative for the Kidney Committee indicated that the Kidney Committee did discuss some of the items listed as unintended consequences. This prompted the Subcommittee to consider that future reviews of implemented policies should distinguish unintended consequences from anticipated consequences.

Next steps:

The Kidney Committee will receive a memo from the POC outlining the feedback discussed on the call.

**Upcoming Meetings**

- July 25, 2023
- August 22, 2023
- September 26, 2023

## Attendance

- **Subcommittee Members**
  - Arpita Basu
  - Gerald Morris
  - Jason Huff
  - Jesse Schold
  - Nicole Turgeon
  - Stephanie Pouch
  - Oscar Serrano
  - Shimul Shah
  - Vijay Gorantla
- **HRSA Representatives**
  - Adrienne Goodrich-Doctor
  - Shelley Grant
  - Marilyn Levi
- **SRTR Staff**
  - Jon Snyder
- **UNOS Staff**
  - Cole Fox
  - Darby Harris
  - Joann White
  - Kaitlin Swanner
  - Kayla Temple
  - Keighly Bradbrook
  - Kieran McMahon
  - Laura Cartwright
  - Lindsay Larkin
  - Stryker-Ann Vosteen
  - Susan Tlusty
  - Thomas Dolan