

**OPTN Policy Oversight Committee
Meeting Summary
January 11, 2024
Conference Call**

**Jennifer Prinz, BSN, MPH, Chair
Erika Lease, MD, Vice Chair**

Introduction

The OPTN Policy Oversight Committee (the Committee) met via Cisco WebEx teleconference on 01/11/2024 to discuss the following agenda items:

1. Public Comment Review & Recommendations to the Executive Committee
2. Public Comment Presentation: *Expedited Placement Variance* Proposal

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

1. Public Comment Review & Recommendations to the Executive Committee

The Committee reviewed the projects and proposals going out for Winter 2024 public comment and voted on recommending them to the Executive Committee for final review.

Voting Results:

2024-2027 OPTN Strategic Plan Proposal: 14 yes; 0 no; 0 oppose

Refit Kidney Donor Profile Index without Race and Hepatitis-C: 13 yes; 1 no; 0 abstain

Modify Effect of Acceptance Policy: 14 yes; 1 no; 0 abstain

Concepts for Modifying Multi-Organ Policies: 14 yes; 0 no; 0 abstain

Clarify Requirements for Pronouncement of Death: 15 yes; 0 no; 0 abstain

Promote Efficiency of Lung Allocation: 14 yes; 0 no; 0 abstain

Standardize Six-Minute Walk for Lung Allocation: 14 yes; 0 no; 0 abstain

National Liver Review Board Updates Related to Transplant Oncology: 13 yes; 0 no; 0 abstain

Update Post-Transplant Histocompatibility Data Collection: 13 yes; 0 no; 0 abstain

Standardize Patient Safety Contact: 13 yes; 0 no; 0 abstain

Update on Heart Continuous Distribution: 13 yes; 0 no; 0 abstain

Concepts for OPO Referral Evaluation Process Data Collection: 12 yes; 0 no; 0 abstain

Summary of discussion:

2024-2027 OPTN Strategic Plan Proposal:

- No discussion.

Refit Kidney Donor Profile Index without Race and Hepatitis-C:

- Members expressed support for this proposal, with some voicing that it is long overdue.
- A member voiced concern that the Pediatric Committee was not consulted or involved in the development of this project as refitting the KDPI could restrict the kidneys that pediatric patients have access to.

Modify Effect of Acceptance Policy:

- Most members expressed support for the proposal and voiced that the plan should be able to address organ placement with offer turndowns.
- The Vice-Chair of the Liver Committee spoke on behalf of the Liver Committee, expressing concern for this policy as proposed. They wondered how data will be monitored to ensure patient safety, stating that until in the operating room, there are certain aspects of the liver that are unknown, unlike heart or lung transplantation.

Concepts for Modifying Multi-Organ Policies:

- No discussion.

Clarify Requirements for Pronouncement of Death:

- No discussion.

Promote Efficiency of Lung Allocation:

- Members agreed this is well-written and highlights the importance of efficiency with lung allocation.

Standardize Six-Minute Walk for Lung Allocation:

- A recommendation was made to involve the Patient Affairs Committee as there is an implication of added patient burden with this additional testing.
- A member highlighted that the outcome metric is community conversation and advised that there should be more specific ways the Committee will measure community consensus.

National Liver Review Board Updates Related to Transplant Oncology:

- No discussion.

Update Post-Transplant Histocompatibility Data Collection:

- No discussion.

Standardize Patient Safety Contact:

- A member asked who would be responsible for the system enhancements to the donor data and matching system. The Vice Chair of the Disease Transmission Advisory Committee commented that there is not anticipated additional burden for organ procurement organizations (OPOs).

Update on Heart Continuous Distribution:

- Members felt that the paper was well-written and outlines the progress as well as next steps in the continuous distribution process. Additionally, engagement with other committees was adequate.

Concepts for OPO Referral Evaluation Process Data Collection:

- Members expressed that the concept paper addresses the purpose and outlines the rationale well. There was sufficient engagement with stakeholders.

- It was noted that the transfer of data and information is important and could also be a heavy lift for some of the data capture.

Next steps:

The Committee will send their recommendations to the Executive Committee for final approval.

2. Public Comment Proposal: *Expedited Placement Variance Proposal*

The Committee received a presentation on the Executive Committee's *Expedited Placement Variance* proposal, currently out for special public comment.

Summary of Discussion:

A member expressed some concern that there is no maximum time limit for the variance, and they recommended it might be beneficial for a time limit to be provided before it is evaluated by the whole community. Additionally, members urged the Executive Committee to think about checks and balances as the main reviewers and approvers of the potential variances. It was commented that it could be challenging to track multiple variances at once and the Executive Committee will need to ensure the measuring is clear and transparent. Members also cautioned pilots in certain areas of the country may not be reflective of how they would work nationwide due to regional differences.

Upcoming Meetings

- February 8, 2024
- March 18, 2024 (in-person)

Attendance

- **Committee Members**
 - Jennifer Prinz
 - Lisa Stocks
 - Rachel Engen
 - Stephanie Pouch
 - Kim Koontz
 - Jondavid Menteer
 - Erika Lease
 - Jesse Schold
 - Gerald Morris
 - Nicole Turgeon
 - Christine Brenner
 - Scott Lindberg
 - Peter Stock
 - Arpita Basu
 - Stevan Gonzalez
 - Shimul Shah
- **HRSA Representatives**
 - Shelley Grant
- **UNOS Staff**
 - James Alcorn
 - Kaitlin Swanner
 - Lindsay Larkin
 - Trish Jaison
 - Stryker-Ann Vosteen
 - Morgan Jupe
 - Sharon Shepherd
 - Robert Hunter
 - Cole Fox
 - Tamika Watkins
 - Kelley Poff
 - Susan Tlusty
 - Meghan McDermott
 - Laura Schmitt
 - Rebecca Goff
 - Kim Uccellini
 - Darby Harris
 - Kieran McMahon