

**OPTN Policy Oversight Committee
Meeting Summary
February 13, 2025
Teleconference
Jennifer Prinz, BSN, MPH, Chair
Erika Lease, MD, Vice Chair**

Introduction

The OPTN Policy Oversight Committee (POC) met via teleconference on 02/13/2025 to discuss the following agenda item:

1. New Project Review: *Guidance on Improving Efficiency in Pancreas Transplantation*
2. New Project Review: *Standardize Lost to Follow-up Reporting and Enhance Data Collection on Lost to Follow-up & Transfers of Care*
3. New Project Review: *Establish Expedited Placement Policy for Hard-to-Place Kidneys*

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

1. New Project Review: Guidance on Improving Efficiency in Pancreas Transplantation

The Committee reviewed the following project: *Guidance on Improving Efficiency in Pancreas Transplantation*.

Presentation Summary:

The Pancreas Transplantation Committee aims to develop a guidance document for the transplant community to provide insight on best practices and to promote efficient procurement and increased utilization of pancreata. This document will address topics including training opportunities, common practices for procurement in collaboration with organ procurement organizations, ways of building pancreas transplant programs and volumes, and advice on encouraging patient literacy and access to pancreas transplantation.

Summary of Discussion:

A member emphasized the project aligns with the strategic plan goal to optimize organ utilization by addressing declining pancreas transplant rates and continuous distribution changes. Additionally, they recommended collaborating with endocrine experts to enhance patient education, referrals, and standardizing data collection for improved benchmarking. Another member highlighted the need for increased efficiency in pancreas transplantation to address procurement challenges and expand the number of centers performing these transplants, ultimately benefiting patients. A member encouraged factoring in payer policies when advancing the project, given its role as a guidance document.

Based on the project information provided compared to the benefit score components, the project was assigned a benefit score of 64. POC members confirmed the benefit score for the project.

Vote:

Does the Committee recommend approval of the new project to the Executive Committee?

The majority of POC members recommended approval of the project to the Executive Committee.

Next Steps:

The project will be reviewed by the Executive Committee for approval.

2. New Project Review: Standardize Lost to Follow-up Reporting and Enhance Data Collection on Lost to Follow-up & Transfers of Care

The Committee reviewed the following project: *Standardize Lost to Follow-up Reporting and Enhance Data Collection on Lost to Follow-up & Transfers of Care.*

Presentation Summary:

This project seeks to update and standardize processes related to transplant recipient follow-up data submission, including reporting recipient loss to follow-up and transfers of care. A secondary goal is to better define the scope of recipient loss to follow-up (LTFU), particularly in pediatric recipients, as it may be associated with increased risk of non-adherence or graft loss.

Data Advisory Committee Feedback:

The Data Advisory Committee (DAC) conducted an initial check-in to review and provide feedback on new projects involving data collection changes. The committee endorsed the project and supported expanding its scope to include adult transplant recipients in addition to pediatric recipients. Members recommended incorporating the patient perspective and considering differences across organ types. They also suggested exploring the use of the "Not seen" option on the Transplant Recipient Follow-up (TRF) form. If the project is approved, the Pediatric Committee and DAC will hold a second check-in to review a more detailed description of the proposed changes to OPTN data before the public comment period begins.

Summary of Discussion:

The committee provided positive feedback on the project's timing and sequencing, with a member noting that no additional concerns or risks were identified. Another member supported the Pediatric Committee's inclusion of adult recipients, emphasizing that this expansion strengthens the project's value. A member raised the importance of redefining "loss to follow-up" as a starting point, even if all related data points cannot be modified immediately, as a clear definition would benefit institutions. The Chair committed to bringing this feedback to the Executive Committee, noting that if the committee sees a need to prioritize differently, they may consider advancing specific portions of the project as an initial step.

Based on the project information provided compared to the benefit score components, the project was assigned a benefit score of 70. POC members confirmed the benefit score for the project.

Vote:

Does the Committee recommend approval of the new project to the Executive Committee?

The majority of POC members recommended approval of the project to the Executive Committee. Next Steps:

The project will be reviewed by the Executive Committee for approval.

3. New Project Review: Establish Expedited Placement Policy for Hard-to-Place Kidneys

The Committee reviewed the following project: *Establish Expedited Placement Policy for Hard-to-Place Kidneys.*

Presentation Summary:

The purpose of this project is to develop a standardized, national expedited allocation policy for hard-to-place kidneys at risk of nonuse. The goals of the project are to allocate these kidneys more efficiently to increase their likelihood of offer acceptance and transplant, thereby reducing kidney nonuse.

Data Advisory Committee Feedback:

During its initial check-in, the Data Advisory Committee (DAC) reviewed a proposal from the Kidney Committee seeking input and endorsement on a new data field for candidate opt-in for expedited offers. At this time, the DAC declined to endorse the proposed data field, requesting further clarification on how expedited offers will be defined and how the future policy would function. If the project is approved, the Kidney Committee and DAC will hold a second check-in to review a more detailed description of the proposed changes to OPTN data before the public comment period begins.

HRSA Feedback:

HRSA believes it is inadvisable to proceed with this proposal at this time pending resolution of the AOOS critical comment. Although policy development by the OPTN in this area remains a priority, it is premature to advance this project without further parameters in the post-critical comment period.

Summary of Discussion:

The Data Advisory Committee Vice Chair noted that the initial review lacked sufficient detail, particularly regarding the intent and measurement of the new data field but expressed openness to collaborating with the Kidney Committee. A member supported the proposal's timing and sequencing, suggesting it should precede continuous distribution for kidneys, while also highlighting concerns about equity and fairness in organ allocation. Another member raised concerns about how expedited placement would address potential disparities at transplant centers with less experience in high KPDI kidney transplants. Staff explained that the proposal envisions OPOs prioritizing certain classifications—such as highly sensitized, medically urgent, pediatric candidates, and prior living donors—before initiating expedited placement, ensuring a level playing field. Staff also suggested engaging the Patient Affairs Committee for further insights. A member questioned the implications of HRSA advising against pursuing the proposal, while the Chair clarified that if the POC votes to recommend the proposal, it will be presented to the Executive Committee for consideration. A member acknowledged the proposal's importance, citing the increasing incidence of related issues and its impact on affected groups, and supported advancing it to the Executive Committee. Finally, a member inquired about its effect on the Increasing Organ Transplant Access (IOTA) model, to which staff responded that IOTA is set to take effect on July 1, aligning with the public comment period, making it an opportune time to gather community feedback on both initiatives.

Based on the project information provided compared to the benefit score components, the project was assigned a benefit score of 100. POC members confirmed the benefit score for the project.

Vote:

Does the Committee recommend approval of the new project to Executive Committee?

The majority of POC members recommended approval of the project to the Executive Committee. Next Steps:

The project will be reviewed by the Executive Committee for approval.

Upcoming Meeting(s)

- March 13, 2025 - Teleconference

Attendance

- **Committee Members**
 - Cynthia Foreland
 - Heather Bastardi
 - Dennis Lyu
 - Kelley Hitchman
 - Jennifer Prinz
 - Jason Huff
 - Neha Bansal
 - Lisa McElroy
 - Lorrinda Gray-Davis
 - Macey Levan
 - Ty Dunn
 - Sanjay Kulkarni
 - Shimul Shah
 - Rachel Miller
- **HRSA Representatives**
 - Kala Rochelle
 - Steve Keenan
- **UNOS Staff**
 - Lindsay Larkin
 - Kaitlin Swanner
 - Susan Tlusty
 - Darby Harris
 - Cole Fox
 - Laura Schmitt
 - Leah Nunez
 - Matt Cafarella
 - Rebecca Goff
 - Roger Brown
 - Stryker-Ann Vosteen
 - Viktoria Filatova
- **Guests**
 - Rexanah Wyse Morrissette