OPTN Policy Oversight Committee Meeting Summary August 11, 2021 Conference Call

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Introduction

The Policy Oversight Committee met via Citrix GoToMeeting teleconference on 08/11/2021 to discuss the following agenda items:

- 1. New Projects
- 2. Portfolio Management Update: Project Benefit
- 3. Public Comment Presentation and Discussion: Update on the OPTN Regional Review Project

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

1. New Projects

The POC reviewed two new projects:

- VCA Graft Failure Definition (VCA Committee)
- Establish Eligibility Criteria and Safety Net for Heart-Kidney and Lung-Kidney Transplantation (MOT Committee)

POC members discussed overall resource utilization prior to discussion of the individual committee projects. One member wanted to clarify whether resource constraints and current over-allocation of IT resources is due to inadequate capacity planned or due to the volume of projects proposed, and whether the Board should consider increasing IT capacity. The POC chair explained that there are multiple challenges in the way we have managed the portfolio of work in the past, and that the POC's goal is to better prioritize and sequence projects to ensure the OPTN is utilizing the available resources to the best of our abilities. UNOS staff clarified that some of the previous overages are due to the rapid pace of geography-related projects due to concerns that arose from the community and the courts. In addition, the goal of having the POC evaluate the portfolio more holistically is to make sure we have the resources to tackle necessary projects.

VCA Graft Failure Definition

One member asked a clarifying question on whether or not a single candidate may have multiple uteruses transplanted, even if there are successful births with each transplant. The VCA vice chair said that this isn't her area of expertise and isn't something the committee has discussed yet, but that she would bring it back to the committee for discussion. The member stated that it may be helpful to develop the definition of graft failure with that in mind, as for most other organs a retransplant would be considered a graft failure.

Establish Eligibility Criteria and Safety Net for Heart-Kidney and Lung-Kidney Transplantation

A POC member commented that the sequencing was optimal based on the timing of continuous distribution of the different organ systems, but that the project requires a high level of IT effort and

could be a resourcing concern. Multiple other members agreed but stated that this project is a priority and should still move forward.

Members and attendees expressed no concerns about the scope or authority of either of the proposed projects.

Next steps:

The Executive Committee will review the projects for approval on their September 22nd meeting.

2. Portfolio Management Update: Project Benefit

UNOS staff discussed the need to define benefit to prioritize projects based on value, not just on resource utilization.

Potential ideas proposed to define benefit include:

- Impact on patients/members
- Increase the number of transplants
- o Alignment with Strategic Plan or Strategic Policy Priorities
- o Innovative
- Impact on vulnerable populations
- Impact as a component of a larger effort

Summary of discussion:

Committee members agreed this was a necessary next step, but had no questions or concerns at this time.

Next steps:

Members were asked to complete a survey to help identify the necessary attributes to weigh when defining the benefit of projects, based on previous OPTN committee projects.

3. Public Comment Presentation and Discussion: Update on the OPTN Regional Review Project

The POC received a presentation from UNOS staff on the public comment request for feedback and three models proposed by EY. The three structural models proposed are "Communities of Common Interest", "Repurposed Regions", and "Hybrid Cohorts", with the intention that these models are a tool to guide conversation on the ideal governance structure.

The POC began with questions for the presenter, and then discussed key aspects of the proposal, led by discussion groups. Each group contained a leader designated to present on behalf of the group.

Representation

- One member discussed the need to increase patient and donor affairs representation and participation at the regional level, as well as to recruit them to committees and the BOD. The member recommended increasing outreach to dialysis centers, transplant programs, and patient advocate groups.
- One member asked what the difference between a regional advisory committee to a BOD would be, as compared to our current system.
 - UNOS staff explained that our current BOD is large in comparison to peer organizations, and that an advisory committee may allow for a more agile group to provide feedback. In addition, regional councilors currently represent both their regions and the OPTN as a whole, which provides a certain amount of tension at times.

 One committee member brought up that OPOs are required to have medical advisory and fiduciary governing boards, but that the advisory boards have authority to make decisions. The member expressed concern that an advisory board without the authority to make decisions could be frustrating for stakeholders. It would be hard from the OPTN side to separate out fiduciary and medical decisions, as policies involve both. Advisory groups with representation would likely be best at the committee level, where we currently have regional representatives.

Communication and feedback

The *Communications and feedback* discussion group leader from the committee presented on the sentiment of the group:

- The "Communities of Common Interest" proposed model seems very efficient, and like it would lead to in-depth discussion of policies, but may be somewhat redundant to the committee structure. It would need to be approached in a way to be complimentary or different from current committee structure.
- The "Hybrid Cohorts" was also of interest, with a certain amount of regionalized grouping, as these members are more likely to interact with each other and may have shared interests or expertise at a more local level and be able to build relationships with those they work with more often.
- It is key to maintain a forum for mixed discussions so that people can learn from each other and appreciate others' point of view, with different organs of expertise and stakeholder positions.
- An increase in the number of virtual meetings to supplement the in-person meetings was also brought up, especially since it has greatly increased attendance at regional meetings recently, and is especially inclusive for patient representatives who may have more barriers to attending meetings. One downside is that can be harder to facilitate discussions at large virtual meetings.
- One thing that is important to maintain is the POC, in order to gain perspective and bring it back to members' home committees, and the discussion group thought this was a valuable model that should be maintained.

Next steps:

The POC will continue to discuss this project at the September meeting, including feedback from the remaining discussion groups on *Operations* and *Data analysis*.

Upcoming Meetings

- September 8, 2021
- October 19, 2021

Attendance

• Committee Members

- o Alex Glazier
- o Andrew Flescher
- o Emily Perito
- o Jim Kim
- o John Lunz
- Lara Danziger-Isakov
- o Natalie Santiago-Blackwell
- o Nicole Turgeon
- o Oyedolamu Olaitan
- o PJ Geragthy
- o Rocky Daly
- o Sandra Amaral
- Scott Biggins
- o Susan Zylicz

• HRSA Representatives

- o Jim Bowman
- o Marilyn Levi
- SRTR Staff
 - o Ajay Israni
- UNOS Staff
 - o Brian Shepard
 - o Carrie Caumont
 - o Chelsea Haynes
 - o Courtney Jett
 - o Elizabeth Miller
 - o James Alcorn
 - o Kaitlin Swanner
 - o Krissy Laurie
 - o Kristina Hogan
 - o Laura Schmitt
 - o Lauren Mauk
 - o Lindsay Larkin
 - o Matt Cafarella
 - o Matthew Prentice
 - o Rebecca Brookman
 - o Roger Brown
 - o Ross Walton
 - o Susie Sprinson
 - o Tina Rhoades
- Other Attendees
 - o Charles Alexander
 - o Valinda Jones