

**OPTN Membership and Professional Standards Committee
Performance Monitoring Enhancement Subcommittee
Meeting Summary
October 28, 2024
Conference Call**

Deb Maurer, M.D., Chair

Introduction

The MPSC Performance Monitoring Enhancement Subcommittee met in open session virtually via Webex on October 28, 2024, to discuss the following agenda items:

1. Review of public comment themes, post public comment revisions and recommendation to MPSC
2. Preview of annual post-implementation monitoring report

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

1. Review of public comment themes, post public comment revisions and recommendation to MPSC

Staff reviewed the sentiment and themes of public comment on the MPSC's *Update Criteria for Post-Transplant Graft Survival Metrics* proposal. There was broad support for the proposal. However, there were some concerns raised by commenters. The themes reviewed included:

- Responses supporting the proposal noted that it will decrease risk aversion and encourage acceptance of more complex donor organs and candidates.
- Responses support no change to the offer acceptance thresholds at this time.
- Concerns were raised that this change without change to SRTR tiers and by payers will not change behavior.
- Some concerns were raised that patient safety may be compromised and post-transplant outcomes may worsen, and commenters suggested closing post-implementation monitoring.
- Some suggested that the MPSC should consider changes to pediatric recipient post-transplant graft survival thresholds.
- Some responses addressed other topics such as the need for patient education and participation in decision-making, suggested changes to MPSC's performance monitoring processes.

When considering the question of changes to pediatric recipient post-transplant graft survival thresholds, the Subcommittee reviewed the MPSC's rationale for not changing the pediatric graft survival thresholds and the data contained in **Table 1** previously provided by the SRTR on the number of flags under alternate thresholds for pediatric graft survival. The MPSC's rationale for not changing the pediatric graft survival thresholds included a recognition of the difficulty determining statistically meaningful outliers because of the smaller number of programs and low volume of pediatric transplants, of the need for closer monitoring of the transplant outcomes for children based on public perception, and of important considerations in pediatric transplant that support avoidance of more complex organs so there is not the same incentive for the MPSC to encourage use of these organs in pediatric patients.

Table 1: Number of Flags for Different Pediatric Post-Transplant Graft Survival Metrics Thresholds

MPSC Metric	Current (1.60)	Alternate 1 (1.85)	Alternate 2 (2.10)
90-day post-transplant graft survival	9	4	0
1-year conditional on 90-day post- transplant graft survival	1	1	0
Total	10	5	0

Summary of Discussion:

Decision #1: The Subcommittee recommended that no post-public comment revisions be made to the *Update Criteria for Post-Transplant Graft Survival Metrics* proposal.

Decision #2: The Subcommittee recommended that the MPSC request that the OPTN Board of Directors approve the *Update Criteria for Post-Transplant Graft Survival Metrics* proposal.

Decision #1: The Subcommittee recommended that no post-public comment revisions be made to the *Update Criteria for Post-Transplant Graft Survival Metrics* proposal.

The Subcommittee discussed the feedback regarding a threshold change for pediatric graft survival. The MPSC chair noted that some comments requested additional explanation and data that supported the MPSC’s position. He requested that the data and additional explanation be included in the briefing paper. The Subcommittee agreed that the MPSC’s rationale was sound and no change to pediatric graft survival thresholds should be made at this time but noted that the MPSC will continue to evaluate the need for changes for all the metrics. No other potential post-public comment changes were identified or discussed.

Decision #2: The Subcommittee recommended that the MPSC request that the OPTN Board of Directors approve the *Update Criteria for Post-Transplant Graft Survival Metrics* proposal.

Based on the broad support for the proposal, the Subcommittee unanimously supported recommending that the MPSC request that the OPTN Board of Directors approve the proposal.

2. Preview of annual post-implementation monitoring report

Staff provided a preview of the annual post-implementation monitoring report on the *Enhance Transplant Program Performance Monitoring System* proposal. The report will be presented to the MPSC during its November 6 – 8, 2024, meeting. The report includes data for heart, kidney, liver, lung, and pancreas that compares the pre- and post-approval trends for one-year post-transplant all-cause graft failure rates, registrations added to the waiting list, organ utilization rates, and transplant-to-recovery rates.

To summarize, the analysis found that:

- Observed trends in one-year all-cause graft failure rates were similar or lower (better) than predicted trends post-Board Approval for all organs.
- Observed trends in waiting list additions were similar or higher (better) than predicted trends post-Board Approval for all organs.
- Observed trends in utilization rates and transplant-to-recovery rates tended to be similar or higher (better) than predicted trends post-Board Approval for all organs.

- Sensitivity analyses that varied the intervention date from Board Approval to the implementation of each metric in the proposal yielded comparable results.

Summary of Discussion:

One Subcommittee member noted that the data was not surprising and surmised that some of the increased utilization and increased waiting list additions for liver could be related to increased use of machine perfusion as well. There were no additional comments or questions.

Upcoming Meetings

MPSC Meeting, November 6 – 8, 2024, virtual meeting

Attendance

- **Subcommittee Members**

- Clifford Miles, MPSC Chair
- Mitzi Barker
- Megan Bell
- Nahel Elias
- Michelle James
- Darla Granger
- Dipanker Gupta
- Shelley Hall
- Lindsay King
- Malay Shah
- Mark Wakefield

- **HRSA Representatives**

- Marilyn Levi
- Arjun Naik

- **SRTR Staff**

- Jon Miller
- Jon Snyder
- Bryn Thompson

- **UNOS Staff**

- Sally Aungier
- Robyn DiSalvo
- Katie Favaro
- Houlder Hudgins
- Krissy Laurie
- Heather Neil
- Melissa Santos
- Erin Schnellinger
- Sharon Shepherd
- Betsy Warnick