

**OPTN Executive Committee
Meeting Summary
December 5, 2021
Dallas, TX**

**Matthew Cooper, MD, Chair
Jerry McCauley, MD, Vice Chair**

Introduction

The Executive Committee in Dallas, TX on Sunday, December 5, 2021 to discuss the following agenda items:

1. Welcome and Roll Call
2. New Projects from the Policy Oversight Committee
3. Continuous Distribution as a Framework
4. SARS-CoV-2 Lower Respiratory Testing Policy
5. Regional Review Project
6. 2020 PHS Guideline and Living Donor Specimen Storage
7. VCA Project Sequencing
8. DonorNet Predictive Analytics

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

1. Welcome and Roll Call

The Executive Committee Chair welcomed all attendees to Dallas. The agenda was reviewed.

2. New Projects from the Policy Oversight Committee

The Chair of the Policy Oversight Committee began with the review of the National Liver Review Board Policy and Guidance. The Chair explained the aligning of goals of hepatocellular carcinoma classifications with Liver Imaging Reporting and Data System to simplify guidance. There were no questions from the board on this alignment.

The next project presented by the Policy Oversight Committee Chair was to establish lung review board guidance for composit allocation score. This guidance would help to evaluate exception request, create a plan to educate members and lung programs and add detail to operational guidelines. A board member asked about whether the lung review board was a national or regional review board. The Chair of the POC did not have the answer. What is the frequency of exception requests? Staff responded that it was about 10 per month. This project will have very little impact on IT hours.

The projects as recommended by the POC were moved and seconded. Vote approval was unanimous with 0 no; 0 abstained.

3. Continuous Distribution as a Framework

Executive Director, Brian Shepard, presented the continuous distribution as a framework. The first organ that will be talked about tomorrow is lung. Kidney and pancreas are the next up for continuous distribution. He talked about having consistency, understandability, programming efficiency and defensibility for a framework of continuous distribution. It is important to use the same general framework for the other organs so that there is consistency in policy.

4. SARS-COV-2 Lower Respiratory Testing Policy

The Executive Committee Chair presented the Lower Respiratory SARS-CoV-2 Testing for Lung Donors. The Executive Committee has been monitoring this policy for the last 5 months and tomorrow at the Board Meeting it will be presented for a vote to make it permanent. Compliance has been high throughout the community.

5. Regional Review Project

The OPTN Regional Review Project was presented by the Chair of the Executive Committee. The committee supported multidisciplinary regional meetings and redraw existing regional boundaries for better balanced regions. The committee was not supportive of “like” interested communities and replacing regional meetings with public comment sessions nationally. There was a desire to increase patient and donor affairs representation and to stream line the regional nomination appointment process. It was not supportive of removing vice chairs from Policy Oversight Committee to develop a new regional representation and were opposed to region leads to create a new national advisory role. Additional items supported were standardizing of regional meeting agendas. The presentation of the new performance monitoring dashboard was confusing, it is not a new MPSC, it’s a way to help solve regional data trends for improvement. There will be no bylaw or policy changes required in the short term. The concept document will go out for the Winter 2022 Public Comment. A board member agreed in keeping regions together for public comment but doesn’t agree that every region needs to have a public comment. Standardizing committee assignments needs to be standardized process so we have expertise but also diversity. A different board member wants to look at how we got to our regions now and how we can serve the underserved better. It’s a good time to review how we keep people connected. There will be two workgroups, regional appointment process and patient representation.

6. 2020 PHS Guideline and Living Donor Specimen Storage

The Chair of the OPTN Ad Hoc Disease Transmission Advisory Committee presented the Deceased and Living 10 Year Specimen Storage. The storage contributes to better aggregate data. There were some concerns during the public comment period regarding the cost and questioned the need for living donor requirement. The Executive Committee raised questions to review the data. The numbers for the need of this storage has been small, but the impact can be significant. The CDC is strongly in favor of the 10 year storage. DTAC believes that this supports the need for a 10 year storage. A committee member began by asking about the investigations are these proven donor transmissions? Is it separated between infectious v. malignant transmissions? If the CDC is interested they don’t seem as interested in more remote events, the investigations are more on our end and its very resource intense thing for transplant centers to prove and store. The response was that we need to think of the number of reports they have gone from 20 a year to 500 a year. He cannot answer for the CDC and why they investigate. Another

committee member suggested that we need to think about what a reasonable time is to make centers hold onto these samples. These are a very small amount of events. How many samples are we collecting versus the investigations taking place? The samples provide us the opportunity to learn more about disease transmission. A HRSA representative said shared that the CDCs position is that it is useful to have the deceased donor samples for 10 years and they don't see why a living donor needs to be treated differently. DTAC OPO members have stated they have no problem storing the samples. Another member stated that these samples could add tremendous value and with consent could be really useful for research. The deceased donor samples are paid for and the living donor samples are not and it takes up space. The chair of the Executive Committee suggest writing a letter to the CDC to reconsider the storage. With a raise of hands all but one member of the committee gave hands for a letter to the CDC, one member did not. The HRSA representative suggested that a cost burden included in the letter and the rational for not doing this and could you contract with OPOs to store samples.

7. VCA Projects Schedule

Alex Tulchinsky, Chief Technology Officer, then presented the VCA projects timeline. The waitlist redesign project includes 8 organ groups. The original plan was to deliver the VCA Projects in June 2022. The revised deliver time is March 2023. There were no questions.

8. DonorNet Predictive Analytics

The last item for discussion was presented by Darren Stewart, Principal Research Scientist, on DonorNet Predictive Analytics Collaboration. This collaboragion between OPTN and Accenture federal Services combines behavioral science, data science and technology. This program will reduce disguards and increase transplants. The first phase was done over the summer toplan, develop and analyze. The second phase was in the fall to design, build and test. They are now implementing with a small goup of users to gather information about technical and other concerns. A pilot program will go out in the new year by implementing with adult kidney offers to adult candidates at approximately 20 programs. A national roll out with come later, a date has not been determined.

Attendance

- **Committee Members**
 - Matthew Cooper
 - Jerry McCauley
 - Mindy Dison
 - Lisa Stocks
 - David Mulligan
 - Bradley Kornfeld
 - William Hildebrand
 - Irene im
 - Stacey Lerret
 - Patrick Healey
 - Richard Formica
 - Valinda Jones
- **HRSA Representatives**
 - Frank Holloman
 - Christopher McLaughlin
- **UNOS Staff**
 - Brian Shepard
 - Alex Tulchinsky
 - Darren Stewart
 - Susie Sprinson
 - Carrie Caumont
 - Roger Brown
 - Steve Harms
 - Maureen McBride
- **Other Attendees**
 - Nicole Turgeon
 - Ricardo La Hoz