

Kidney Transplantation Committee Report

OPTN/UNOS Board of Directors

Richard Formica, Jr., MD, Chair

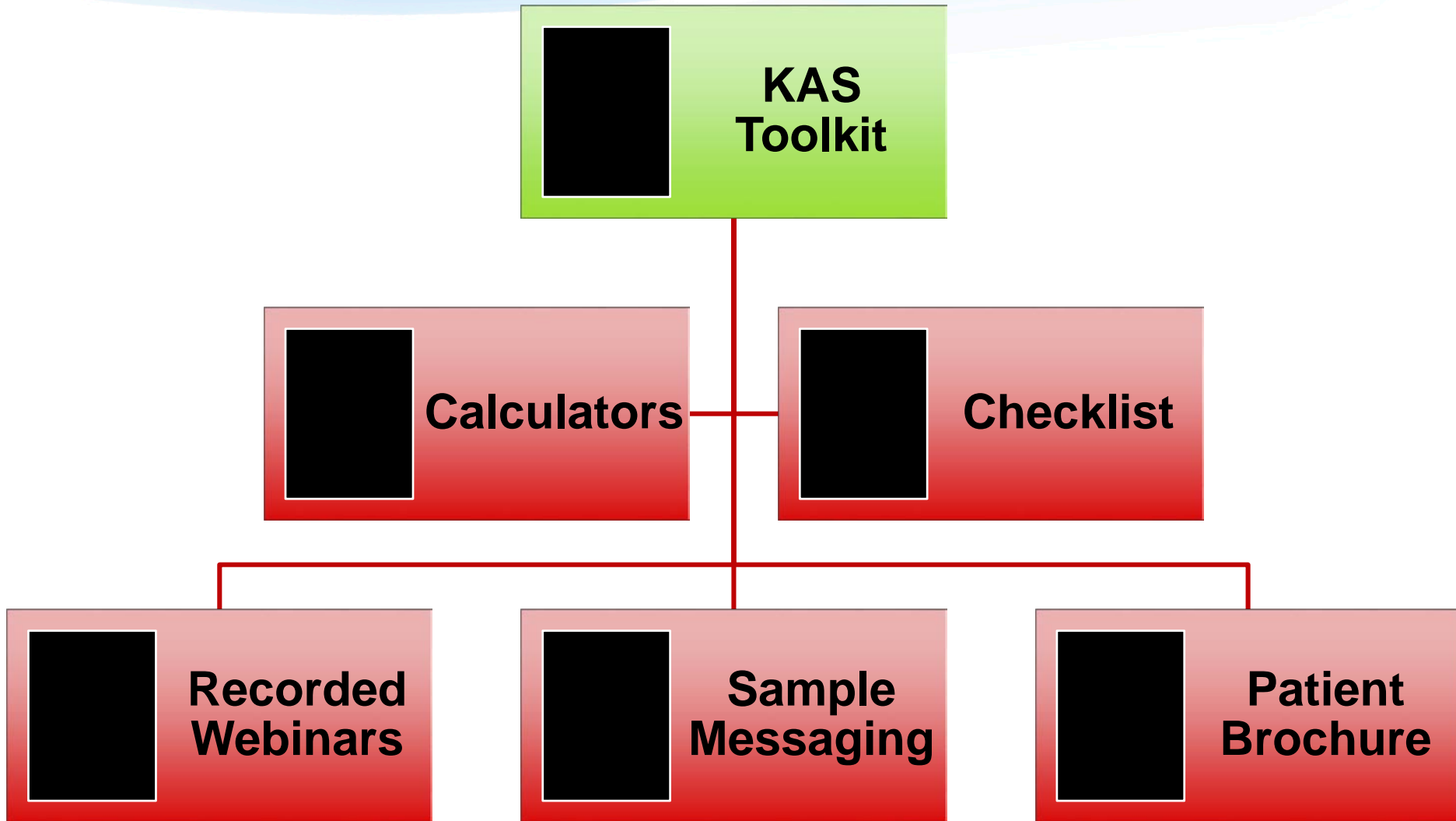
Mark Aeder, MD, Vice Chair

June 23-24, 2014

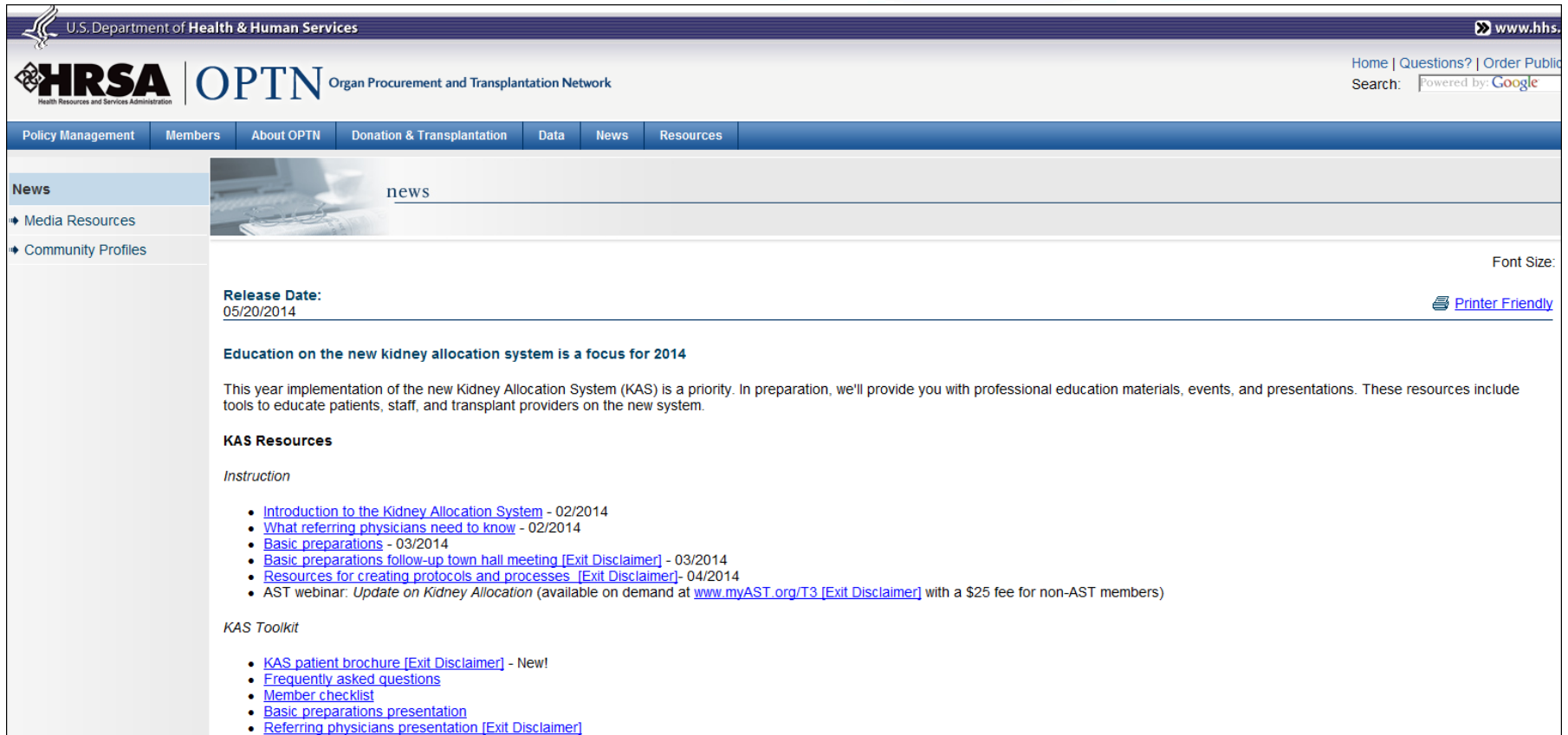
Update on the Revised Kidney Allocation System (KAS)

OPTN

KAS Resources



OPTN Website



The screenshot shows the OPTN website interface. At the top, there is a navigation bar with the U.S. Department of Health & Human Services logo and the URL www.hhs.gov. Below this is the HRSA logo and the OPTN logo, with the text "Organ Procurement and Transplantation Network". A search bar is located on the right side of the top navigation bar. Below the navigation bar is a menu with links for Policy Management, Members, About OPTN, Donation & Transplantation, Data, News, and Resources. The main content area is titled "news" and features a sidebar with links for Media Resources and Community Profiles. The main content area displays a news article with the following details:

Release Date:
05/20/2014

Education on the new kidney allocation system is a focus for 2014

This year implementation of the new Kidney Allocation System (KAS) is a priority. In preparation, we'll provide you with professional education materials, events, and presentations. These resources include tools to educate patients, staff, and transplant providers on the new system.

KAS Resources

Instruction

- [Introduction to the Kidney Allocation System](#) - 02/2014
- [What referring physicians need to know](#) - 02/2014
- [Basic preparations](#) - 03/2014
- [Basic preparations follow-up town hall meeting \[Exit Disclaimer\]](#) - 03/2014
- [Resources for creating protocols and processes \[Exit Disclaimer\]](#) - 04/2014
- AST webinar: *Update on Kidney Allocation* (available on demand at www.myAST.org/T3 [Exit Disclaimer] with a \$25 fee for non-AST members)

KAS Toolkit

- [KAS patient brochure \[Exit Disclaimer\]](#) - New!
- [Frequently asked questions](#)
- [Member checklist](#)
- [Basic preparations presentation](#)
- [Referring physicians presentation \[Exit Disclaimer\]](#)

Font Size: [Printer Friendly](#)

<http://optn.transplant.hrsa.gov/news/newsDetail.asp?id=1634>

OPTN

Targeted Contacts

Lab, OPO, and TXC Members	Societies	Other Organizations
Administrators	AST	NKF
Coordinators	ASTS	TRIO
Physicians	NATCO	ARA
Surgeons	AOPO	ESRD Networks
Compliance staff	STSW	AKF
Data Coordinators	AMAT	ADA
Social Workers	DTCP	NRAA
Program Directors	ASHI	AAKP
Medical Directors	ITNS	ANNA
Referring Physicians	ASN	PKD Foundation
Laboratory staff		

KAS Trainings

Jan: Intro podcast/toolkit released

Feb: Webinar on early referral

Mar: Basics webinar/virtual town hall

April: Processes and protocols
webinar

KAS Trainings

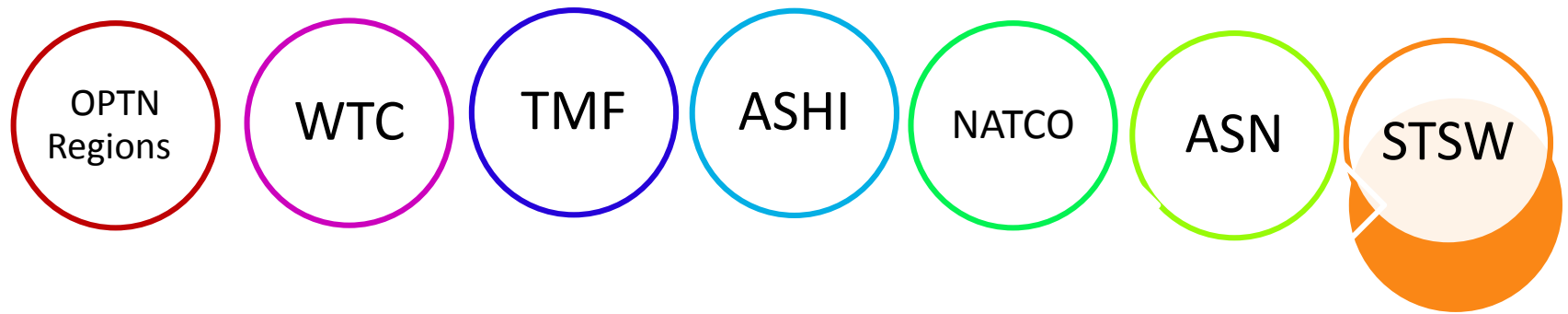
May: System training/programming
release-new data entry

June: System training/programming
release-new reports

September: e-Learning module for
patient education

October: Virtual town hall meeting

KAS Presentations



Programming Releases

March 19

EPTS Calculator

-

Fields for EPTS, KDPI, CPRA
Approvals, A2/A2B

May 27

-

Reports: Candidate Points Report,
CPRA Approvals Report, A2/A2B
Eligibility Report

June 19

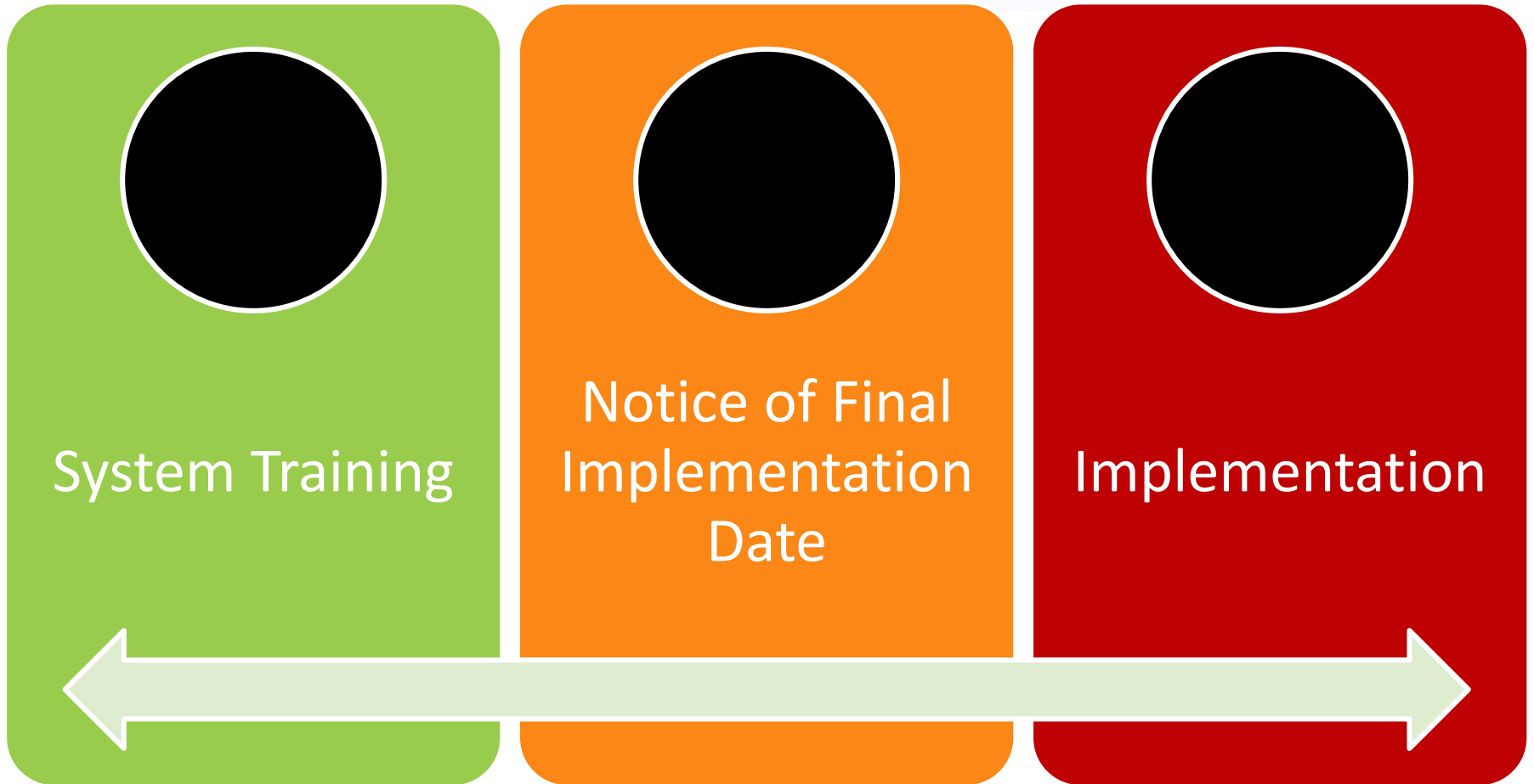
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As of June 17...

11,171 existing candidate records have had EPTS data verified

2,147 new registrations have had EPTS data verified

Implementation: Dec 2014



A Special Thank You...

Kimberly Taylor, II

Angela Allen, II

Joel Newman, Communications

Anne Paschke, Communications

Karen Sokohl, Communications

Roger Brown, Organ Center

Chrystal Graybill, RA

Shannon Edwards, RA

Betsy Gans, RA

Cliff McClenney, RA

Terri Bessom, Project Manager

Kerrie Cobb, IT

Team Ironfish, IT

Darren Stewart, Research

Anna Kucheryavaya, Research

Wida Cherikh, Research

Gena Boyle, Policy

Kristina Tyler, Policy

Elizabeth Miller, DEQ

Leslee Garland, DEQ

Simultaneous Liver-Kidney (SLK) Project

OPTN

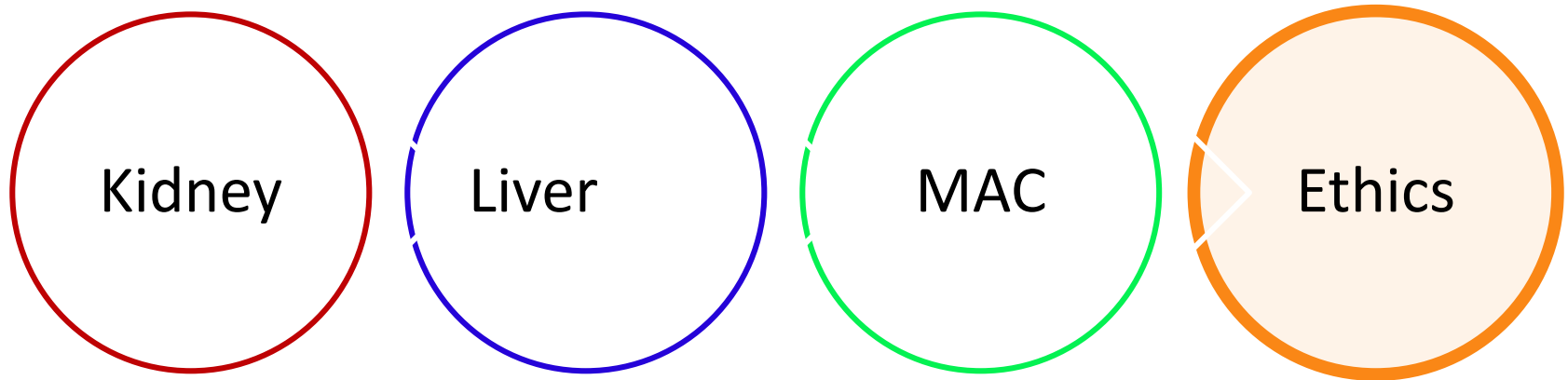
Problem

Data suggests a portion of kidneys are allocated to liver candidates who likely would have regained their kidney function following a liver alone transplant

Almost half of SLK recipients received a kidney with a KDPI less than 35%

Current allocation scheme counter to Final Rule principles regarding best use of donated organs and policies being based on medical urgency

Multi-Committee Collaboration- SLK Workgroup



Committee Discussion

Unknown whether KAS, PSR changes, MPSC outcomes project will have positive effect without allocation changes

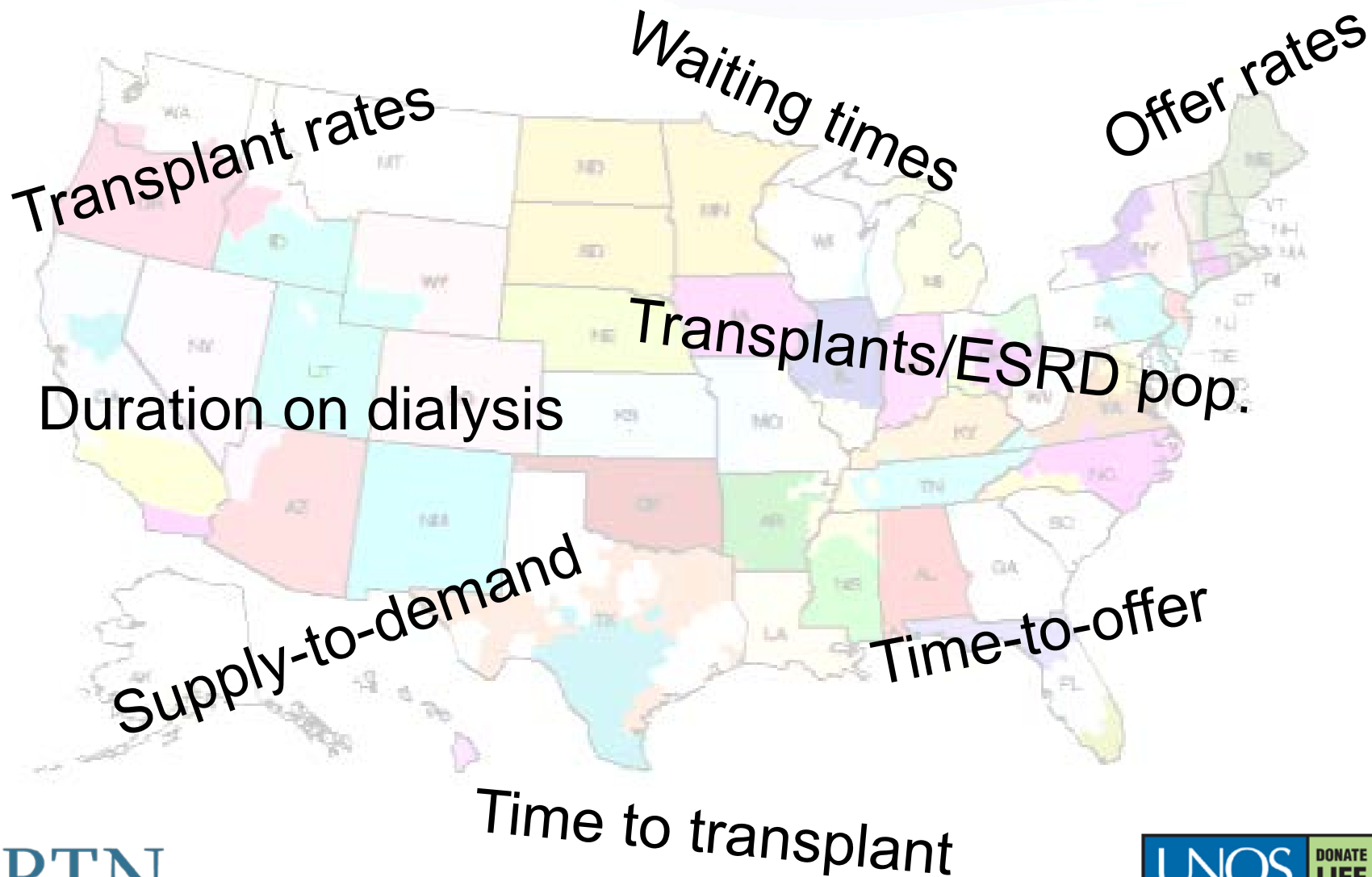
Possible Allocation Changes (builds off 2009 proposal)

- SLK qualifying criteria
- Safety net for liver alone recipients with kidney failure

Geographic Disparities in Deceased Donor Kidney Allocation

OPTN

What Should Define Geographic Equity for Kidney Allocation?



Key Findings



Huge variation in access to kidneys across DSAs

- Case mix differences may explain some variation



Median times to transplant often hard to estimate



Excluding higher KDPI kidneys had little to no impact

Much larger impact...

All or only recently listed patients?

Active/inactive or only active patients?

Which class of metric?
(offer rates, transplant rates, supply v. demand)

Subcommittee Recs

Include all donors in metric

- No exclusion of DCD or high KDPI donors for supply v. demand, offer rates, and transplant rates

Include only active patients in metric

Consider a metric such as “% transplanted within 3 years”

Group leaning toward ‘incident’ based metric

Points for Discussion

Timing

- Need to assess geographic disparity after KAS implementation
- Evaluate lessons learned from Liver Committee throughout process
- Periodic re-assessment/adjustment of metric

Concerns

- How to avoid metric that is influenced by behavior (i.e. center acceptance practices/OPO performance)
- Whether to adjust for case mix
- No correlation between offer rates and supply to demand

QUESTIONS?

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