

**OPTN/UNOS Executive Committee
Report to the Board of Directors
June 23-24, 2014
Richmond, Virginia**

**Kenneth Andreoni, MD, Chair
Carl L. Berg, MD, Vice President**

This report reflects the work of the Executive Committee December 2013 through June 2014.

1. Modification of the Bylaws to Restore and Clarify Notification Requirements when a Member is Placed on Probation

The Committee recommended modifications to the Bylaws Appendix L to restore the notification requirements for members receiving the adverse action of Probation, which was just approved by the Board at this meeting.

2. Required Changes to Policy 2.2 (OPO Responsibilities) in the Plain Language Rewrite of OPTN/UNOS Policies

The Committee approved changes to Policy 2.2 (OPO Responsibilities) to reflect changes that were approved at the November 2013 Board meeting to eliminate the use of the 1994 PHS Guideline.

3. Technical amendments to correct policies following the Plain Language Rewrite

After the release of the rewritten OPTN Policies, the Committee approved several modifications to correct inadvertent changes in the policies and restore the requirements that existed prior to the plain language rewrite.

4. National Pancreas Placements

In May 2007, the Executive Committee gave the Organ Center (OC) exclusive authority to make national pancreas and kidney-pancreas offers, through a System Notice. However, both OPOs and the OC are making both national pancreas and kidney-pancreas offers. To clarify potential discrepancies between practice and policy, the Executive Committee determined that the Organ Center shall **not retain** exclusive authority to make national pancreas or kidney-pancreas offers, and OPOs will have the ability to make national pancreas or kidney-pancreas offers. The OC shall retain the ability to make national pancreas or kidney-pancreas offers should an OPO seek assistance with these offers.

5. Kidney Transition Plan

The Committee approved corresponding policy language to reflect the approved Kidney-Pancreas (KP) Transition Plan.

6. Kidney Waiting Time Transfers

The Executive Committee approved corresponding modifications to Policy 3.6C (Waiting Time Transfers) to reflect the Kidney Committee's intent to allow candidates to transfer their primary waiting time.

7. Lung Allocation System (LAS) Updates.

The Board approved LAS Modifications at the November 2012 meeting. Both the waiting list mortality measure and post-transplant survival measure include the covariate “Oxygen needed to maintain adequate oxygen saturation (80% or greater) at rest (L/min).” The Committee approved changing “80% or greater” to “88% or greater” because candidates are unlikely to be listed if they are receiving oxygen to maintain oxygen saturation at 80%.

8. Living Donor Follow Up Forms – Modifications to Policy 18.5.A (Reporting Requirements after Donation).

The Committee approved policy modifications to require the living kidney donor recovery hospital to report if a donor has been readmitted since the last *LDR* or *LDF* was submitted to distinctly require reporting any readmission between discharge and the first six months post donation.

9. Reduction in Data Collected

Tiedi® is the data entry system for OPTN members. The current Tiedi forms will expire in March 2015 and the forms will be revised to reflect additions, deletions and modifications approved by the Board. The Committee considered a proposal to continue collecting certain optional data elements however, the Committee declined the request.

10. Guidance to the Ad Hoc International Relations Committee

The International Relations Committee (IRC) requested the Executive Committee for guidance regarding the OPO import function from foreign countries. The Executive Committee endorsed the IRC to develop policy giving the OPTN express authority to serve in the function of an OPO in foreign organ offers (without a formal agreement).

11. OPTN Response to Notice in the Federal Register Regarding Coverage for Immunosuppressants

The Committee prepared a formal response from the OPTN to a notice in the Federal Register regarding potential changes in coverage of immunosuppressants.

12. IT Project Prioritization

The Committee approved the recommendation to prioritize the top four combined scored projects within the programming schedule.

13. Review of Proposals Prior to Submission for Public Comment

At its March 2014, meeting, the Committee reviewed and approved 17 proposals for release for public comment from March – June 2014

14. **June 23, 2014 meeting in Richmond, VA.**

The Committee:

- Reviewed the plan to address conflicts of interests at this board meeting, which the Executive Committee does prior to each board meeting
- Approved work of Process Improvement Work Group – presentation by Dr. Stuart Sweet during this board meeting
- Approved a response to a notice in the Federal Register regarding required submissions to CMS of certain information about MPSC reviews that may be protected by the peer review privilege.
- Approved a programming solution to allow the efficient implementation of previously approved thoracic policies.