

Membership & Professional Standards Committee

Proposals to Modify the Bylaws

June 24-25, 2013

Kenneth Andreoni, MD, Chair

Alan Reed, MD, Vice Chair

Proposal to Better Define Notification Requirements for Periods of Functional Inactivity

Proposal to Better Define Notification Requirements for Periods of Functional Inactivity

- Public comment feedback included support for proposed language, with recommendations for modification:
 - Define “affected patients” for component cessation
 - Consider changing cohort for inactive waiting list reviews

Appendix K Modifications – Post Public Comment

Ceased Component	Affected Groups of Patients*
Living Donor Component	Potential Living Donors Potential and waitlisted candidates who have already expressed interest in LD
Deceased Donor Component	Potential and waitlisted deceased donor candidates
Adult Component	Potential and waitlisted adult candidates Potential and waitlisted pediatric candidates who may turn 18 during the component cessation period
Pediatric Component	Potential and waitlisted pediatric candidates

* as defined in the Bylaws

Additional Appendix D & K Modifications

- Change in monitoring approach
- Change current cohort from “...during any 365 day period” to “...during any calendar year.”

Resolution 15

RESOLVED, that modifications to Bylaws, Appendix D (Membership Requirements for Transplant Hospitals and Transplant Programs), Sections 9 and 10(B), as set forth in Resolution 15, are hereby approved, effective January 1, 2014; and that modifications to Appendix K, Section 1 (Transplant Program Inactivity, Withdrawal, and Termination) are hereby approved, as set forth in Resolution 15, effective September 1, 2013.

Proposal to Remove Appendix J of OPTN Bylaws for the Combined Heart-Lung Transplant Program Designation

*Sponsoring Committees: Thoracic Organ
Transplantation Committee and
Membership and Professional Standards
Committee (MPSC)*

Proposal to Remove Appendix J of OPTN Bylaws for the Combined Heart-Lung Transplant Program Designation

If approved, all combined organ transplants will be permitted if the member concurrently has approved transplant program designations for all organs being transplanted into the recipient. Currently, the Heart-Lung transplant program designation is the only exception to this practice.

Remove Appendix J of OPTN Bylaws for the Combined Heart-Lung Transplant Program Designation

Public comment feedback was broadly supportive with these questions:

- Loss of combined organ transplant “expertise” perspective – no special qualifications now
- Inconsistency with CMS program requirements – CMS has indicated a willingness to accept the elimination of the heart-lung program designation

Resolution 5

RESOLVED, that Appendix J (Membership and Personnel Requirements for Joint Heart and Lung Programs) of the Bylaws is hereby removed, as set forth in Resolution 5, effective September 1, 2013.

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