



September 28, 2022

OPTN Proposal: Modify Waiting Time for Candidates Affected by Race-Inclusive
Estimated Glomerular Filtration Rate (eGFR) Calculations

The National Kidney Foundation (NKF) appreciates the opportunity to offer commentary on the Organ Procurement and Transplant Network's (OPTN) policy proposal, "Modify Waiting Time for Candidates Affected by Race-Inclusive Estimated Glomerular Filtration Rate (eGFR) Calculations," a policy which we support.

We are committed to advocating for policies that create equitable access to the national transplant waitlist for kidney failure patients. Removing race from the algorithms used to assess kidney function and establish listing eligibility for a kidney transplant was a critical step forward in eliminating systemic racial bias in access to kidney transplantation, an initiative prioritized by NKF and the American Society of Nephrology (ASN) through its collaborative Task Force on Reassessing the Inclusion of Race in Diagnosing Kidney Diseases.¹ Restoring waitlist time to Black patients affected by race-driven formulas is imperative to continue advancing health equity and social justice. We implore OPTN to continue investigating how racism and discrimination perpetuate barriers to transplantation for structurally disadvantaged communities and create resolute policies to abolish racism and bias in transplantation.

NKF applauds OPTN for its attention to the racial disparities in kidney transplantation and its efforts to close the gap by making access to transplantation equitable. We support OPTN's proposal to modify waiting time for Black candidates affected by race-based estimated glomerular filtration rate (eGFR) calculations, which have contributed to waitlist delays.² This is congruent also with our prior advocacy for the policy recommendation to eliminate the use of race-based algorithms to assess kidney function and establish eligibility for kidney transplant listing. With the recent unanimous OPTN board decision requiring transplant centers to evaluate patients using race-neutral eGFR formulas, we firmly believe Black patients should regain lost waitlist time if their kidney function was assessed using the race-based calculation.

To mitigate further inequities, NKF recommends that OPTN make this a mandatory policy. Black patients with kidney failure face a disproportionate burden of obstacles to this optimal outcome – such as wealth inequity and poor access to health care- exacerbated by inequitable social policies and

¹ <https://doi.org/10.1053/j.ajkd.2021.08.003>

² <https://ajkdblog.org/2022/09/21/waitlist-eligibility-and-disparities-in-transplant-access/>



structural racism.³ Allowing some transplant centers to opt out of modifying wait times for candidates affected by the eGFR change compounds the racism and injustice that black patients face.

We would also ask for OPTN to remove the time limitation of 365 days for transplant centers to request waiting time modification for patients affected by the racialized algorithm. While kidney transplant programs should submit requests as promptly as resources allow (e.g., given that some centers may take longer to adopt race-free estimating equations, etc., or retrospectively determine who was impacted by the race-based equations), imposing an arbitrary deadline ultimately punishes the patients served at centers that might be unable to meet the deadline.

Further, we recommend that OPTN require transplant centers to transparently communicate to Black patients if their waitlist time was affected due to kidney function tests that included the race coefficient and a plan to modify their time. If approved, we hope the OPTN will offer support and guidance to transplant programs to operationalize this policy efficiently.

Once again, NKF thanks OPTN for its dedication to advancing health equity in transplantation. Please contact Morgan Reid, Director of Transplant Policy and Strategy (morgan.reid@kidney.org), if there are opportunities for NKF to support these initiatives further.

Sincerely

A handwritten signature in black ink, appearing to be "K. Longino".

Kevin Longino
CEO and Transplant Patient

A handwritten signature in black ink, appearing to be "Paul Palevsky, MD".

Paul Palevsky, MD
President

³ Boulware LE, Purnell TS, Mohottige D. Systemic Kidney Transplant Inequities for Black Individuals: Examining the Contribution of Racialized Kidney Function Estimating Equations. *JAMA Netw Open*. 2021;4(1):e2034630. doi:10.1001/jamanetworkopen.2020.34630