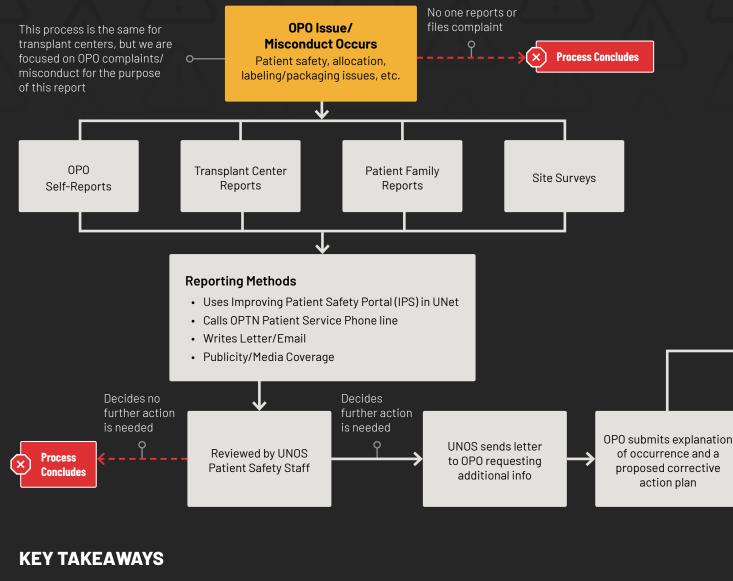
OPTN Complaint Process



- > Very few people we spoke to knew about this complaint process, or even knew of people who had lodged formal
- > Complaints are seldom made, largely because people are unaware of how to start the complaint process, are fearful of retribution, or have no faith that filing a complaint will lead to any meaningful change.
- > There is no transparency around why UNOS staff or the MPSC decide not to pursue a complaint, or, even if a complaint is pursued, whether the investigation was done well or in good faith. Much is hidden behind the "peer-review" process.
- > When assessing complaints, MPSC is primarily looking at whether OPTN policies were violated. This is problematic, because current policies are written in a vaque way that allows for many interpretations.
- OPTN policies do not address many cases where an OPO decision or action resulted in an organ not being procured or transplanted - such as a poor approach to family, transportation errors, poor allocation, refusal to do certain tests, and more.
- > There are rampant conflicts of interest within UNOS and the MPSC, which potentially impacts which cases they pursue. Anecdotally, we were told that OPOs have been known to spend hundreds of thousands of dollars paying for "consultants" with close ties to UNOS and its associates that MPSC recommended the OPO work with to resolve the complaint against them.
- > The harshest punishment an OPO can receive from UNOS is a "member not in good standing" designation. This has only happened twice and it has no real consequence, as OPOs are still paid to operate without competition.

66 OPTN is trying to please their masses, so if they found too many OPOs were violating their policies, Non-Adverse Actions do not require approval by Board of they would probably change their policies" Directors and are not made public. Remains on OPO's - HHS Official

"permanent record."

