

Appendix E: Transplant Center Administrator Interview Protocol

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Introduction

Hello. My name is *[interviewer name]* from Insight Policy Research, and I want to thank you again for agreeing to speak with me today about your involvement in activities related to dialysis care. I'm joined today by *[note taker name]* from Insight, who will be taking notes for the interview.

We were hired by the Centers for Medicare & Medicaid Services, otherwise known as CMS, to conduct an evaluation of the ESRD Quality Incentive Program (QIP). CMS is interested in learning how this initiative may have affected dialysis patients' health, outcomes, satisfaction, access to care, quality of care, and healthcare spending. CMS has also asked us to learn about other topics that are less directly related to the QIP.

This year we are focusing on several topics this year, some of which include the factors associated with access to kidney transplants.

Informed Consent

Let me also take a minute to review the informed consent for the interview and how we'll handle the information you provide:

- ▶ We will use the information you share with us for research purposes only.
- ▶ All your responses will be kept confidential. No one except the Insight research team will have access to the information you provide.
- ▶ We will use your answers to produce summaries from our collective set of interviews.
- ▶ We will not report information in any way that identifies you or the organization you are affiliated with to anyone outside the research team, except with your permission or as required by law. CMS will not see your name or your organization's name connected to your individual responses.
- ▶ All information identifying you is stored securely and will be destroyed at the end of the study.

- ▶ We'd also like to emphasize that your participation is completely voluntary:
 - Your participation or nonparticipation will not be reported to anyone.
 - You can stop the interview at any time for any reason, and you can decline to discuss any topic we raise.
- ▶ We expect that this call will take about 30 minutes.

You should have received an attachment to the email confirmation for the interview that covers this information. That document also includes contact information for the project director if you have questions about the study. Do you recall seeing that document?

[If no] We'll send you that document again so you have a written copy of this information.

With your permission, we'd like to audio record the interview to ensure we capture and analyze your remarks accurately. Only the research team will have access to the recording, and it will be destroyed at the end of the project. Would it be okay to audio record the interview?

Do you have any questions before we begin?

Introduction of Interviewee(s)

[If there are several interviewees on the phone, call out each one individually and ask them the same introductory question below.]

1. Before we start our discussion, would you please share with me your job title and your role at *[facility name]*? How long have you been working in this field?
2. Does your facility only coordinate kidney transplants or do you work on other organ transplants as well?

Coordinating Transplants

Before I ask you specific questions about patient access to kidney transplants, I'd like to first gain an understanding of how your facility coordinates assessments for patients who are interested in obtaining a spot on the kidney transplant waitlist.

1. Please describe relationships that your transplant center has with any specific dialysis facilities?
 - a. Do you have regular contact with local dialysis facilities, either with the administrators or providers? If so, what is the frequency and focus of those communications?
 - b. Do you have an agreement with them that your transplant center is their go-to for referrals?
 - c. Do you hold transplant education events for patients in those facilities? Please describe the structure and frequency of those events.
2. Similarly, please describe relationships that your transplant center has with any nephrology practices in your area?
 - a. Do you have regular contact with local nephrology practices, either with the administrators or providers? If so, what is the frequency and focus of those communications?

- b. Do you have an agreement with them that your transplant center is their go-to for referrals?
 - c. Do you hold transplant education events for patients in those practices? Please describe the structure and frequency of those events.
3. Once a patient is referred to your center for a transplant assessment, what happens next? What steps do you and the patients then take to progress through the process?
 - a. What information does the center collect in the assessment process?
 4. Please describe how the waitlist criteria works.
 - a. What are the factors to determine someone is a high priority on the waitlist?

Access to Transplant

Next, I'd like to ask about specific barriers to and facilitators of kidney transplant and obtaining a place on the waitlist.

1. What are some of the barriers to kidney transplant for those who are interested in pursuing it?
 - a. [Probe: Lack of knowledge, lack of interest, lack of providers, restrictive transplant center practices, long deceased donor waiting list, finances, access to living donors]
2. I'm interested in your views on common barriers to patient *access* to transplantation. Specifically, what are the barriers to getting on the waitlist versus getting off the waitlist and complete the transplant?
3. What are common factors or activities that help patients access kidney transplants?
 - a. [Probe: Robust patient education, broad waitlist criteria, streamlined assessments, access to several transplant centers, supplementing funding sources]
4. [If COVID-19 not mentioned] How, if at all, has the COVID-19 pandemic influenced patients' decisions to pursue a transplant?
5. Are there multiple transplant centers in your geographic area?
 - a. Probe: How large of a region does your center cover?
6. Can you please describe how your facility's location affects patients' transplant options?
 - a. Probe: State/local requirements, distance to nearest transplant centers
7. How do patients' social needs—like housing, transportation, food security—affect their access to transplants?
 - a. Probe: Transportation challenges makes it difficult to complete the assessment appointments

Reflections on process

1. Over the past few years, has there been a shift in the way that kidney transplants are coordinated?
 - a. If yes, how has it changed and what were the main drivers for this change?

2. In what ways could the transplant process change to facilitate better access for individuals living with ESRD who are interested in transplant?
 - a. [Probe: Better coordination of donor kidneys, broader eligibility criteria, more expansive education about living donors]
 - b. Are there policy-related changes that could facilitate better access to transplants for individuals with ESRD who are interested?

Closing

Before we finish, is there anything you would like to share that I haven't asked about or anything you would like to elaborate on that you didn't get a chance to discuss about coordinating kidney transplants?

Thank you for taking the time to speak with me today. Your input is helpful, and we look forward to summarizing all the information we hear from stakeholders. If you have questions after the call or wish to offer additional feedback, please feel free to reach out to me.