Training for end users
Presenters

Lisa Sivell, PharmD
Director
Medical Benefit Drug Management
Blue Cross Blue Shield of Michigan

Chris Peters
Practice Engagement Manager
AIM Specialty Health
Agenda

We’ll review the Oncology Management Program – which now spans all lines of business at Blue Cross Blue Shield of Michigan – and provide a demonstration of an authorization request within the AIM ProviderPortalSM. This session is intended to educate any practice staff about the Oncology Management Program and how to process authorization requests.

Note: This program was first implemented for URMBT PPO non-Medicare members effective January 1, 2019. BCN HMO™ commercial plans were added August 1, 2019, followed by BCN Advantage™ and Medicare Plus Blue™ PPO plans on January 1, 2020. On December 1, 2020, the program expands to include Blue Cross PPO fully insured commercial plans.

Agenda:
• Provide an overview of the Oncology Management Program
• Introduce AIM Specialty Health™
• Review program launch
• Identify program resources
• Demonstrate how to request an authorization via AIM ProviderPortal®
Improves on the approach of managing “drug by drug”

- Comprehensive, holistic approach by reviewing the total drug regimen, including supportive care treatment
- Based on specific patient data (e.g., cancer type, history, staging)
- Authorizations through AIM Specialty Health

**Goal:** Advance the standard of cancer care with the adoption of evidence-based pathway regimens identified through documented efficacy and safety
What’s in scope?

The program manages medical oncology* and supportive care drugs.
- The drug list for each plan type can be found at [ereferrals.bcbsm.com](http://ereferrals.bcbsm.com).

Targeted drugs
- Therapeutic
  - Chemotherapy
  - Immunotherapy
- Supportive care (Neulasta®)

Included settings
- Outpatient facilities
- Office
- Home

*Medical oncology refers to drugs on the medical benefit that require administration by a health care professional. Oncology drugs on the pharmacy benefit (for example, oral cancer drugs) may still require authorization from the pharmacy benefit manager.
Meet our oncology clinical team – health care professionals dedicated to ensuring better care for cancer patients

Michael Fisch, MD, MPH
Medical Director, Medical Oncology

Stacey Ban, MD
Medical Director, Oncology and Specialty Drugs

60+
Years of combined clinical and academic oncology experience on the clinical leadership team

11
Oncologists available for peer-to-peer conversations about evidence-based treatment options

20
Oncology-trained nurses available to provide clinical information and to review clinical guidelines
AIM Cancer Treatment Pathways are optimal medical oncology regimens

AIM Cancer Treatment Pathways are a subset of evidence-based regimens. They are:

- Selected on the basis of evidence supporting efficacy and safety, and finally when all other factors are equal - cost
- Often, but not always, less expensive than other regimens
- Developed in partnership with a panel of oncologists from community practices and prestigious academic institutions
- Reviewed quarterly, more often when warranted
AIM cancer treatment pathways cover 95 percent of spending on cancer drugs

<table>
<thead>
<tr>
<th>TUMOR TYPES</th>
<th>CLINICAL SCENARIES</th>
<th>THERAPEUTIC AGENTS</th>
<th>PATHWAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>80</td>
<td>100+</td>
<td>298</td>
</tr>
</tbody>
</table>

**CANCER TYPES**

- Bladder
- Breast - Neoadjuvant and Adjuvant
- Breast - Metastatic
- Breast - Endocrine Therapy
- Chronic Lymphocytic Leukemia (CLL)/Small Lymphocytic Lymphoma (SLL)
- Chronic Myelogenous Leukemia (CML)
- Colorectal
- Diffuse Large B-Cell Lymphoma
- Gastric, Esophageal and Gastroesophageal
- Head and Neck
- Kidney
- Follicular and Marginal Zone Lymphoma (Low Grade Lymphomas)
- Mantle Cell Lymphoma
- Hodgkin Lymphoma
- Non-Small Cell Lung (NSCLC)
- Melanoma
- Multiple Myeloma
- Ovarian
- Pancreatic
- Prostate
- Testicular
- Small Cell Lung
- Uterine
Ordering providers can achieve enhanced reimbursement when a pathway regimen is prescribed for certain plans

- The ordering provider will bill awarded S-codes for enhanced reimbursement for all plan types except PPO Fully Insured members

S0353 reimbursed once at the onset of treatment

S0354 reimbursed no more than monthly up to 5 months, depending on the regimen duration

S0354 reimbursement is only applicable if the patient continues to be treated with the Pathway regimen. Any changes in treatment require a new order request to be submitted to AIM via the ProviderPortalSM or via the phone.
Clinical review steps

1. Case intake
   - Submission captured through our online ProviderPortal℠ or directly through our call center
     - Member demographics
     - Ordering and servicing provider demographics
     - Clinical case information

2. Case review
   - Requests are reviewed in real time against Blue Cross and BCN medical policy for medical necessity, when applicable
   - Regimens are reviewed against AIM clinical guidelines for pathway, if available

3. Education and intervention
   - Messaging on appropriateness of request and link to guidelines
   - Peer-to-peer discussion if previous adjudication indicated that case does not meet medical policy

4. Case closure
   - Document final review outcome
   - Messaging of final review outcome to provider
     - If denial, case determination letter generated
     - Extract case information to health plan

5. Additional reviews
   - Member and provider appeals will be managed by Blue Cross and BCN

80% OF REQUESTS ARE APPROVED THROUGH THIS 10 MINUTE PROCESS

90% OF REQUESTS ARE RESOLVED WITH 24 HOURS; MAXIMUM TURN-AROUND TIME IS 3 DAYS
Order request checklist

Gather necessary information prior to logging into the AIM ProviderPortalSM

**Required Demographic Data:**
- Member’s first and last name and date of birth
- Ordering provider’s first and last name
- Servicing provider name
- Place of service

**Required Clinical Data:**
- Clinical details
  - Patient’s height and weight
  - Patient diagnosis
  - Cancer type
  - Pathology and stage
- Chemotherapy regimen
- Biomarkers and tumor characteristics
- Line of treatment
# Case closure rules

AIM closes most cases within 24 hours, but guarantees clinical review within 72 hours of receipt for non-urgent requests.

<table>
<thead>
<tr>
<th>Case type</th>
<th>Turn-around times</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-urgent requests</td>
<td>Close within 72 hours of receipt request</td>
</tr>
<tr>
<td>Urgent requests</td>
<td>Close within 24 hours of receipt request</td>
</tr>
</tbody>
</table>
Oral Drug Workflow
• Pathways apply to IV treatments, combination oral and IV chemo, and oral chemo alone

Breast Cancer Pathways:
Endocrine Therapy for Recurrent or Metastatic Disease

<table>
<thead>
<tr>
<th>First line therapy (1st line)</th>
<th>Recurrent or Metastatic Disease</th>
<th>Hormone receptor positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anastrozole (Arimidex)*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fulvestrant, high dose (Faslodex)*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Letrozole (Femara)*</td>
<td></td>
<td></td>
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<tr>
<td>Letrozole (Femara) and palbociclib (Ibrance)*</td>
<td></td>
<td></td>
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<tr>
<td>Tamoxifen*</td>
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</tbody>
</table>

Myeloma Pathways: Multiple Myeloma

<table>
<thead>
<tr>
<th>Primary/ First line of therapy (1st line)</th>
<th>Transplant candidates</th>
</tr>
</thead>
<tbody>
<tr>
<td>VRD/VDR: bortezomib (Velcade), lenalidomide (Revlimid), and dexamethasone</td>
<td></td>
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</tbody>
</table>

Colorectal Cancer Pathways

<table>
<thead>
<tr>
<th>Adjuvant therapy*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capecitabine (Xeloda)</td>
</tr>
<tr>
<td>FOLFOX: fluorouracil (5-FU), leucovorin, and oxaliplatin</td>
</tr>
<tr>
<td>FFUL: fluorouracil (5FU) and leucovorin</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Metastatic disease</th>
<th>RAS Wild Type (WT) or Mutant (MT) ↑</th>
<th>First or second lines of therapy (1st or 2nd line)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capecitabine (Xeloda)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Oral drugs still may require prior-authorization from Blue Cross or BCN, or member’s pharmacy benefit manager. Be sure to enter these drugs into the ProviderPortalSM to qualify for enhanced reimbursement, if applicable.
The ProviderPortal and the call center will be available beginning November 16, 2020 for PPO Commercial Fully Insured members who need authorization for treatment on or after that date. Current members will be grandfathered in until May 31, 2021.

- **November 16**: AIM ProviderPortal℠ and call center open to assist with authorizations for PPO Fully Insured members
- **December 1**: Blue Cross PPO Fully Insured program goes live
Submitting an order request

Register at www.providerportal.com
Available 24 hours/day, 7 days/week except for maintenance on Sundays from 1 p.m. – 7:30 p.m. (ET)
The AIM ProviderPortalSM support team can be reached by phone 1-800-252-2021 to resolve any issues with Portal access or registration.

Dedicated toll-free number: 1-800-728-8008
Contact center hours: Monday – Friday 8 a.m. – 5 p.m. ET *
Voice mail messages received after business hours will be responded to the next business day

* The following holidays are observed at AIM: Thanksgiving Day, the day after Thanksgiving, Christmas Day, New Year’s Day, Martin Luther King Jr. Day, Memorial Day, Independence Day, and Labor Day.
## Continuity of care

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is continuity of care?</td>
<td>• Continuity of care applies to members whose treatment began before the program launch and will continue on or after program launch</td>
</tr>
<tr>
<td>How will members be impacted if treatment extends past December 1, 2020?</td>
<td>• Members receiving therapy will be grandfathered for six months; no authorization from AIM is required.</td>
</tr>
<tr>
<td>When does a provider need to contact AIM?</td>
<td>• If there is any change to the existing treatment plan on or after December 1, 2020</td>
</tr>
<tr>
<td></td>
<td>• If treatment extends past the six-month grandfathered period (May 31, 2021)</td>
</tr>
</tbody>
</table>
Program resources
A dedicated engagement team will provide personalized support

**Practice engagement team mission:**

The AIM practice engagement team will support and work in tandem with the Blue Cross and BCN Pharmacy Services team and providers to enhance the understanding and participation in medical oncology programs administered by AIM.

Specific areas of focus include:

- Program communication and training
- Resolution of any issues experienced by a practice
- Program metrics reporting to identify opportunities for increased Pathway adoption
- Facilitation of program enhancements based on practice feedback

AIM practice engagement team email: aimmedoncpe@aimspecialtyhealth.com
The provider microsite is an excellent source of medical oncology program information

Practices can visit www.aimproviders.com/oncology/BCBSM for:

› Program FAQ
› Pathway worksheets
› Enhanced reimbursement information
› Order entry worksheets and checklists
› Other useful tools to help a practice participate in the program

Look for these items under the Resources tab
Reference eReferrals.bcbsm.com to see drug lists for the Oncology Management Program.
**ProviderPortal<sup>SM</sup> demonstration**

NOTE: Actual member and provider data will not be used in this presentation
Login with your existing account if you are already registered for the AIM ProviderPortal.

or

Click the “Register” button to begin your registration process, if you are a new user.
Type in your name & Practice information to begin registering

Select the applicable user role type, scroll down to continue…
Portal Registration

Enter your practice’s Group TIN as the provider identifier for optimal portal use

You may register with an alternate Provider ID #

Select the type of ID you will be using to register from the drop down list

Next type in the number in the following field
Agree to the HIPAA disclaimer upon logging into the portal

Note: actual member and provider data will not be used in this presentation
Start an order request by entering the treatment start date in the “Date of Service” field.

Search for the member by providing one of the following:

- Member ID and DOB
- Member ID and Name

Press the “Find This Member” button.
Select the member from the search results by clicking on the name.
Select “Chemotherapy and Supportive Drugs” and then press the “Continue” button.

Note: only solutions that are currently managed by AIM for the member will appear on the order type selection screen.
Select the ordering provider by clicking on the physician’s name.

Note: Ordering providers that are associated with Provider ID value in the user’s registration will be available for selection.

Practices with multiple providers, establishing “Favorites” will allow for increased intake efficiency.
Enter the fax number used for the ordering provider’s communications

or

If a fax number was previously entered for the provider previously confirm the number is correct

Press the “Save” button
The “Dispensing Date” will default to the start date for the treatment; verify or modify as needed.

Press the “Next” button.

Note: In the event that the requested drugs will be procured from an outside pharmaceutical supplier, the user can enter a dispensing date prior to the treatment start date.
Select the dispensing provider by clicking on the name from the list of frequently used which is the default display.

You can search for the dispensing provider if s/he is not listed by pressing the “Find Dispensing Provider” button and completing the search.
Select the place of service from the drop down list that corresponds to the site where the chemotherapy will be administered.
Enter the member’s height and weight

Note: Height can be entered in either inches or centimeters. Weight can be entered in either pounds or kilograms

Press the “Save and Continue” button
Select the cancer type and ICD-10 codes from the drop down lists

**ALL** drugs being prescribed as part of the care plan should be entered by searching with either drug name or HCPCS Code

The system will automatically group the chemotherapy and supportive agents
Clinical Detail Entry – Diagnosis & Regimen

Answer all questions about line of treatment and stage

Press the “Continue” button

Note: skipping the regimen search questions is not recommended; if the answers are not readily available in the chart you can “Save & Exit” to get the data and then come back to continue working on the request.
Search results will return the regimen(s) that most closely match the treatment protocol entered.

Select the regimen that matches the patient’s clinical scenario by clicking on the name if there are multiple options.

Once the correct regimen is green press the “Continue” button.
Clinical Detail Entry - Dosing

Modify or input dosing information by clicking on the name of the medication; one at a time.

Dosing updates will be made on the subsequent screen.

Note: the recommended dosing schedule for the regimen will prepopulate.
If updates are needed to the dosing information modify the applicable fields and then press “Accept Changes”

Note: changes to the following fields may impact a regimen’s Pathway status:

- Cycles/Cycle Range
- Cycle Length
- Days of Administration
- Frequency Per Day
Modifications to the dosing schedule of supportive agents is done in the same way as the chemotherapy drugs – click on the name of the drug to edit and then press “Accept Changes”.

Press the “Save & Continue” button when all dosing information is validated.

Note: changes to supportive drugs dosing will not impact Pathway status.
Select the Pathology, Stage, Line of Treatment & ECOG score from the drop down lists

Press the “Save and Continue” button

Note: T,N,M can be entered to calculate the stage as an alternative to selecting the stage directly

The ICD-10 score will prep populate based on the selection made earlier in the process.
A list of Bio-Markers & Tumor Characteristics specific to the cancer diagnosis will populate.

Select appropriate responses in all fields.

The option to select “Not Reported” is available when the testing has not been completed.

Press the “continue” button to move to the next section.
Answer any additional justification questions which align with BCBSM medical policy.

Press the “Save and Continue” button.

Note: these are asked when additional information is needed to determine if the requested treatment meets clinical criteria.
Once all clinical information has been provided, the system will alert the user when a requested service is deviating from either medical policy or Pathway criteria.

This messaging allows users to confirm the validity of the information entered prior to case submission.
Alternative treatment recommendations, with additional Pathway options that are available for the clinical scenario entered are displayed.

Selecting an alternative regimen will override the current treatment plan and should only be done at the direction of the ordering provider.
At this point users can either:

1) Select a regimen from the alternative treatment options and override the existing request

2) Select “Previous” to make updates to entered clinical information

3) Select “Save and Continue” to proceed with existing request
The system will calculate the treatment end date; which can be edited if necessary

Press the “Save and Continue” button

Note: if the requested treatment is part of a clinical trial, a Trial ID can be entered on this screen
The Order Request Preview allows users to confirm the requested items prior to submission.

The “Modify clinical” button can be used to make updates to previously entered information.

Press the “Submit This Request” button to progress to the next section.
Requests that meet clinical criteria will be approved upon case submission.

Regimens that also satisfy Pathway criteria will receive a Pathway Eligible ID in addition to the Order ID.
Order Request Summary - Drug Level Details

The drug administration information is being displayed for the convenience of the user and has not been independently verified or clinically reviewed. Please note that one or more of these drugs may also require review by a pharmacy benefit manager prior to payment. Please contact the number listed on the back of the member's identification card for more information.

**REQUESTED ITEMS:**

<table>
<thead>
<tr>
<th>ITEM #</th>
<th>HCPCS</th>
<th>DESCRIPTION</th>
<th>REQUEST STATUS</th>
<th>REQUESTED DATES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>J9070</td>
<td>Cyclophosphamide</td>
<td>AIM Clinical Review Not Required</td>
<td>10/1/2018 - 1/14/2019</td>
</tr>
</tbody>
</table>

Dose range: 1062 mg
Cycle length: 21 Days
Cycles/Duration: 1,2,3,4 cycles/ 94 Days
Direction: 1062 mg Day 1 QD Cycles 1,2,3,4

<table>
<thead>
<tr>
<th>Item</th>
<th>HCPCS</th>
<th>Description</th>
<th>Request Status</th>
<th>Requested Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>J0171</td>
<td>Docetaxel (TAXOTERE)</td>
<td>AIM Clinical Review Not Required</td>
<td>10/1/2018 - 1/14/2019</td>
</tr>
<tr>
<td>3</td>
<td>J2505</td>
<td>Pegfilgrastim (NEULASTA)</td>
<td>Authorized</td>
<td>10/1/2018 - 1/14/2019</td>
</tr>
</tbody>
</table>

**PATHWAY ELIGIBILITY:**

Provider is not eligible for enhanced reimbursement unless provider is a participating in-network provider and in the member's benefit plan.

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Description</th>
<th>Status</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>50533</td>
<td>Treatment Planning &amp; Care Coordination - Initial</td>
<td>Eligible</td>
<td>One Time</td>
</tr>
<tr>
<td>50534</td>
<td>Treatment Planning &amp; Care Coordination - Established</td>
<td>Eligible</td>
<td>1 per month up to 2</td>
</tr>
</tbody>
</table>

**Diagnosis:** C50.119 Mal neo cntr portion unspec fem brst

Clinical Information: F1

The Order Request Summary provides detailed drug-level review outcomes.

Additional information regarding next steps is provided in the plan specific disclaimer located above the requested items.
Order Request Summary – S-Code Awards

The drug administration information is being displayed for the convenience of the user and has not been independently verified or clinically reviewed. Please note that one or more of these drugs may also require review by a pharmacy benefit manager prior to payment. Please contact the number listed on the back of the member’s identification card for more information.

REQUES TED ITEMS:

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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>J9171</td>
<td>Docetaxel (TAXOTERE)</td>
<td>AIM Clinical Review Not Required</td>
<td>10/1/2018 - 1/14/2019</td>
</tr>
<tr>
<td>3</td>
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Dose range: 1062 mg
Cycle length: 21 Days
Cycles/Duration: 1,2,3,4 cycles/ 84 Days
Direction: 1062 mg Day 1 QO Cycles 1,2,3,4

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<tr>
<th>CPT Code</th>
<th>Description</th>
<th>Status</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>SO333</td>
<td>Treatment Planning &amp; Care Coordination - Initial</td>
<td>Eligible</td>
<td>One Time</td>
</tr>
<tr>
<td>SO354</td>
<td>Treatment Planning &amp; Care Coordination - Established</td>
<td>Eligible</td>
<td>1 per month up to 2</td>
</tr>
</tbody>
</table>

Diagnosis: C50.119 Mal neo cntr portion unspec fem brst

Clinical Information: I-1

When applicable, information about enhanced reimbursement will be displayed at the bottom of the Order Request Summary.

Note: “S-Codes” will be listed in the CPT column when available.
Existing orders can be viewed from the “Check Order Status” tab

Select the member’s health plan

Select the Order Type: “Chemotherapy and Supportive Drugs”

Enter either the Order # or the Member ID # and Name/DOB

Press the “Find This Order” button
All orders that have been processed for the member will be listed in the resulting page.

Click on the hyperlink in the Order/Status column to see detailed data for any individual order.
View Order History provides access to orders that have been worked on in the past 90 days.

Find and continue orders that are not complete here by selecting:

- My Orders
- Chemotherapy and Supportive Drugs
- 7 days

...
With a status of “Incomplete”

Press the “Go” button

Click on the “Incomplete” hyperlink to be brought back into the order to update data and submit
### Selecting the “Pathway Eligible” Status Option

Selecting the “Pathway Eligible” status option will provide a list of all orders with potential S-Code reimbursement, when applicable.

<table>
<thead>
<tr>
<th>Show me:</th>
<th>For:</th>
<th>Within the last:</th>
<th>With the status:</th>
</tr>
</thead>
<tbody>
<tr>
<td>My Orders</td>
<td>- Diagnostic Imaging</td>
<td>90 Days</td>
<td>Pathway Eligible</td>
</tr>
<tr>
<td></td>
<td>- Cardiovascular</td>
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<td></td>
<td>- Specialty Drug</td>
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<td></td>
<td>- Radiation Therapy</td>
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<td></td>
<td>- Sleep Management</td>
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<tr>
<td></td>
<td>- Chemotherapy and Supportive Drugs</td>
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<td>- Surgical Procedures</td>
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<td></td>
<td>- Genetic Testing</td>
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<tr>
<td></td>
<td>- Musculoskeletal</td>
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</tbody>
</table>

**Pathway Eligible**
Questions?

Commercial (BCN HMO, Blue Cross PPO and URMBT non-Medicare PPO)

- Kelly Procailo, PharmD, BCOP
- MedicalOncology@bcbsm.com

Medicare (Medicare Plus Blue PPO and BCN Advantage)

- Karina Abdallah, PharmD
- MASRX@bcbsm.com

AIM Specialty Health

Oncology management program website
https://aimproviders.com/medoncology-bcbsm/