



# Medical Oncology Program

Provider Portal Case Entry Updates

*Updated September 29, 2023*

# Medical Oncology

## Clinical Engine and *ProviderPortal* Updates



# Medical Oncology Program reviews requests for clinical appropriateness and optimization at the same time



## Drug clinical appropriateness review

- Drugs are reviewed in combination, as a regimen
- Most clients use NCCN 2a or 2b criteria as medical policy
- A regimen and/or supportive care may be denied if medical policy criteria is not met



## Cancer Treatment Pathways (Pathways)

- Pathways are cancer treatment regimens selected on the basis of efficacy, safety, and, finally, cost when all clinical considerations are equal
- A provider may select a non-Pathway regimen and still have that regimen approved under medical policy
- Most clients issue enhanced reimbursement for practices utilizing Pathway regimens



# Drug lists

## Drugs Reviewed by Carelon (UM/Managed)

- List of drugs to be managed by Carelon will be provided by Health Plan
  - Typically includes both therapeutic and supportive drugs
  - May include formulary and non-formulary drugs
- All determinations are supported by health plan medical policies and National/Local Coverage Determinations, for Medicare Advantage members when applicable

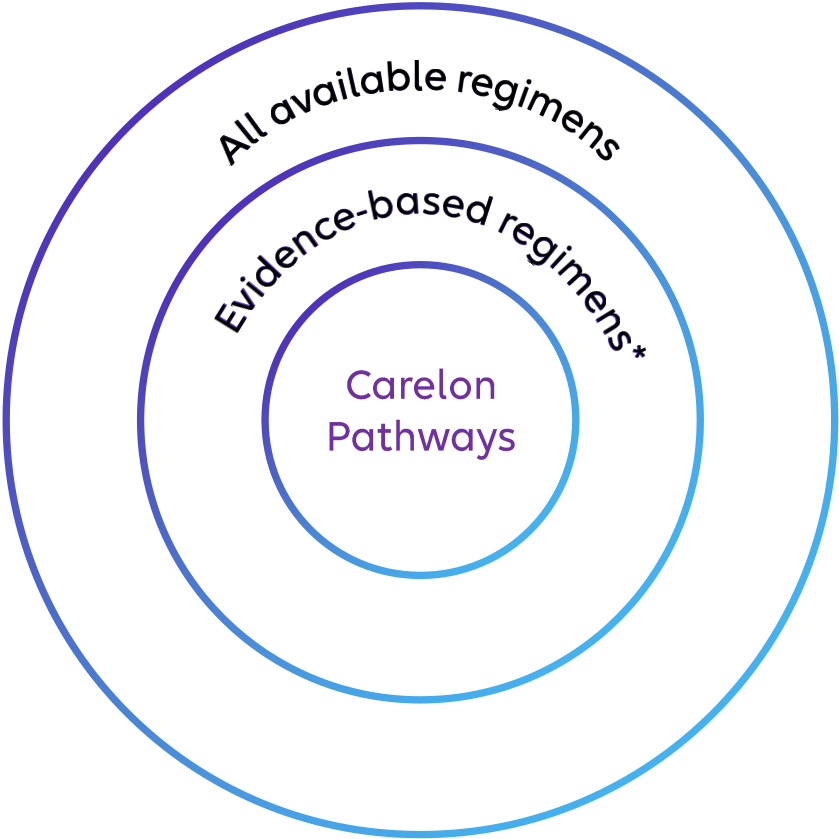
## Drugs Not Reviewed by Carelon (QI/Non-UM)

- Drugs not reviewed by Carelon may fall into one of the following categories:
  - Refer to Health Plan - Drug requires review by the Health Plan
  - Refer to PBM - Drug requires review by the PBM
  - Clinical Review Not Required - Drug does not require review by any entity





# Our Cancer Treatment Pathways are optimal regimens



All available regimens	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Evidence-based regimens	1	2	5	6	8	11	12							
→ Proven efficacious	1		5	6	8	11	12							
→ Favorable toxicity profile			5		8	11	12							
→ Favorably priced	1		5		8	11								
AIM Pathways			5		8	11								

\*Regimens covered by medical policy

# Cancer Treatment Pathways cover 95% of spending on cancer drugs

25

Tumor types

107

Clinical scenarios

100+

Chemotherapy agents

300+

Pathways

## Cancer type

- Bladder
- Breast - neoadjuvant and adjuvant
- Breast - metastatic
- Breast - endocrine therapy | advanced disease
- Chronic lymphocytic leukemia (CLL) / small lymphocytic lymphoma (SLL)
- Chronic myelogenous leukemia (CML)
- Colon
- Diffuse large B-cell lymphoma

- Esophageal and gastroesophageal
- Head and neck
- Hepatocellular\*
- Hepatobiliary\*
- Gastric
- 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
- Rectal
- Testicular
- Small cell lung
- Uterine





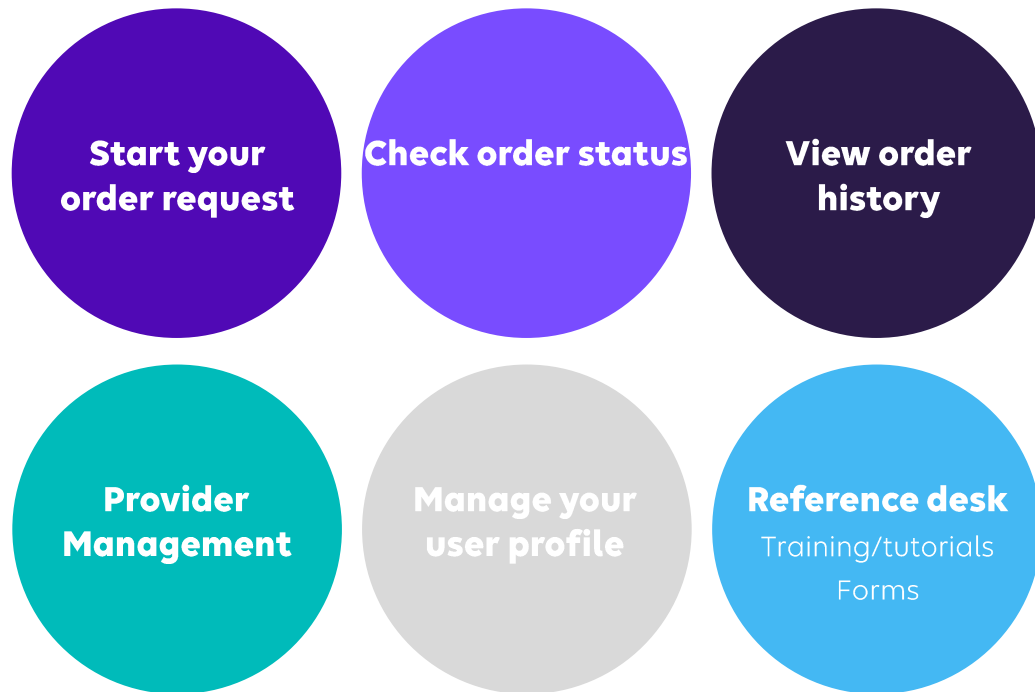
# Provider Portal Registration

*Note: Carelon Medical Benefits Management maintains the confidentiality of all protected health information. All data displayed is fictional and any resemblance to real persons is purely coincidental.*



# Provider Portal highlights

## Provider Portal modules

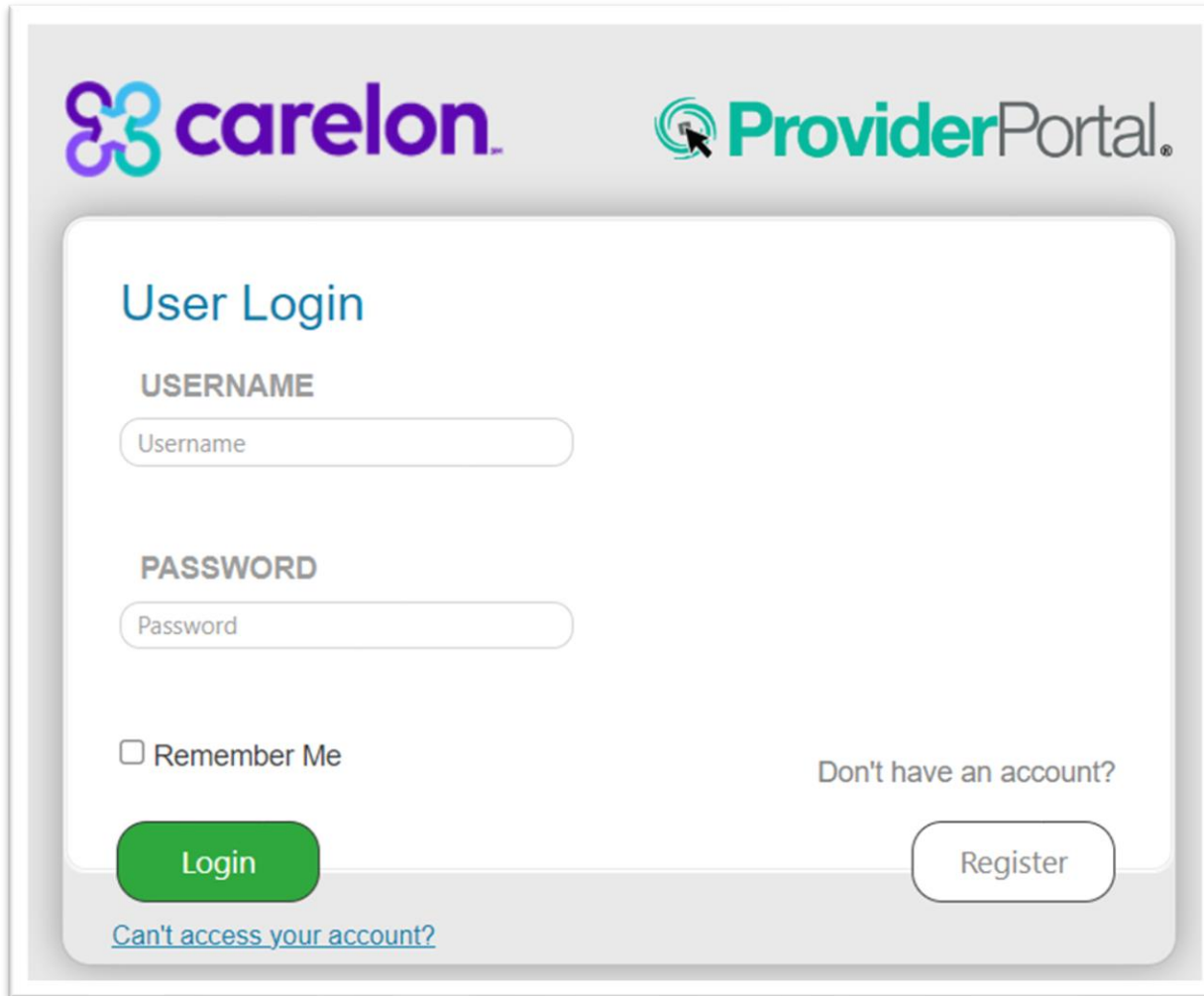


## Provider Portal access and registration

- Register at Carelon via [www.providerportal.com](http://www.providerportal.com)
- Select your User Role
- Enter Username and Password
- Enter value for unique key (I.e., TIN, NPI)
- Check your inbox for an email from Carelon



# Provider Portal



The screenshot shows the Carelon Provider Portal login interface. At the top left is the Carelon logo, and at the top right is the 'ProviderPortal' logo with a mouse cursor pointing to it. The main content area is titled 'User Login' and contains two input fields: 'USERNAME' with a placeholder 'Username' and 'PASSWORD' with a placeholder 'Password'. Below the password field is a checkbox labeled 'Remember Me'. To the right of the checkbox is the text 'Don't have an account?'. At the bottom left is a green 'Login' button, and at the bottom right is a white 'Register' button. A blue link 'Can't access your account?' is located at the bottom left of the form area.

If you are registered with the Carelon provider portal, login with your existing account

OR

If you are a new user, click the “Register” button to begin your registration process



# Provider Portal Registration

The screenshot shows the 'Register' page of the Carelon Provider Portal. At the top left, there are logos for 'carelon' and 'ProviderPortal'. Below the logos, the word 'Register' is displayed in a large, bold font. To the left of the main form area, there is a contact information section titled 'Contact Web Customer Service' with the text 'Carelon Medical Benefits Management (800) 252-2021'. The main form is titled '1. User Details' and contains several input fields: 'FIRST NAME', 'LAST NAME', 'ORGANIZATION NAME', 'ADDRESS 1', 'ADDRESS 2 (optional)', 'CITY', 'STATE' (a dropdown menu), 'ZIP CODE', 'EMAIL ADDRESS', 'PHONE', 'EXT (optional)', and 'FAX'. A 'USER ROLE' dropdown menu is open, showing options: 'Select', 'Ordering Provider', 'Servicing Provider', 'Health Plan Representative', and 'Genetic Counselor'. The form is designed with a clean, professional look using a light color palette.

If you are registered with the Carelon provider portal, login with you existing account

OR

If you are a new user, click the “Register” button to begin your registration process



# Provider Portal Registration

2. Login Information

USERNAME ⓘ

PASSWORD ⓘ

CONFIRM PASSWORD

- ✓ Between 8 and 15 characters long
- ✓ At least one uppercase letter
- ✓ At least one lowercase letter
- ✓ At least one number (0-9)
- ✓ Cannot contain spaces, single quotes, or double quotes
- ✓ Cannot be the same as Username

SECURITY QUESTION 1 ⓘ  
Select

ANSWER

SECURITY QUESTION 2 ⓘ  
Select

ANSWER

SECURITY QUESTION 3 ⓘ  
Select

ANSWER

SECURITY QUESTION 4 ⓘ  
Select

Create a Username and Password

Answer the security questions



# Provider Portal Registration

**3. Application Selection**

Select the applications you will need to access.

**Health Plan Utilization Review Programs** ⓘ

Please enter at least one valid Provider Identifier to associate your account with the available Health Plans. You may enter multiple Provider Identifiers. If your Health Plan is not displayed please contact Web Customer Service at 1-800-252-2021.

**PROVIDER IDENTIFIER** ⓘ

Tax ID (TIN) Support Program ⓘ

Group TIN

NPI

Group NPI

Provider ID

I Agree to the terms of Use

Enter your practice's group identifier (I.e. TIN)

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

Then type the number in the following field

Complete the account verification steps to activate your profile – activation will be completed within one business day







# Provider Portal

## ***Demonstration of Medical Oncology*** case entry process

*Note: Carelon Medical Benefits Management maintains the confidentiality of all protected health information. All data displayed is fictional and any resemblance to real persons is purely coincidental.*



# Provider Portal Home Page

The screenshot displays the 'Order Request' section of a provider portal. At the top, there is a navigation bar with a home icon and the text 'Order Request'. Below this, a welcome message reads 'Welcome DEMO TRAINING'. The main navigation area includes icons and labels for 'Manage Your Physician List', 'Manage Your User Profile', and 'Reference Desk'. A central search form is titled 'Start Your Order Request Here' and contains the following fields: 'Service Date \*' with a date picker set to 'MM/DD/YYYY', and 'Member Details' which includes 'First Name \*' (jane), 'Last Name \*' (85doe), 'Member ID \*' (376699999), and 'Date of Birth \*' (01/01/1959). A 'Find This Member' button is located at the bottom of the form. To the left of the form is a sidebar with several action items: 'Check Order Status', 'View Order History', 'Check Member's Eligibility', 'Check Claim Status', and 'Access Your Optinet Registration'. Below the form, there is a 'Hide Search Tips' link and a list of search instructions.

Order Request

Welcome DEMO TRAINING

Manage Your Physician List

Manage Your User Profile

Reference Desk

Start Your Order Request Here

Service Date \* MM/DD/YYYY

Member Details:

First Name \* jane

Last Name \* 85doe

Member ID \* 376699999

Date of Birth \* 01/01/1959

Hide Search Tips ^

- For all Radiology requests use Date of Service. For Genetic Testing use the testing date. For all other requests, use Service Date.
- Do not include suffix/dependent code. For Federal Employee (FEP) members, please include the leading "R" in the search. If the member is not found, remove the leading "R" and search again. If there is an asterisk as part of the Member ID, do not enter it before searching.
- Member not found? Try entering only the first 2 characters of the patient's first and last name.

Find This Member

Check Order Status

View Order History

Check Member's Eligibility

Check Claim Status

Access Your Optinet Registration

To initiate a prior authorization request:

1. Enter the “Date of Service”
2. Provide the following member information:
  - Member First Name
  - Member Last Name
  - Member ID
  - Member DOB
3. Next, chose “Find this Member”

You can also:

- Check Order Status
- View Order History
- Manage Your Physician List
- Manage Your User Profile
- Reference Desk



# Order Type Selection

Order Request Medicare AUC Logout

[Back to Homepage](#) Print Preview

**Member Details**

123 MAIN STREET  
SUITE 500  
BRIDGEWATER, NJ 08807-6102

Date of Birth: 09/08/1973 Age: 49  
Male




Member ID: Alpha Prefix:

Service Date: 2/27/2023 [Edit Service Date](#)

**Eligibility Details**


Effective: 05/17/2021-12/31/9999 Product Code: Employer Group ID:

**The following solutions for the service date entered require a Pre-Authorization:**  
To initiate a request, please select the solution and then click the Start Order Request to start your request.

 View Code List <b>Diagnostic Imaging</b> Angiography, Bone Density CT, CTA, MRA, MRI, Nuclear Medicine, PET	 View Code List <b>Sleep Management</b> Diagnostic Sleep Study (home/lab), Titration Study, APAP/BPAP/CPAP, Oral Appliance, MSLT, MWT	 <b>Chemotherapy and Supportive Drugs</b> Review of cancer drugs, side effect management and treatment pathways
---	---	--

Urgent requests are not expected given the scope of Carelon's services. If you have any questions about a possible urgent request, please contact 866-766-0250. [Start Order Request](#)

**The following solutions for the service date entered do not require Pre-Authorization by Carelon. Please note that benefit limits, if applicable, will still be applied. Contact the health plan using the number on the back of the member's ID card if you have any questions regarding coverage or Pre-Authorization requirements.**

 View Code List <b>Musculoskeletal</b> Joint Surgery, Spine Surgery & Interventional Pain Management
---

Eligible solutions will display for the member and will be selectable

The medical oncology program is called Chemotherapy and Supportive Drugs.



# Member History

Please verify the list of Order Requests below to ensure you are not entering a duplicate request.

Member History											
Order ID	Procedure Description	ICD	Disease	Start Date	End Date	Ordering Provider	Outcome	Summary			
Voluntarily Withdrawn	Nivolumab	C43.0	Malignant melanoma of lip	2/21/2022	8/29/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	Ipilimumab	C43.0	Malignant melanoma of lip	2/21/2022	8/29/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	Dexamethasone Sodium Phosphate	C43.0	Malignant melanoma of lip	2/21/2022	8/29/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	AKYNZEO	C50.011	Mal neo nipple&areola,rt fem breast	1/19/2022	5/4/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	Cisplatin	C00.0	Malig neoplasm external upper lip	1/13/2022	3/31/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	Nivolumab	C43.0	Malignant melanoma of lip	12/30/2021	7/7/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	Ipilimumab	C43.0	Malignant melanoma of lip	12/30/2021	7/7/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	Dexamethasone Sodium Phosphate	C43.0	Malignant melanoma of lip	12/30/2021	7/7/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	Nivolumab	C43.0	Malignant melanoma of lip	12/23/2021	6/30/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			
Voluntarily Withdrawn	Ipilimumab	C43.0	Malignant melanoma of lip	12/23/2021	6/30/2022	SCULLY, THOMAS	Voluntary Cancellation	<a href="#">View</a>			

1 2 3 4 5 >>> >>>>

DISPLAYING 1-10 OF 58 RESULTS

Historical order requests will display in the member history

Select “Next” to proceed with the order request entry or “Withdraw the request” if applicable



# Select Ordering Provider

The screenshot shows a web application interface for an 'Order Request'. At the top, there is a navigation bar with a home icon, the text 'Order Request', and a 'Logout' link. Below the navigation bar is a progress indicator showing steps 1 through 8, with step 2 highlighted. The main content area displays patient information for '85PARKER, MARY JANE', including Member # 3766387660, Date of service 8/30/2022, Date of Birth 1/1/1943, and Health Plan. Below this, a message states 'Step 2: Please select the Ordering Provider from the list below.' The interface is divided into two main sections: 'Ordering Provider Search' on the left and a list of 'Ordering Providers' on the right. The search section includes radio buttons for 'Name', 'TIN or NPI', and 'Address', and input fields for 'First Name', 'Last Name', and 'State' (set to Texas). The provider list is a table with columns for 'Favorite', 'Name', 'Address', 'City', 'Specialty', and 'Health Plan'. The table contains six entries, with the first two marked as favorites with yellow stars. At the bottom of the provider list, it says 'DISPLAYING 1-6 OF 6 RESULTS'. A 'Withdraw this request' button is located at the bottom left of the provider list area.

Order Request

Logout

Step: 1 2 3 4 5 6 7 8

85PARKER, MARY JANE Edit Hide Details

Member #: 3766387660 Date of service: 8/30/2022

Date of Birth: 1/1/1943 Health Plan:

Ordering Provider:

Step 2: Please select the Ordering Provider from the list below.

Ordering Provider Search

Search Type:

Name

TIN or NPI

Address

First Name:

Last Name:

State: Texas

Search Clear

Recent Favorites Search Results View: Local

Ordering Providers

Favorite	Name	Address	City	Specialty	Health Plan
<input checked="" type="checkbox"/>	SMITH, JOSHUA	700 PARK RIDGE LN	NORTH FOND DU LAC	Radiology	
<input type="checkbox"/>	SCULLY, THOMAS	226 S WOODS MILL RD STE 40W	CHESTERFIELD	Urology	
<input type="checkbox"/>	SHARPE, BRYAN	18051 RIVER AVE STE 200	NOBLESVILLE	Family Practice	
<input checked="" type="checkbox"/>	SCULLY, THOMAS	2 PROGRESS POINT PKWY	O FALLON	Urology	
<input type="checkbox"/>	SMITH, JOSEPH	1701 SENATE BLVD	INDIANAPOLIS	Pulmonary Diseases	
<input type="checkbox"/>	BUTTERMANN, GLENN	730 10TH AVE	BALDWIN	Orthopedic Surgery	

DISPLAYING 1-6 OF 6 RESULTS

Withdraw this request

Select the ordering provider by clicking on the physician's name

Ordering providers that are associated with the requesting user's registration will be available for selection

Providers can be added to "Favorites" by clicking on the star to the left of the provider's name



# Ordering Provider Fax Number

The screenshot displays a web application interface for ordering a provider. At the top, there is a navigation bar with "Order Request" and "Logout" options. Below this, a patient profile is shown for "85PARKER, MARY JANE" with details such as Member # (3766387660), Date of service (8/30/2022), Date of Birth (1/1/1943), and Health Plan. The interface is in "Step 2" of a process, with instructions to "Please select the Ordering Provider from the list below".

On the left, there is an "Ordering Provider Search" section with search type options: Name (selected), TIN or NPI, and Address. Below these are input fields for "First Name", "Last Name", and a "State" dropdown menu set to "Texas". A "Search" button is at the bottom of this section.

The main area shows a list of providers under the "Ordering" tab. A modal dialog titled "Ordering Provider Fax Number" is overlaid on the list, prompting the user to "Please enter or confirm the physician's secure fax number below." The dialog contains a text input field with the value "(987) 654-6543", a link for "Why do you need this?", and two buttons: "Save" and "Fax Unavailable".

The provider list in the background includes columns for "Ordering", "Favorite", "Name", "Address", "City", "State", "Specialty", and "Health Plan". Visible providers include:

Ordering	Favorite	Name	Address	City	State	Specialty	Health Plan
		FOND				Radiology	
		ERFIELD				Urology	
		VILLE				Family Practice	
		SMALL, JIMMY	2 PROGRESS POINT PKWY	U FALLON		Urology	
		SMITH, JOSEPH	1701 SENATE BLVD	INDIANAPOLIS		Pulmonary Diseases	
		BUTTMANN, GLENN	730 10TH AVE	BALDWIN		Orthopedic Surgery	

At the bottom of the provider list, it says "DISPLAYING 1-6 OF 6 RESULTS". A "Withdraw this request" button is located at the bottom left of the main area.

Enter or confirm the fax number to be used when communicating with the ordering provider

Press the "Save" button to continue



# Verify Dispensing Date

The screenshot shows a web interface for an 'Order Request'. At the top, there is a navigation bar with a home icon, the text 'Order Request', and a 'Logout' link. Below this is a progress indicator showing steps 1 through 8, with step 3 highlighted in blue. The main content area displays member information for '85PARKER, MARY JANE' with an 'Edit' link and a 'Hide Details' link. The member details include: Member #: 3766387660, Date of service: 8/30/2022, Date of Birth: 1/1/1943, Health Plan: (blurred), and Ordering Provider: SMITH, JOSHUA with an 'Edit' link. Below the details, a message reads: 'Step 3: Please enter the Dispensing Start Date if it prior to the Treatment Start Date'. A form field labeled 'Dispensing Date' contains the text '08/30/2022' and a calendar icon. At the bottom of the form, there are two buttons: 'Withdraw this request' and 'Next', with the 'Next' button highlighted in blue.

The “Dispensing Date” will default to the start date for the treatment; verify and modify as needed

Select the “Next” button to continue

Note: If 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 Dispensing/Servicing Provider

Select the dispensing provider by clicking on the name from the default list of frequently used providers that displays

You can search for the dispensing provider if they are not listed by selecting the “Find Dispensing Provider” button and completing a search

The screenshot shows a web application interface for an 'Order Request'. At the top, there is a navigation bar with a home icon, the text 'Order Request', and a 'Logout' link. Below the navigation bar is a progress indicator showing steps 1 through 8, with step 4 highlighted. The main content area is divided into two sections. The top section displays member information for '85PARKER, MARY JANE', including her member number (3766387660), date of service (8/30/2022), date of birth (1/1/1943), and ordering provider (SMITH, JOSHUA). The bottom section is titled 'Step 4: Please Choose a Dispensing Provider.' and contains a 'Find Dispensing Provider' button. Below this button is a 'Provider Search Results' table with one entry for 'SMITH, JOSHUA' at '700 PARK RIDGE LN, NORTH FOND DU LAC, WI', with a phone number of '888-720-2012' and a distance of '892.44'. The table includes columns for 'Dispensing Provider', 'Address', 'City', 'State', 'Phone', 'Distance', 'Action', and 'Map'. Below the table is a pagination control showing '1' and a 'DISPLAYING 1-1 OF 1 RESULTS' message. At the bottom of the page is a 'Withdraw this request' button.

Order Request Logout

Step: 1 2 3 4 5 6 7 8

**85PARKER, MARY JANE** [Edit](#) Hide Details

Member #: 3766387660 Date of service: 8/30/2022

Date of Birth: 1/1/1943 Health Plan:  

Ordering Provider: SMITH, JOSHUA [Edit](#)

Step 4: Please Choose a Dispensing Provider.

[Find Dispensing Provider](#)

Dispensing Provider	Address	City	State	Phone	Distance	Action	Map
<a href="#">SMITH, JOSHUA</a>	700 PARK RIDGE LN	NORTH FOND DU LAC	WI	888-720-2012	892.44	<a href="#">View Details</a>	<a href="#">View Map</a>

« « 1 » » »

DISPLAYING 1-1 OF 1 RESULTS

[Withdraw this request](#)





# Dispensing Provider Place of Service Selection

The screenshot shows a web application interface for an 'Order Request'. At the top, there is a navigation bar with a home icon, the text 'Order Request', and a 'Logout' link. Below the navigation bar, a progress indicator shows steps 1 through 8, with step 4 highlighted. The main content area is divided into two sections. The top section displays patient information for '85PARKER, MARY JANE', including member number, date of service, date of birth, health plan, and ordering provider. The bottom section is titled 'Step 4: Please Choose a Dispensing Provider.' and contains a 'Find Dispensing Provider' button. Below this button is a 'Provider Search Results' table with columns for Dispensing Provider, Address, City, State, Phone, Distance, Action, and Map. A single result for 'SMITH, JOSHUA' is shown. A dropdown menu is open over the 'SMITH, JOSHUA' result, showing the title 'Select Place of Service' and a list of options: '--Select--', OFFICE, OUTPATIENT HOSPITAL, AMBULATORY INFUSION CENTER, AMBULATORY SURGICAL CENTER, and HOME. A 'Withdraw this request' button is also visible.

Order Request Logout

Step: 1 2 3 4 5 6 7 8

85PARKER, MARY JANE [Edit](#) Hide Details

Member #: 3766387660 Date of service: 8/30/2022

Date of Birth: 1/1/1943 Health Plan: Anthem CR

Ordering Provider: SMITH, JOSHUA [Edit](#)

Step 4: Please Choose a Dispensing Provider.

[Find Dispensing Provider](#)

Dispensing Provider	Address	City	State	Phone	Distance	Action	Map
<a href="#">SMITH, JOSHUA</a>	700 PARK RIDGE LN	NORTH FOND DU LAC	WI	888-720-2012	892.44	<a href="#">View Details</a>	<a href="#">View Map</a>

PLAYING 1-1 OF 1 RESULTS

[Withdraw this request](#)

SMITH, JOSHUA

Select Place of Service

- Select--
- OFFICE
- OUTPATIENT HOSPITAL
- AMBULATORY INFUSION CENTER
- AMBULATORY SURGICAL CENTER
- HOME

Select the place of service from the drop-down list

The place of service corresponds to the site where the chemotherapy will be administered



# Ordering and Dispensing Provider Summary

The screenshot displays a web application interface for an 'Order Request'. At the top, there is a navigation bar with a home icon, the text 'Order Request', and a 'Logout' link. Below this is a progress indicator showing steps 1 through 8, with step 4 highlighted. The main content area is divided into two sections. The first section, titled '85PARKER, MARY JANE', contains member information: Member # 3766387660, Date of Birth 1/1/1943, Date of service 8/30/2022, and Ordering Provider SMITH, JOSHUA. The second section, titled 'Selected Provider Summary', shows details for 'SMITH, JOSHUA', including address (700 PARK RIDGE LN, NORTH FOND DU LAC, WI 54937-1385), phone (888)-720-2012, fax (987)-654-6543, NPI 1740333780, and TIN 391678306. At the bottom, there are three buttons: 'Withdraw this request', 'Save and Exit', and 'Continue'.

Member Information	
Member #:	3766387660
Date of Birth:	1/1/1943
Date of service:	8/30/2022
Ordering Provider:	SMITH, JOSHUA

Selected Provider Summary		
Dispensing		
SMITH, JOSHUA		
700 PARK RIDGE LN NORTH FOND DU LAC, WI 54937-1385	Phone: (888)-720-2012 Fax: (987)-654-6543	NPI: 1740333780 TIN: 391678306

The Provider Summary displays the selected dispensing provider for confirmation.

User may update if needed before continuing with the case

Select “Continue” to proceed with the case



# Request Services

## Request Services

Some drugs used in a cancer treatment regimen require prior authorization by Carelon; other drugs may need review by other entities, such as pharmaceutical benefits management (PBM) companies or the health plan. For those drugs within a regimen NOT preauthorized by Carelon, clinical information is requested to determine Pathway eligibility.

### Search

**Drugs**

Partial Match - J

- J8999 | Abemaciclib (Verzenio) | PO
- J8999 | Abiraterone Acetate (Yonsa) | PO
- J8999 | Abiraterone Acetate (Zytiga) | PO
- J8999 | Acalab...
- J9354 | Ado-Tra...
- J8999 | Afatinib...
- J9015 | Aldesle...
- J8999 | Alectini...
- J8999 | Alpelisit...
- J8999 | Alpelisit...

**Regimen**

Show ▾

CONTINUE

## Request Services

Some drugs used in a cancer treatment regimen require prior authorization by Carelon; other drugs may need review by other entities, such as pharmaceutical benefits management (PBM) companies or the health plan. For those drugs within a regimen NOT preauthorized by Carelon, clinical information is requested to determine Pathway eligibility.

### Search

**Drugs**

**Regimen**

Partial Match - fol

- bev FOLFOX
- Rev. FOLFOX6

Register a Clinical Trial

CANCEL CONTINUE

ALL drugs being prescribed as part of the care plan should be entered

Search for individual drugs by:

- HCPCS Code (J-Code)
- Generic name
- Brand name

Clicking on the drug name in the results list adds it to the “Selected Drugs” list

Click “Continue” to proceed once all drugs have been entered



# Request Services | Delete Drugs

### Request Services


Some drugs used in a cancer treatment regimen require prior authorization by Carelon; other drugs may need review by other entities, such as pharmaceutical benefits management (PBM) companies or the health plan. For those drugs within a regimen NOT preauthorized by Carelon, clinical information is requested to determine Pathway eligibility.

#### Search



Drugs	Regimen
<input type="text" value="HCPCS, Generic or Brand Name"/>	<input type="text"/>

You may only request one Regimen for each authorization; however, you may add additional Drugs to the selected Regimen. To search for another Regimen, please remove the selected Regimen.

#### Selected Regimen

bevacizumab, fluorouracil, leucovorin and oxaliplatin (bev FOLFOX) J9263   Oxaliplatin (Oxaliplatin)   IV J9190   Fluorouracil (Fluorouracil)   IV Select Drugs: <input type="text" value="Select"/> <input type="text" value="Select"/>	 X Delete
---	--

#### Selected Drugs

J9299   Nivolumab (Opdivo)   IV	 X Delete
J2469   Palonosetron HCl (Aloxi)   IV	 X Delete

Drugs can be removed by clicking the “Delete” button located to the right of the drug name or regimen

Note: Clicking “Delete” next to the regimen will delete the entire regimen

# Request Services | Clinical Trial

**Request Services**

Some drugs used in a cancer treatment regimen require prior authorization by Carelon; other drugs may need review by other entities, such as pharmaceutical benefits management (PBM) companies or the health plan. For those drugs within a regimen NOT preauthorized by Carelon, clinical information is requested to determine Pathway eligibility.

Search

Drugs:  Regimen:

Register a Clinical Trial Show ▾

CANCEL CONTINUE

**Request Services**

Some drugs used in a cancer treatment regimen require prior authorization by Carelon; other drugs may need review by other entities, such as pharmaceutical benefits management (PBM) companies or the health plan. For those drugs within a regimen NOT preauthorized by Carelon, clinical information is requested to determine Pathway eligibility.

Search

Drugs:  Regimen:

Register a Clinical Trial Hide ▲

NCT Number:  VERIFY

I don't have the NCT Number

CANCEL

**Register a Clinical Trial** Hide ▲

Face Page URL \*

I don't have the NCT Number

CANCEL CONTINUE

## To Register a Clinical Trial:

- Click “Show” link to expand the field
- Enter NCT Number and click verify
  - Messaging will display if an NCT number is valid or invalid
- If NCT number is not known, select “I don’t have the NCT Number” check box
  - User can enter the Face Page URL

Click “Continue” to proceed



# Request Services | Biosimilars

## Request Services

Some drugs used in a cancer treatment regimen require prior authorization by Carelon; other drugs may need review by other entities, such as pharmaceutical benefits management (PBM) companies or the health plan. For those drugs within a regimen NOT preauthorized by Carelon, clinical information is requested to determine Pathway eligibility.

### Search

#### Drugs

HCPCS, Generic or Brand Name

#### Regimen

You may only request one Regimen for each authorization; however, you may add additional Drugs to the selected Regimen. To search for another Regimen, please remove the selected Regimen.

### Selected Regimen

bevacizumab, fluorouracil, leucovorin and oxaliplatin (bev FOLFOX)

✕ Delete

J9263 | Oxaliplatin (Oxaliplatin) | IV

J9190 | Fluorouracil (Fluorouracil) | IV

#### Select Drugs:

Select

Select

C9257 | Bevacizumab (Avastin) | IV

J9035 | Bevacizumab (Avastin) | IV

Q5107 | Bevacizumab-awwb (Mvasi) | IV

Q5118 | Bevacizumab-bvzr (Zirabev) | IV

✕ Delete

If a regimen contains drugs with biosimilars, the user will need to specify a biosimilar for each drug using the drop-down boxes

Confirm the selected HCPCS code is correct

Note: Only one Regimen can be requested at a time, however multiple drugs can be entered with or without a Regimen



# Request Services | Non-Preferred Drugs

## Request Services

Search

Drugs	Regimen
<input type="text" value="HCPCS, Generic or Brand Name"/>	<input type="text"/>

You may only request one Regimen for each authorization; however, you may add additional Drugs to the selected Regimen. To search for another Regimen, please remove the selected Regimen.

The use of a non-preferred product will require additional clinical review. The preferred product for this member is Trastuzumab (Trazimera) and Trastuzumab (Ogivri).

### Selected Regimen

docetaxel, carboplatin, trastuzumab and pertuzumab (TCHP) X Delete

J9045 | Carboplatin (Paraplatin) | IV

J9306 | Pertuzumab (Perjeta) | IV

If the health plan requires a preferred drug be used, a warning message will display to the user that indicates that additional clinical review will be required for the non-preferred drug

User can continue with the request without updating to the preferred product



# Request Services | All drugs requested

## Request Services

Search

**Drugs**

**Regimen**

You may only request one Regimen for each authorization; however, you may add additional Drugs to the selected Regimen. To search for another Regimen, please remove the selected Regimen.

**Selected Regimen**

Rituxan, Doxorubicin, Vincristine, Cyclophosphamide, Prednisone (R-CHOP) ✕ Delete

J9070 | Cyclophosphamide (Cytosan)  
J9000 | Doxorubicin (Adriamycin)  
J7510 | Prednisone (Pediapred)  
J9310 | Rituxumab (Rituxan)  
J9999 | Vincristine (Vincasar PFS)

**Selected Drugs**

J2505 | pegfilgrastim (Neulasta) ✕ Delete

CANCEL CONTINUE

After all drugs have been added to the request, verify selections and click “Continue”





# Clinical Scenario

**Clinical Scenario**

**Tumor Type\***  **ICD-10 Code\***

**Pathology \***  
*You can find this information in the pathology section of the electronic record*

**Stage\***

**Line of Treatm**

**CANCEL** **B**

---

**Clinical Scenario**

**Tumor Type\***  Clear **ICD-10 Code\***  Clear  
ICD-10 Code dropdown choices are related to tumor type: Colon

**Pathology \***  
*You can find this information in the pathology section of the electronic record*  
 Clear

**Stage \***  
 Clear

**Line of Treatment \***  
 Clear

**CLEAR ALL**

**CANCEL** **BACK** **SAVE & EXIT** **CONTINUE**

User will complete clinical scenario information

- All fields on this page are required
- Answers can be selected via the drop-down boxes depending on the tumor type
- User has the option to “**Clear**” a selected answer next to each field or “**Clear All**”
  - Clearing a field will clear answers in the subsequent fields
- Selections on this screen will modify any subsequent biomarker or clinical justification questions asked later in the process

Once all fields have been completed, user can click “**Save & Exit**” or “**Continue**” to proceed



# Biomarkers

**Biomarkers**

What are the biomarker (or other tests listed below) results?

**BRAF**  
 BRAF Mutated  BRAF Wild-Type  BRAF Unknown

**KRAS**  
 KRAS Mutated  KRAS Wild-Type  KRAS Unknown

**NRAS**  
 NRAS Mutated  NRAS Wild-Type  NRAS Unknown

**NTRK 1/2/3 gene fusion**  
 NTRK 1/2/3 Positive  NTRK 1/2/3 Negative  NTRK 1/2/3 Unknown

**CANCEL** **BACK** **SAVE & EXIT** **CONTINUE**

User will complete Biomarkers and other test results depending on the clinical scenario entered on the request.

- Select “Unknown” if biomarker value is unknown or not reported

Once all fields have been completed, user can click “Save & Exit” or “Continue” to proceed



# Performance Status

## Performance Status

**What is the patient's performance status?**

ECOG Scale  Karnofsky Scale

0 - Fully active, able to carry on all pre-disease performance without restriction

1 - Restricted in physically strenuous activity but ambulatory and able to carry out work of a light or sedentary nature

2 - Ambulatory and capable of all selfcare but unable to carry out any work activities; up and about more than 50% of waking hours

3 - Capable of only limited selfcare, confined to bed or chair more than 50% of waking hours

4 - Completely disabled and cannot carry on any selfcare; totally confined to a bed or chair

Unknown

---

**CANCEL** **BACK** **SAVE & EXIT** **CONTINUE**

User will enter performance status

- Select “Unknown” if performance status is unknown
- System defaults to “ECOG Scale”
- “Karnofsky Scale” is available if needed
- System will default to “Lansky Scale” for patients 18 and under

Once all fields have been completed, user can click “Save & Exit” or “Continue” to proceed



# Additional Biomarkers – Off Pathway Regimen

## Additional Biomarkers

Please enter additional biomarker (or other tests listed below) results for potential alternative regimens

**Microsatellite Instability/mismatch repair**

MSI/MMR Unknown    MSI/MMR Microsatellite Instability High (Msi-H)/Deficient Mismatch Repair (Dmmr)  
 MSI/MMR Microsatellite Stable Or Instability Low (Mss Or Msi-L)/Proficient Mismatch Repair (Pmmr)

**CANCEL**   **BACK**   **SAVE & EXIT**   **CONTINUE**

User will be prompted to enter additional biomarkers/other test results *if an Off-Pathway regimen is selected*

- Alternative regimens will display based on the additional biomarkers/other test results selected
- Select “Unknown” if Biomarker is unknown

Once all fields have been completed, user can click “**Save & Exit**” or “**Continue**” to proceed



# Alternative Regimens

**Alternative Regimens**

Based on your clinical scenario, please consider choosing an alternative Regimen by selecting a row in the table below and clicking 'Update Regimen' to continue.

Regimen Name (Nickname)	Required Biomarker(s)	Pathway Eligible
trastuzumab (trastuz)	5q- (5q minus), HER2	No

trastuzumab (trastuz)

SAVE & EXIT UPDATE REGIMEN

Based on patient's diagnosis and biomarker test results, the Alternative Regimens screen displays

- Eligible On-Pathway or Off-Pathway alternative regimens will be provided
- User can select an alternative regimen and click "Update Regimen"

OR

- User can continue with the current drugs and click "Continue with Current Drug Selection"

**Alternative Regimens**

**Selected Drugs**

You have requested drugs that may require additional review:

Q5107 | Bevacizumab-awwb (Mvasi) | IV  
 J9190 | Fluorouracil (Fluorouracil) | IV  
 J0640 | Leucovorin Calcium (Leucovorin Calcium) | IJ  
 J9263 | Oxaliplatin (Oxaliplatin) | IV

**Alternative Regimens**

Based on your clinical scenario, please consider choosing an alternative Regimen by selecting a row in the table below and clicking 'Update Regimen' to continue.

Regimen Name (Nickname)	Required Biomarker(s)	Pathway Eligible
Keytruda (Keytruda)	BRAF, KRAS, MSI/MMR, NRAS, NTRK 1/2/3	Yes

CANCEL BACK SAVE & EXIT CONTINUE WITH CURRENT DRUG SELECTION



# Dosing Schedule

**Dosing Schedule**

Enter height and weight to see doses as final doses

Height \*

Unit \*

Weight \*

Unit \*

[CREATE NEW DOSING SCHEDULE](#)

**Bev- FOLFOX6 - Pathway Ineligible** [Edit](#)

Drugs	Dose Amount	Final Dose	Route	Daily Frequency	Schedule	Cycle Length	Cycles
Bevacizumab (Avastin)	5.000 MG/KG	272.000 MG	IV	QD	D1	14 Days	Cycle 1
Oxaliplatin (Oxaliplatin)	85.000 MG/M2	129.200 MG			D1		
Fluorouracil (Fluorouracil)	400.000 MG/M2	608.000 MG			D1		
Fluorouracil (Fluorouracil)	1,200.000 MG/M2	1,824.000 MG			D1, 2		
Leucovorin Calcium (Leucovorin Calcium)	400.000 MG/M2	608.000 MG			D1		

[SELECT](#)

**QA DS bev FOLFOX - Pathway Ineligible** [Edit](#)

Drugs	Dose Amount	Final Dose	Route	Daily Frequency	Schedule	Cycle Length	Cycles
Bevacizumab (Avastin)	5.000 MG/KG	272.000 MG	IV	QD	D1	14 Days	Cycle 1
Oxaliplatin (Oxaliplatin)	85.000 MG/M2	129.200 MG			D1		
Fluorouracil (Fluorouracil)	400.000 MG/M2	608.000 MG			D1		
Fluorouracil (Fluorouracil)	1,200.000 MG/M2	1,824.000 MG			D1, 2		
Leucovorin Calcium (Leucovorin Calcium)	400.000 MG/M2	608.000 MG			D1		

[SELECT](#)

[CANCEL](#)

[BACK](#)

[SAVE & EXIT](#)

Multiple dosing schedules could display, and user can Select, Edit or Create a Dosing Schedule

User is required to enter Height and Weight

- Some drugs have weight-based doses
- System will calculate the flat dose
- Final Dose column will display once height and weight are entered



# Dosing Schedule | Create a New Dosing Schedule

## Dosing Schedule - Edit

Enter height and weight to see doses as final doses

<b>Height</b>	<b>Unit</b>	<b>Weight</b>	<b>Unit</b>
<input type="text" value="60"/>	<input type="text" value="inches"/>	<input type="text" value="130"/>	<input type="text" value="pounds"/>

### New Dosing Schedule - Pathway Ineligible

<b>Cycle Length Day(s) *</b>	<b>Number of Cycles *</b>
<input type="text"/>	<input type="text"/>

Drugs	Dose	On Cycle		
<input type="text" value="Trastuzumab (Herceptin)"/>	<i>No Doses exist for Drug/Cycle Length combination</i>	<input type="text" value="Select"/>	<input type="button" value="Edit"/>	<input type="button" value="Delete"/>
<input type="text" value="Carboplatin (Paraplatin)"/>	<i>No Doses exist for Drug/Cycle Length combination</i>	<input type="text" value="Select"/>	<input type="button" value="Edit"/>	<input type="button" value="Delete"/>
<input type="text" value="Pertuzumab (Perjeta)"/>	<i>No Doses exist for Drug/Cycle Length combination</i>	<input type="text" value="Select"/>	<input type="button" value="Edit"/>	<input type="button" value="Delete"/>
<input type="text" value="Docetaxel (DOCEtaxel)"/>	<i>No Doses exist for Drug/Cycle Length combination</i>	<input type="text" value="Select"/>	<input type="button" value="Edit"/>	<input type="button" value="Delete"/>
<a href="#">Add Drug Dose</a>				

If the drug dose you are looking for doesn't exist, you can create a new dose by [clicking here](#)

User can create a new drug dose if one does not match for the intended drug or regimen

Cycle length, number of cycles, dose, etc. will need to be entered

Select “Confirm Changes” once dosing has been entered



# Dosing Schedule | Custom Treatment

When a custom treatment is entered on a request:

- System will not identify any specific dosing related to the custom regimen entered
- User will need to enter a new dosing schedule and complete each field
- Custom regimens will display as “Pathway Ineligible”

Select “**Confirm Changes**” once dosing has been entered

Note: Custom treatments may pend for additional clinical review

## Dosing Schedule

Enter height and weight to see doses as final doses

Height	Unit	Weight	Unit
<input type="text"/>	inches	<input type="text"/>	pounds

The combination of drugs that have been requested do not have an associated dosing schedule. Please create a dosing schedule for the patient

### New Dosing Schedule - Pathway Ineligible

Cycle Length Day(s) *	Number of Cycles *		
<input type="text"/>	<input type="text"/>		
Drugs	Dose	On Cycle	
Select	No Doses exist for Drug/Cycle Length combination	Select	Edit
+ Add Drug Dose			

If the drug dose you are looking for doesn't exist, you can create a new dose by [clicking here](#)

+ Add a new Cycle

CONFIRM CHANGES





# Regimen | Pathway eligibility

TCH+P Q21 C1-6 Trastuzumab D1 Pert 840 LD/240 D1 C1-6 - Pathway Eligible ✎ Edit

Drugs	Dose Amount	Final Dose	Route	Daily Frequency	Schedule	Cycle Length	Cycles
Carboplatin (Paraplatin)	6.000 AUC	900.000 MG	IV	QD	D1	21 Days	Cycles 1-6
Docetaxel (DOCEtaxel)	75.000 MG/M2	118.500 MG			D1		
Trastuzumab (Herceptin)	8.000 MG/KG	472.000 MG			D1		
Trastuzumab (Herceptin)	6.000 MG/KG	354.000 MG			D1		
Trastuzumab (Herceptin)	420.000 MG	420.000 MG			D1		
Pertuzumab (Perjeta)	840.000 MG	840.000 MG			D1		
Pertuzumab (Perjeta)							
Pertuzumab (Perjeta)							

**SELECT**

TCHP\_O21 C1-6 + HP Maintenance C6- - Pathway Ineligible ✎ Edit

Drugs	Dose Amount	Final Dose	Route	Daily Frequency	Schedule	Cycle Length	Cycles
Carboplatin (Paraplatin)	6.000 AUC	900.000 MG	IV	QD	D1	21 Days	Cycles 1-18
Docetaxel (DOCEtaxel)	75.000 MG/M2	118.500 MG			D1		
Trastuzumab (Herceptin)	8.000 MG/KG	472.000 MG			D1		
Trastuzumab (Herceptin)	6.000 MG/KG	354.000 MG			D1		
Trastuzumab (Herceptin)	420.000 MG	420.000 MG			D1		
Pertuzumab (Perjeta)	840.000 MG	840.000 MG			D1		
Pertuzumab (Perjeta)							
Pertuzumab (Perjeta)							

**SELECT**

Pathway eligibility displays next to the regimen name

If dosing schedule is correct, click “Select” to continue



# Additional Clinical Information

Member Age is not Greater Than or Equal To 65 Years

CONFIRM

L > ECOG is not 3 - 4

CONFIRM

L > Which one of the following risk factors does the individual have?

- Prior chemotherapy or radiation therapy
- Persistent neutropenia
- Bone marrow involvement by tumor
- Recent surgery or open wounds
- Liver dysfunction (bilirubin greater than 2.0)
- Renal dysfunction (creatinine clearance less than 50)
- HIV infection
- Chronic immunosuppression in the post-transplant setting, including organ transplant
- None of the above
- Unknown

CONFIRM

You have reached the end of the questions. Click Continue to move to the next section.

CANCEL BACK SAVE & EXIT CONTINUE

Additional clinical questions may display when requesting supportive drugs

- User should “Confirm” the questions that display and select the appropriate responses

Once all fields have been completed, user can click “Save & Exit” or “Continue” to proceed



# Additional Clinical Information

## Additional Clinical Information

**Does the individual have adequate cardiac function? \***

Yes  
 No  
 Unknown

**Will cardiac function be monitored at regular intervals (e.g. every 3 months) during treatment? \***

Yes  
 No  
 Unknown

**Has the disease progressed on or after prior treatment that contained pertuzumab (Perjeta)? \***

Yes  
 No  
 Unknown

---

**CANCEL** **BACK** **SAVE & EXIT** **CONTINUE**

Additional clinical questions may display based on the clinical scenario entered on the request

- User should answer the questions accordingly

Once all questions have been completed, user can click “Save & Exit” or “Continue” to proceed



# Review and Continue

**Review & Continue**

Your request for J9045 | Carboplatin (Paraplatin), J9171 | Docetaxel (DOCEtaxel), J9306 | Pertuzumab (Perjeta), J9355 | Trastuzumab (Herceptin) does not require additional review at this time

Your request for J2506 | Pegfilgrastim (Neulasta) does not require additional review at this time

Request Summary

docetaxel, carboplatin, trastuzumab and pertuzumab (TCHP)

J9045 | Carboplatin (Paraplatin) | IV  
J9171 | Docetaxel (DOCEtaxel) | IV  
J9306 | Pertuzumab (Perjeta) | IV  
J9355 | Trastuzumab (Herceptin) | IV  
J2506 | Pegfilgrastim (Neulasta) | SC

Clinical Scenario [Edit](#)

**Review & Continue**

Your request for J9045 | Carboplatin (Paraplatin), J9171 | Docetaxel (DOCEtaxel), J9306 | Pertuzumab (Perjeta), J9355 | Trastuzumab (Herceptin) does not require additional review at this time

Your request for J2506 | Pegfilgrastim (Neulasta) does not require additional review at this time

Height 60 inches Weight 130 pounds

Drugs	Dose Amount	Final Dose	Route	Daily Frequency	Schedule	Cycle Length	Cycles
Carboplatin (Paraplatin)	6,000 AUC	900,000 MG			D1		
Docetaxel (DOCEtaxel)	75,000 MG/M2	118,500 MG			D1		
Trastuzumab (Herceptin)	6,000 MG/M2	472,000 MG	IV	QD	D1	21 Days	Cycles 1-6
Trastuzumab (Herceptin)	6,000 MG/M2	354,000 MG			D1		
Trastuzumab (Herceptin)	420,000 MG	420,000 MG			D1		
Pertuzumab (Perjeta)	840,000 MG	840,000 MG			D1		
Pertuzumab (Perjeta)							

Additional Clinical Information [Edit](#)

Has the disease progressed on or after prior treatment that contained pertuzumab (Perjeta)? No

Additional Clinical Information for WBC Growth Factor [Edit](#)

Rules Applied Member Age is not Greater Than or Equal To 85 Years, ECOG is not 3 - 4

Which one of the following risk factors does the individual have?

[CANCEL](#) [BACK](#) [SAVE & EXIT](#) [CONTINUE](#)

Messaging regarding the requested drugs will display at the top of the Review & Continue page

User will review a summary of each of the components of the request and can edit each section if needed via the “Edit” button on the right



# Review and Continue

**Biomarkers** Edit

Biomarkers HER2 Unknown

**Performance Status** Edit

Performance Status 0 ECOG

**Dosing Schedule** Edit

Height 60 inches Weight 130 pounds

Drugs	Dose Amount	Final Dose	Route	Daily Frequency	Schedule	Cycle Length	Cycles
Carboplatin (Paraplatin)	6,000 AUC	900,000 MG	IV	QD	D1	21 Days	Cycles 1-6
Docetaxel (DOCETAXEL)	75,000 MG/M2	118,500 MG					
Trastuzumab (Herceptin)	8,000 MG/KG	472,000 MG					
Trastuzumab (Herceptin)	6,000 MG/KG	354,000 MG					
Pertuzumab (Perjeta)	420,000 MG	420,000 MG					
Pertuzumab (Perjeta)	840,000 MG	840,000 MG					

**Additional Clinical Information** Edit

Has the disease progressed on or after prior treatment that contained pertuzumab? No

**Review & Continue**

Your request for 0645 | Carboplatin (Paraplatin) 09171 | Docetaxel (DOCETAXEL) 09306 | Pertuzumab (Perjeta) 09355 | Trastuzumab (Herceptin) does not require additional review at this time

Your request for 02006 | Pegfilgrastim (Neulasta) does not require additional review at this time

**Request Services** Edit

docetaxel, carboplatin, trastuzumab and pertuzumab (TCHP)

0645 | Carboplatin (Paraplatin) | IV  
 09171 | Docetaxel (DOCETAXEL) | IV  
 09306 | Pertuzumab (Perjeta) | IV  
 09355 | Trastuzumab (Herceptin) | IV

**Supportive Drug**

02006 | Pegfilgrastim (Neulasta) | SC

**Clinical Scenario** Edit

Tumor Type: Breast  
 Tumor Sub-Type: Invasive  
 Pathology: Inflammatory  
 Stage: Stage II  
 Line of Treatment: 2nd line

**Biomarkers** Edit

HER2 Unknown

**Performance Status** Edit

Performance Status: 0 ECOG

**Dosing Schedule** Edit

Height: 60 inches Weight: 130 pounds

Drugs	Dose Amount	Final Dose	Route	Daily Frequency	Schedule	Cycle Length	Cycles
Carboplatin (Paraplatin)	6,000 AUC	900,000 MG	IV	QD	D1	21 Days	Cycles 1-6
Docetaxel (DOCETAXEL)	75,000 MG/M2	118,500 MG					
Trastuzumab (Herceptin)	8,000 MG/KG	472,000 MG					
Trastuzumab (Herceptin)	6,000 MG/KG	354,000 MG					
Pertuzumab (Perjeta)	420,000 MG	420,000 MG					
Pertuzumab (Perjeta)	840,000 MG	840,000 MG					

**Additional Clinical Information** Edit

Has the disease progressed on or after prior treatment that contained pertuzumab (Perjeta)? No

**Additional Clinical Information for WBC Growth Factor** Edit

**Rules Applied:** Member Age is not Greater Than or Equal To 65 Years, ECOG is not 3-4

Which one of the following risk factors does the individual have?  
 Prior chemotherapy or radiation therapy

**CANCEL** **BACK** **SAVE & EXIT** **CONTINUE**

User will review a summary of each of the components of the request and can edit each section if needed via the “Edit” button on the right

When all the information is verified, submit the request by clicking the “Submit” button at the bottom of the page



# Order request preview

corelon. ProviderPortal.

Order Request Logout

Go to Homepage Submit This Request Save as PDF Print

Chart documentation may be uploaded using the "Attach File" button below. You may come back later to View Order History to edit any open drug(s). Select "Email" to share a link to this case with another authorized user. Email

corelon. ProviderPortal.

## Order Request Preview

**Case Status:**  
Has Not Been Submitted

**Health Plan:**

**Member Information:**

**Ordering Provider:**

**Dispensing Provider:** Edit

Modify clinical

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

Select the "Submit This Request" button to complete the order request



# Order request preview



ProviderPortal

## Order Request Preview

Case Status:

Has Not Been Submitted

Health Plan:

Member Information:



Ordering Provider:



Dispensing Provider: [Edit](#)



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.

### DRUG DETAILS:

ITEM #	HCPCS	DESCRIPTION	REQUEST STATUS
1	J9228	Ipilimumab	
Dose range: 204.12 mg		Treatments per	
Cycle length: 21 Days		Cycle: 1 visits	
Cycles/Duration: 1,2,3,4 cycles/ 84 Days		Total Treatments: 4	
Direction: 204.12 mg Day 1 QD Cycles 1,2,3,4		Total Billing Units: 820	
2	J9299	Nivolumab	
Dose range: 68.04 - 240 mg		Treatments per	
Cycle length: 21 Days		Cycle: 1 visits	
Cycles/Duration: 5,6,7,8,9,10 cycles/ 168 Days		Total Treatments: 10	
Direction: 240 mg Day 1 QD Cycles 5,6,7,8,9, 10; 68.04 mg Day 1 QD Cycles 1,2,3,4		Total Billing Units: 1716	

The Order Request Preview allows users to confirm the requested items prior to submission

Select the "Submit This Request" button to complete the order request



## Attach Clinical Information, *Optional*

**Diagnosis:** C43.10 Mal melan unsp eyelid,incl canthus

**Clinical Information:** [-]

**Disease:** Melanoma

**Pathology:** Melanoma

**Stage:** IV

**Treatment:** Second Line

**Performance Status:** 0 - Normal Activity (asymptomatic)

**Biomarkers:** Microsatellite Instability - Not reported;c-kit status - Not reported;NTRK Fusion - Not reported;BRAF status - Unknown;

**Justification Questions:**

Does the individual have unresectable or metastatic disease?True

Has the individual received prior treatment with another anti-PD-1 or anti-PD-L1 agent?False

Is the individual receiving immunosuppressive drug therapy for an autoimmune disease or chronic condition?False

**Drug Justification Questions:**

### ATTACHMENTS

(LIMIT: 20)

FILENAME	DOCUMENT TYPE	FILE SIZE (Max: 4 MB)	STATUS	ACTION
<p>If you have additional files, attach them now otherwise continue.</p>				

ATTACH FILE

Clinical information can be reviewed at the bottom of the Preview Summary

Should additional clinical need to be submitted, the **Attach File** option is located at the bottom of the Summary

Press “Attach File” and Browse for the record to attach





# Additional clinical information screen

Enter Additional Clinical Information Below

Please provide the Assessment and Plan information from the most recent Progress Note or call us before the end of the next business day at 8443771282

First Name REQUIRED

Last Name REQUIRED

Phone Ext

Email REQUIRED

If you have entered "other", "unknown", or "none of these apply" to any of the clinical questions, provide the additional clinical details supporting this request below. Also, provide any additional pertinent information to support a review of this procedure.

Additional clinical information: (Maximum 1800 characters) REQUIRED

Save Cancel

If a case does not auto approve, additional information may be included on the Additional clinical information screen

Note: Urgent cases submitted when the Call Center is closed must be indicated as such in the comments section; please also include a contact and phone number should a peer-to-peer be required



# Order request summary

This screenshot shows the 'Order Request' summary page for an authorized order. The page title is 'Order Request' and it includes a 'Logout' link. At the top, there are buttons for 'Withdraw this request', 'Begin Another Request', and 'Go to Homepage', along with 'Save as PDF' and 'Print' options. A notice states: 'Chart documentation may be uploaded using the "Attach File" button below. You may come back later to View Order History to edit any open drug(s). Select "Email" to share a link to this case with another authorized user.' The Caelon logo and 'ProviderPortal' are visible. The main heading is 'Order Request Summary'. A green box highlights the 'Order ID: 135487923' and 'Valid Date Range: 04/29/2022 - 10/14/2022' with a green checkmark and the word 'Authorized'. Below this, the 'Health Plan:' and 'Start Date: 04/29/2022' are listed, followed by the 'Pathway Eligible ID: 135487923'.

This order is not a guarantee of payment except when required by applicable law. When applicable law allows, payment is subject to the member's active enrollment, benefit limitation and other terms of the member's contract at the time of services provided.

**Member Information:** [Redacted]

**Ordering Provider:** [Redacted]

The drug administration information is being displayed for the convenience of the member. The information is not clinically reviewed. Please note that one or more of these drugs may also require a prior authorization. Please contact the number listed on the back of the member's ID card for more information. Currently not requiring a prior authorization may change to requiring a prior authorization.

Please call [Redacted] for all Urgent Requests.

This screenshot shows the 'Order Request' summary page for an 'In Progress' order. The page title is 'Order Request' and it includes a 'Logout' link. At the top, there are buttons for 'Begin Another Request' and 'Go to Homepage', along with 'Save as PDF' and 'Print' options. A yellow banner at the top reads: 'If the ordering provider would like to discuss this case with a Caelon Medical Benefits Management physician reviewer, contact Caelon.' A notice states: 'Chart documentation may be uploaded using the "Attach File" button below. You may come back later to View Order History to edit any open drug(s). Select "Email" to share a link to this case with another authorized user.' The Caelon logo and 'ProviderPortal' are visible. The main heading is 'Order Request Summary'. A yellow box highlights the 'Order ID: 135968163' and 'Anticipated Determination Date: 02/24/2023' with a yellow exclamation mark and the words 'In Progress'. Below this, the 'Health Plan:' and 'Start Date: 02/27/2023' are listed. At the bottom, there are sections for 'Member Information:', 'Ordering Provider:', and 'Dispensing Provider: Edit'.

Requests that meet clinical criteria will be approved upon case submission and will display as “Authorized”

Regimens that also satisfy Pathway criteria will receive a Pathway Eligible ID in addition to the Order ID

Requests that may require additional review will display as “In Progress”

Requests that included all non-managed drugs (AIM is not delegated to review), the banner will display “Completed” and all drug level details will state AIM Clinical Review not Required”



# 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. Specialty drugs currently not requiring a prior authorization may change to requiring a prior authorization in the future.

Please call [REDACTED] for all Urgent Requests.

## DRUG DETAILS:

ITEM #	HCPCS	DESCRIPTION	REQUEST STATUS
1	J9228	Ipilimumab	Authorized
Dose range:		204.12 mg	Treatments per
Cycle length:		21 Days	Cycle:
Cycles/Duration:		1,2,3,4 cycles/ 84 Days	Total Treatments:
Direction:		204.12 mg Day 1 QD Cycles 1,2,3,4	Total Billing Units:
			820
2	J9299	Nivolumab	Authorized
Dose range:		68.04 - 240 mg	Treatments per
Cycle length:		21 Days	Cycle:
Cycles/Duration:		5,6,7,8,9,10 cycles/ 168 Days	Total Treatments:
Direction:		240 mg Day 1 QD Cycles 5,6,7,8,9, 10; 68.04 mg Day 1 QD Cycles 1,2,3,4	Total Billing Units:
			1716

The Order Request Summary provides detailed drug-level review outcomes

Additional information regarding next steps is provided in the health plan specific disclaimer located above the requested items

- Configurable Status Options:**
- Authorized
  - Non-Authorized
  - Refer to Health Plan
  - Refer to PBM
  - AIM Clinical Review Not Required



# Education and Training Resources



# Provider Connections Blog

Provider Connections is our news blog for prior authorization staff to learn about the best ways to use the provider portal, and how to reduce unnecessary calls by using all available features.

Our goal is to provide tips and tricks to make your day easier and more efficient.

This site includes educational resources that will help enhance your knowledge of the portal, along with tips specific to our solutions, such as:

- ***ProviderPortal*** updates
- All Solution Tips and Tricks
- Links to quarterly Training Webinars for all solutions

<https://providers.carelonmedicalbenefitsmanagement.com/providerconnections/>



## Training webinars

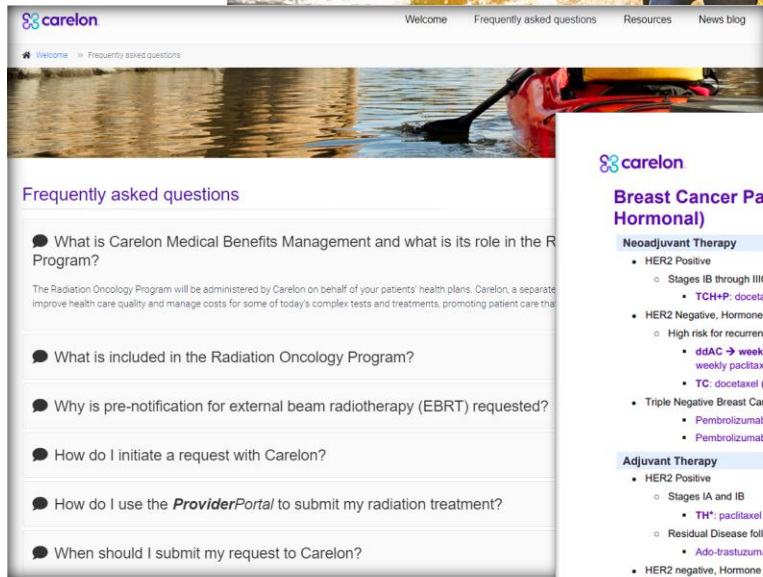
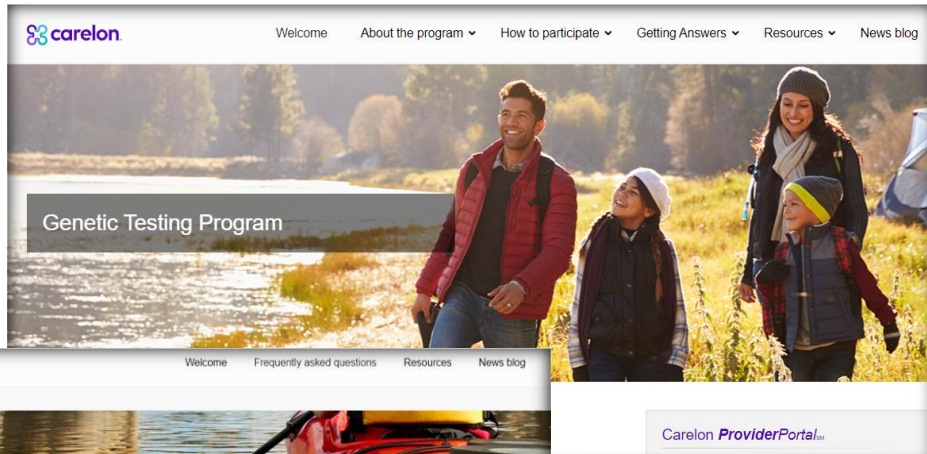
To help you gain new insights and refresh program information, we're hosting a series of live webinar and Q&A sessions that are designed for providers and office staff who request and/or submit prior authorization.

The live webinar sessions with Q&A will cover topics such as:

- How the program and preauthorization request process work
- Which members and services will require preauthorization
- Demonstration of ProviderPortal and how to enter order requests
- Share additional resources
- Q&A with our Solution leaders
- Share additional resources

We strongly encourage you and your practice to participate, even if you are already familiar with Carelon and the ProviderPortal.

# Provider Microsites



Providers can visit the microsite for:

- › Clinical guidelines development process
- › How to register on the ProviderPortal
- › How to enter an order request
- › Order request checklists
- › FAQs

Resources available at:

Genetic Testing:

[www.carelonproviders.com/geneticTesting](http://www.carelonproviders.com/geneticTesting)

Radiation Oncology:

[www.carelonproviders.com/radoncology](http://www.carelonproviders.com/radoncology)

Medical Oncology:

[www.carelonproviders.com/medicaloncology](http://www.carelonproviders.com/medicaloncology)



# Help Center

The screenshot shows the Help Center interface with a navigation bar at the top containing 'Home' and 'Log out'. Below the navigation bar is a 'Help Center' header with a question mark icon. A descriptive paragraph states: 'Help Center allows users to access training materials, solution microsites, CPT Codes that AIM manages which are covered by the health plans.' To the right of this text is a box titled 'Have Additional Questions?' with the text: 'Call the ProviderPortal Support Team at (800) 252-2021 for help using **ProviderPortal**'. The main content area features eight resource cards arranged in two columns:

- Tutorials**: Automated or self driven training modules for the main functional areas of the ProviderPortal.
- Provider Webinars**: Health Plan program overview and solution trainings.
- Sleep Management Code Lookup**: View a list of all the HCPCS Codes that are included in the selected health plan's Sleep Management program.
- Diagnostic Imaging Code Lookup**: View a list of all of the CPT Codes that are included in the selected health plan's Radiology Benefit Management program.
- Clinical Guidelines**: Clinical guidelines reference for each solution/program.
- Program Reference Materials**: Microsites with resources including FAQ's, worksheets, checklists and upcoming webinars.
- Surgical Procedures Code Lookup**: View a list of all of the CPT Codes that are included in the selected health plan's Surgical Procedures program.
- Radiation Therapy Code Lookup**: View a list of all of the CPT Codes that are included in the selected health plan's Radiation Therapy program.

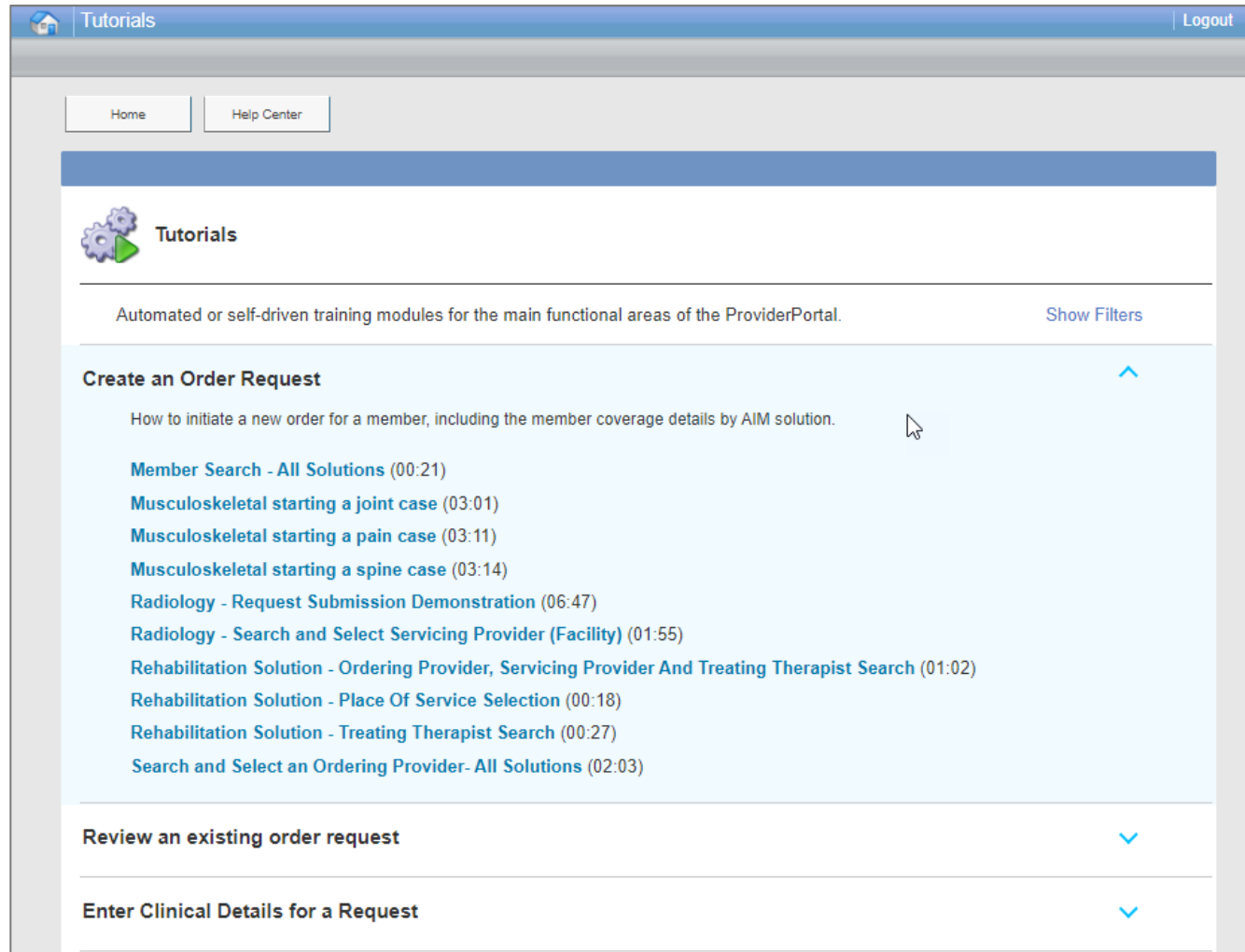
## Available in the Help Center

- Training Tutorials
- Cancer Treatment Pathways
- Clinical Guidelines
- CPT Code lookup





# Training Modules



The screenshot shows a web interface for training modules. At the top, there is a blue header with a home icon, the word "Tutorials", and a "Logout" link. Below the header are two buttons: "Home" and "Help Center". The main content area has a blue bar with a gear icon and the word "Tutorials". Below this is a description: "Automated or self-driven training modules for the main functional areas of the ProviderPortal." with a "Show Filters" link. The content is organized into three sections, each with a title and a list of modules:

- Create an Order Request** (with an upward arrow icon)
  - How to initiate a new order for a member, including the member coverage details by AIM solution.
  - [Member Search - All Solutions \(00:21\)](#)
  - [Musculoskeletal starting a joint case \(03:01\)](#)
  - [Musculoskeletal starting a pain case \(03:11\)](#)
  - [Musculoskeletal starting a spine case \(03:14\)](#)
  - [Radiology - Request Submission Demonstration \(06:47\)](#)
  - [Radiology - Search and Select Servicing Provider \(Facility\) \(01:55\)](#)
  - [Rehabilitation Solution - Ordering Provider, Servicing Provider And Treating Therapist Search \(01:02\)](#)
  - [Rehabilitation Solution - Place Of Service Selection \(00:18\)](#)
  - [Rehabilitation Solution - Treating Therapist Search \(00:27\)](#)
  - [Search and Select an Ordering Provider- All Solutions \(02:03\)](#)
- Review an existing order request** (with a downward arrow icon)
- Enter Clinical Details for a Request** (with a downward arrow icon)

Automated or self-driven training modules for the main functional areas of the ProviderPortal are available within the Help Center

