



MEDICAL ONCOLOGY PROGRAM UPDATE

Beginning on October 1, 2021, the 1199SEIU Benefit Funds Medical Oncology Prior Authorization Program will make changes to the oncology-based supportive drug request process. Supportive drugs requiring prior authorization will be listed either individually or in common combinations (regimens), where applicable. Providers will make selections from the product lists and complete a clinical questionnaire to confirm medical necessity. Multiple requests may be submitted and will be processed separately.

In addition, the 1199SEIU Benefit Funds will implement a preferred agent policy for certain drugs. Details on the policy can be found at <insert link to posting location>. Authorizations are valid only for the specific drug selected and are not interchangeable with other biosimilars, or with other preferred or non-preferred formulations.

1. **What do you need to know?**

- a. *There have been no changes to the drug list.*
- b. *Current process*
 - *Supportive drugs used as part of a cancer treatment have required prior authorization since April 16, 2016.*
 - *Authorizations are obtained through www.eviCore.com or by calling eviCore at (888) 910-1199.*
 - *Supportive drugs are selected from a list and an authorization is immediately issued for all requested drugs.*
- c. *New process*
 - *Requests will still be submitted through www.eviCore.com or by calling (888) 910-1199.*
 - *Supportive drugs requiring prior authorization will be listed. Some drugs will be listed individually, while some common combinations will be listed as a supportive regimen.*
 - *Providers will make a selection from the list of options and complete a clinical questionnaire to confirm medical necessity for the requested supportive drug/regimen.*
 - *Providers may submit multiple requests if needed (e.g., a growth factor and an antiemetic) and these will be processed separately.*
 - *An authorization or denial may be issued based on alignment with clinical criteria.*
 - *Detailed process descriptions can be found at <https://www.evicore.com/resources/healthplan/1199seiu-funds>.*
 - *For more information, please email clientservices@evicore.com.*

2. **Why are we making these changes?**

- a. *An analysis was completed across various cancer types and treatment regimens to compare the febrile neutropenia (FN) and emesis risks assigned by requesting providers to the National Comprehensive Cancer Network (NCCN) guideline-assigned risks. The findings concluded that MD-assigned FN and emesis risks were often incorrect when reviewed against NCCN risk guidance, resulting in unnecessary use and wasteful spending in both the MGF and antiemetics space. The use of our Clinical Decision Support (CDS) system and peer consultations supported by NCCN guidelines helps reduce unwarranted utilization and leads to better clinical outcomes.*
- b. *For more information, please visit <https://www.evicore.com/resources/healthplan/1199seiu-funds>.*