
General Information

What is the Cancer Support program?

Part of our Cancer Care Solutions portfolio, Cancer Support provides a way to optimize care for commercial members from early detection and diagnosis, through treatment, survivorship and the end of life. The program provides members with an end-to-end comprehensive cancer navigation and support solution.

Cancer Support, delivered through the Iris platform from OncoHealth, is a high-touch digital telehealth tool that provides personalized, cancer-focused support to members and their caregivers. It helps members navigate the emotional challenges and physical symptoms caused by cancer diagnosis and treatment. Members can access the program 24/7 through a digital app or by telephone.

Cancer Support guides members through a shared decision-making process, helps with coordinating care, provides emotional and clinical support, and connects them to financial resources to help remove barriers to care.

Features include:

- On-demand virtual oncology nurse visits through multichannel communication
- Access to oncology specialists – nurses, social workers, pharmacists, psychologists, dieticians
- Coordination between customer service teams and care managers at Blue Cross
- Peer mentors and a community forum offer empathy and support
- Self-reported symptom monitoring
- Decision support that uses evidence-based guidelines
- Personalized educational content and videos for members and their caregivers
- Advanced care planning assistance
- Navigation to financial support resources

Other elements of our *Cancer Care Solutions portfolio* include:

- Prevention and screening education campaigns
- Member copay assistance, high-cost drug affordability and pharmacy cost containment programs
- Expert medical opinion – 2nd MD
- Blue Cross Precision MedicineSM
- Evidence-based treatment guidance
- Support for serious illness (palliative care) – *future planned effort*

Which groups are eligible for the solution?

The program will be available as a buy-up for Blue Cross Blue Shield of Michigan and Blue Care Network commercial self-funded groups. It will be embedded for all BCBSM commercial fully insured groups and IBU. There are no group size requirements for self-funded groups for these solutions.

Which members are eligible for the solution?

Any member with cancer, or a cancer survivor, age 18 or older on a Blue Cross Blue Shield of Michigan or Blue Care Network Commercial plan.

Claims with a cancer-related ICD-10 diagnosis can be used to determine eligibility. Members can also self-refer. In addition, Blue Cross® care managers may refer a member for the Cancer Support program.

Caregivers can also access all the features of the program on behalf of the member (with the member's permission.)

Who is the vendor for this solution?

OncoHealth is our vendor. They provide cancer care navigation and support through the use of a digital telehealth platform called Iris™. The platform provides personalized, cancer-focused support to members and their caregivers. Members can also participate by telephone.



When will the solution be available?

Member launch is planned for January 1, 2024. For self-funded groups, a 90-day implementation lead time is required.

Is this solution available for both Blue Cross and BCN?

Yes, it's available for both Blue Cross and BCN commercial groups.

Are out-of-state members included? Is this a national program?

Yes, to both.

Does the Cancer Support program replace care provided by Blue Cross® in-network providers or change the member's medical benefits?

No, this program is meant to supplement, not replace, the care a member receives from in-network providers. OncoHealth's virtual providers offer coaching and support for members who are going through the ambiguity of a cancer diagnosis and treatment. Clinicians communicate with members' oncology teams and provide summary notes with each encounter. The Cancer Support Program doesn't change a member's medical benefits; cancer care and treatment benefits are still provided through Blue Cross.

How can providers learn more about the program?

Providers can visit irisoncology.com to learn more. Providers who wish to collaborate with OncoHealth teams can email iriscareteam@irisoncology.com or call 470-970-4747 to communicate about a member's clinical care.

Selling the Solution

Why would a group choose the Cancer Support program?

Customer groups have expressed strong interest in oncology cancer navigation and cancer screening. Clinical navigation was ranked as the second most important feature in an oncology offering by Michigan benefit decision-makers, with screening and prevention resources ranked fourth.

In addition -

- The 2022 Health Plan reported cancer as the number one driver of health care costs, surpassing musculoskeletal.
- Cancer impacts 1% to 2% of Blue Cross members but accounts for 11% to 12% of total spend (about 1.9 billion in 2019), increasing the burden on both customers and members.
- Group customer, CMCX and Voice of Customer quantitative and qualitative data indicate a strong need for — and preference to invest in — an oncology navigation and support solution, along with screening and prevention resources.
- This program addresses the pain points expressed by groups' employees touched by cancer, such as:
 - Receiving timely and expert clinical guidance on the best personalized treatment plan
 - Help navigating health benefits and reducing barriers to social determinants of health
 - Managing symptoms of physical and emotional health

A group would choose this solution because they want to provide their employees with support to navigate the emotional challenges and physical symptoms caused by cancer and cancer treatment. The Cancer Support program combines the critical elements of *education*,

access and communication for which members have expressed a need.

Our Cancer Support program uses data-driven insights to provide members with high-quality, clinically appropriate and convenient care, benefit guidance, and personalized care navigation through their entire cancer diagnosis and treatment journey. Value drivers include:

- Quality – improves access to cancer care and ensures quality support using evidence-based guidelines, clinical expertise and compassion
- Member experience – provides on-demand tools and resources for support, education and advocacy to reduce the ambiguity of a cancer diagnosis

Can groups purchase this solution off cycle?

Yes. Groups can add these solutions at any time throughout the year. A 90-day implementation time frame is required for any launches and that begins once the group has signed and returned the appropriate Letter of Understanding (LOU).

What is the pricing for the solution?

The Cancer Support Solution is \$165 per engaged member per month or PEMPM.

Are performance guarantees available for this solution?

No, performance guarantees aren't available for this program.

How does the claims-based billing work?

OncoHealth bills Blue Cross using a unique CPT code through claims. Blue Cross then passes the cost of the claim to the ASC group. This is the same process we use when a provider submits a claim for an ASC group to Blue Cross. Groups are billed for the claim when the member engages in the program over a two-month period.

What riders do we use for this solution?

None.

Is the solution compatible with other solutions?

Yes, it is compatible with *Oncology Value Management*, a prior authorization program delivered by Carelon Medical Benefits Management (formerly known as AIM). It's also compatible with *Expert Medical Opinion from 2nd MD*.

Is there coordination between Cancer Support and other programs such as 2nd MD?

Yes, there is some informal coordination between Cancer Support and other programs that a member may have, depending on their plan benefits. Members of the Blue Cross care management team will facilitate coordination. When they provide care management support to members, they are aware of the other programs available to the member through their plan and can help coordinate their care.

Here's how coordination with 2nd. MD would work: for fully insured members, a provider can reach out to a 2nd. MD doctor directly to request support on a case and members can contact 2nd. MD on their own. Members in self-funded groups that have purchased 2nd. MD have access to that program. Blue Cross care managers and customer service teams will know what programs the member has access to.

For members engaged in the Cancer Support program, OncoHealth specialists will be able to warm transfer them to Blue Cross service teams using the number on the back of their card. The Blue Cross service teams can help members use the "Find a Doctor" tool, or find a Blue Distinction Center. They can also explain how to use other benefits if available through their plans, such as 2nd. MD and Quartet.

Are there any HSA/HDHP restrictions?

No, because this program isn't part of the medical benefit and the member isn't required to meet the plan deductible to participate in the program.

Reporting

What type of reporting is available to groups?

ASC groups can receive quarterly, group-specific reports (as requested) that include information about engagement, demographics, member touchpoints, referrals and more.

Fully insured groups can receive reports with the same type of information. Groups with more than 300 members can receive group specific reporting quarterly and annually as requested. Reports for groups with fewer than 300 members will be based on book of business.

How do I request reports?

You can request reports through your Blue Cross account manager.

Member Experience

How will members learn about the program?

Fully insured and ASC members who are eligible for the program will be notified through various types of direct member communications from Blue Cross beginning in January 2024. In addition, an employer toolkit that includes a variety of different types of communications will be available at bcbsm.com/engage so employer groups can provide information about the program. Blue Cross will also conduct cancer screening and prevention health education outreach campaigns.

What does a member pay for this solution?

There is no out-of-pocket cost for the member. Explanation of benefits statements aren't generated for this program.

Are members who live in Canada eligible for this solution?

Yes, Canadian members are eligible.

How does a member sign up for the program and the Iris app?

Eligible members will need to download the Iris™ app from the Apple or Google Play store and register for an account. They can also sign up by calling OncoHealth at 1-844-912-4747. OncoHealth will use information we send them to determine member eligibility.

A member with limited or no access to the internet can also enroll and engage with Iris by phone. There is no single sign-on from the member portal on bcbsm.com or from the BCBSM mobile app.

How is engagement defined?

Engagement is defined as any interaction with the program during the month. This could be telehealth visits with an oncology specialist or a mental health therapist, asynchronous chat with a peer mentor, receiving cancer-specific content through the app or from a specialist, or tracking self-reported symptoms using the symptom tracker.

According to OncoHealth, typical member engagement metrics are that about 43% of participants meet with an oncology nurse or behavioral health therapist at least once a month with an average of 2.3 touchpoints. Sixty eight percent use a personalized, self-directed curriculum. Billing stops when a member doesn't engage in the program in any way, for more than two consecutive months. We have communications outreach planned to reengage these members.

What happens after a member engages with the app?

Once enrollment is complete, the member becomes a participant and will have access to the care team. The member can:

- Review cancer-specific content
- Schedule a behavioral health session with a licensed therapist
- Talk to an oncology nurse – the nurse may reach out to the member via chat message to welcome them
- Track their symptoms
- Connect with a peer mentor
- Connect with a behavioral health therapist – the therapist may send a personalized chat message

Will Iris™ care advocates be aware of group plan designs to steer members correctly?

Yes, we have the opportunity to share group-specific benefits and program steerage so the Iris™ care advocates would be aware and can reinforce this. They will steer to in-network providers and Blue Distinction Centers, and direct members to the Provider Search tool.

Additional questions? Contact your Blue Cross account manager.

OncoHealth is an independent company supporting Blue Cross Blue Shield of Michigan and Blue Care Network by providing cancer support services.

Carelon Medical Benefits Management is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to manage authorizations for select services.

2nd MD is an independent company contracted by Blue Cross Blue Shield of Michigan to provide medical second opinion services to BCBSM members.