

Directory of Pathway Tools

The following pages represent a consolidated view of the functionality offered from six of the major oncology pathway/clinical decision support software companies. The OMH Implementation Committee developed and distributed these 50 questions regarding functionality, support and pricing of pathway companies. Their feedback is reflected in the next 28 pages. This document is for reference purposes if you are considering a pathway solution for your team or if you are being requested to use a product provided by a payer.

To navigate between these pages click on the bolded company name in the left column below. Return to this listing by clicking on any “**HERE**” at the top of any company specific page.

Contact Carol Murtaugh, OMH Implementation Chairperson, at cmurtaugh@hotdocs.com or Bo Gamble at bgamble@coacancer.org if you have any questions on this resource document.

<p>Cardinal Health Specialty Solutions 7000 Cardinal Place Dublin, OH 43017 www.cardinalhealth.com/us/en/SpecialtySolutions 614-757-5000</p>	<p>Contact Michelle Gile VP Sales - Payer Solutions 614-757-5720 Michelle.gile@cardinalhealth.com</p>
<p>eviti, Inc. 1800 JFK Blvd., 9th Floor Philadelphia PA, 19103 www.eviti.com (215) 569-0656</p>	<p>Contact Susan Spalding Sr. V.P., Customer Implementation & Support (215) 569-0656 ext. 117 sspalding@eviti.com</p>
<p>McKesson Specialty Health 10101 Woodloch Forest The Woodlands, TX 77380 Web site being updated 1-800-482-6700</p>	<p>Contact Nate Gosse, Ph.D. Director, Innovative Practice Services 281-883-9799 nate.gosse@mckesson.com</p>
<p>New Century Health 80 William Street, Suite 270 Wellesley, MA 02481 www.newcenturyhealth.com 781-591-4902</p>	<p>Contact Stan Forston, MD Vice President-Strategic Programs 513-515-1432 SForstonmd@newcenturyhealth.com</p>
<p>Nucleus Pathways 3101 Gaylord Parkway Frisco, TX 75034 www.iononline.com/pathways</p>	<p>Contact Terri Poindexter Vice President, Payer Sales and Implementation 612.414.6992 Terri.Poindexter@iononline.com</p>
<p>Via Oncology, a division of D3 Oncology Solutions 5750 Centre Ave, Suite 500 Pittsburgh, PA 15206 http://www.viaoncology.com 412-365-0746</p>	<p>Contact Ed Rodgers Account Development Manager 412-204-0112 ed.rodgers@viaoncology.com</p>

Request for Information
 Pathway/Treatment Decision Support
Cardinal Health Specialty Solutions (Click [HERE](#) to return to Directory)

	Functionality	Y/N	Comments
1	Can be used free-standing without connection to EHR)	Y	
2	Standard interface for patient demographics		
	Varian		
	Altos		
	Mosaic		
	IKnowMed		
	Other_____	Y	PathWare™ contains an agent that parses a practice's 837 claims and 835 remittances to populate patient demographics. An upcoming release of PathWare™ will be compatible with any practice management system supporting ADT HL7 transactions.
	Other _____		
3	Standard interface for clinical information		
	Varian		
	Altos		
	Mosaic		
	IKnowMed		
	Other_____	N	An upcoming release of PathWare™ will support standard EHR interfaces required of Meaningful Use stage 2 certified EHRs. It will provide an inbound and outbound HL7 Consolidated Clinical Document Architecture (CCDA) interface.
	Other _____		
4	Displays cost information for evidenced based therapies	Y	PathWare™ includes ASP and has flexibility to be customized. This functionality is included in the tool, providing full cost information by drug, and by drug + E&M.
5	Allows for pricing options for pathway drug costs (ASP+2, or +4 or +6 etc.)	Y	PathWare™ includes ASP and has flexibility to be customized. This functionality is included in the tool, providing full cost information by drug, and by drug + E&M.
6	Displays practice reimbursement for evidenced based therapies	Y	PathWare™ displays practice reimbursement for evidence based therapies.
7	Allows for display of customized selection parameters (e.g. formulary status, physician-preferred regimens)	Y	PathWare™ is loaded with customized Cardinal Health Clinical Pathways (Clinical Pathways) per client need.
8	Produces compliance reporting by disease	Y	PathWare's focus of compliance measurement and reporting are on the top cancer types both on incidence and on cost. Examples are breast, colon, lung, prostate, myeloma, and supportive care.
9	Produces compliance reports by disease stage	Y	All data required to produce this report is available in PathWare™ and a simple query can be added to generate this view.

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10	Produces compliance reporting by practice physician	Y	
11	Produces compliance reporting for payers	Y	
12	Produces scheduled reports and distributes by email	Y	Reports are provided on the Specialty Solutions Portal for users to review. Email alerts are sent when reports are ready for viewing.
13	Integrated pre-certification requirements	Y	Any pre-certification requirements can be embedded based on client need. PathWare™ supports NCPDP and HIPAA EDI standard transactions and also supports a unique method of "gold carding" in which precertification numbers are sent to a PBM to expedite the claim when it is presented for real time adjudication.
	Clinical Content	Y/N	Comments
14	Checks compliance to NCCN Guidelines	Y	NCCN Guidelines are part of the criteria that defines the universe of PathWare's content library. Compliance is driven to the specific Clinical Pathways defined by the Steering Committee of oncologists associated with each Clinical Pathways program. Steering committees utilize sources such as like ASCO and NCCN compendia criteria. PathWare™ not only identifies appropriate treatment by disease and indication but it is customizable to meet medical policy criteria of a plan e.g., NCCN compendia criteria, inclusive of tumor-specific criteria e.g., genotype, node status, microarray profile, stage, etc. Additionally, PathWare™ matches supportive care based upon MASCC criteria for each regimen as well as identifying clinical alerts for black box and other toxicities, dose or schedule modifications for compromised performance status, renal and or hepatic impairment. Finally, all regimens have pre-populated adjunctive care for hypersensitivity and or diminishing adverse event frequency/severity e.g., calcium, magnesium, supplementation to limit neuropathy associated with Oxaliplatin.
15	Checks compliance to other pathways:	N	Compliance is driven to the specific Clinical Pathways defined by the Steering Committee of oncologists associated with each pathway program.
	Aetna	N/A	
	United	N/A	
	Other _____	N/A	
	Other _____	N/A	
	Locally-defined pathways _____	N/A	If practice part of a large network or large IDN that wants to create their own pathways or include a local clinical trial, we will work with the institution or group to create Clinical Pathways.
16	Checks compliance to specific NCCN Level of Evidence (e.g., Level 2B or above)	N	Currently the tool as not configured to provide this information but could be easily configured to provide this information for every protocol.

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17	Receives monthly updates of NCCN information	N	The PathWare™ clinical library is maintained real time with FDA indication updates, side effect alerts, or dosage changes are updated daily.
18	Displays NCCN Regimen Templates	Y	NCCN Guidelines are part of the criteria that defines the universe of the PathWare™ content library.
19	Displays NCCN references	Y	All Clinical Pathways are fully referenced and footnoted with the specific source(s) cited.
20	Checks availability of relevant clinical trials	Y	Selected clinical trial regimens can be added to the regimen list and if that clinical trial regiment is selected it would be classified as on pathway in order to support ongoing clinical research. If a Steering Committee chooses to include certain clinical trials into PathWare™, this would be added based on Subtype, Indication and Tumor Specific Criteria.
21	Considers patient cancer staging prior to determination	Y	
22	Considers patient performance status prior to determination	Y	
23	Considers line of therapy (if metastatic) for determination	Y	PathWare™ configuration tracks four lines of therapy in the metastatic setting, extending beyond four is a customizable feature. In addition, the PathWare™ tool incorporates logic that reflects treatment and associated risk according to line of therapy and prior treatment.
24	Checks compliance to diagnostic imaging pathway	N	As an oncology benefit management tool, imaging as it relates to stage and severity is inherent in PathWare™. However, PathWare™ is not a radiology benefit manager. Customizable solutions can easily be added to logic in the order entry and treatment approval process in order to be more inclusive of imaging guidelines for diagnosis, staging and surveillance.
25	Checks compliance to radiation oncology pathways	N	Radiation is inherent in some aspects of the tool as evidence-based standard of care may be prescriptive e.g., surgically ineligible stage I-III non-small cell lung cancer, stage I-III rectal cancer.
26	Checks compliance to Guidelines/Pathways for white supportive therapy	Y	
27	Checks compliance to Guidelines/Pathways red cell supportive therapy	N	Current REMS negates a need for this.
28	Checks compliance to Guidelines/Pathways for antiemetic supportive therapy	Y	Every drug and regimen is assigned emetogenic potential based on MASCC/NCCN criteria and then assigned antiemetic therapy per Pathway consensus.
29	Recourse / required steps for 'off-pathway' or 'off-guideline' selections	Y	If necessary, we could require prior authorization for off-pathways selection. Currently we require 80% compliance to Clinical Pathways, which allows for patient-specific needs.
	Support Services Available	Y/N	Comments

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30	Technical assistance including supportive documentation	Y	The Specialty Solutions Customer Success Call Center accepts technical and functional inquiries by phone and e-mail to promptly support our user community. The team has access to a broad range of technical, clinical, and management resources to ensure all inquiries are fully resolved. There are a variety of training options and materials available.
31	Clinical workflow assistance including clinical education for providers	Y	Extensive alerts, prompts and expanded content make PathWare™ a quality improvement tool, as much as it is a transactional or decision support tool. Narratives are also provided that review evidence with citations for each regimen in a disease-indication, specific manner.
32	Reimbursement / therapeutic interchange / value education for providers	Y	In addition to drug and disease content, every drug, regimen and protocol is cost out per MCR allowable so prescribers have ready reference for cost comparisons between equally effective regimens. Additionally, drug shortages are tracked and reported with pre-emptive redress by the Steering Committee to assign appropriate cost effective substitutions.
33	Clinical education for payers	Y	Clinical Pathways and PathWare™ deployment processes include educational programming for all contracted stakeholder groups as needed.
34	Value education for payers	Y	Clinical Pathways and PathWare™ deployment processes include educational programming for all contracted stakeholder groups as needed.
35	Payer contracting support for providers	Y	We will work with providers in regards to appropriate enhanced reimbursement for their participation and language necessary to include in a contract.
36	COA Oncology Medical Home program support for providers	Y	Clinical Pathways program supports key aspects of the COA Oncology Medical Home tenets. Specifically, the Clinical Pathways ensure optimized cancer care to produce quality outcomes through the use of evidenced-based treatment regimens through our support of community based oncology practices. Clinical Pathways enabled by PathWare™ can provide many of the quality and value measures outlined by the OMH Steering Committee.
37	Integrated insurance pre-authorization	Y	If the payer has an engaged and supported Clinical Pathways program, Specialty Solutions will load any pre-authorizations and medical policy requirements into PathWare™. Some payers do not require prior authorization if a drug is part of an on-pathway regimen.
38	Integrated insurance payment authorization	Y	Standard EDI capability exists in PathWare™, such as 270/271, 278, etc.
	Installations	Y/N	Comments
39	# Installations		Specialty Solutions is actively engaging our extensive base of Clinical Pathways customers to add the PathWare™ solution to active Clinical Pathways programs (9 plans, 16MM lives). In addition, PathWare™ has been deployed for one plan including 10 practices and 26 physicians.

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			Deployment to another 65 practices with 175 physicians is on the horizon.
40	Average practice size = # of providers		3-4
41	Smallest practice - # of providers		1
42	Largest practice - # of providers		7
43	# of different states with installations		We have one state currently with installations, and one state is in process for summer deployment.
	Pricing Structure	Y/N	Comments
44	Purchaser of your product:		
	Providers	N	Offering our Clinical Pathways programs enabled by PathWare™ directly to providers is anticipated in the foreseeable future.
	Payers	Y	We work collaboratively with Payers to design robust Clinical Pathways that are most effective when enabled by both the
	Payers and Providers		
	Other _____		
45	Approximate purchase price per provider		Our Clinical Pathways programs enabled by PathWare™ are customized for each client's needs. We would be happy to discuss designing a program with interested clients. Please contact Michelle Gile for more information.
46	Approximate price of one way interface (data received from EHR / PM System)		Future releases of PathWare™ will support standard inbound and outbound HL7 Consolidated Clinical Document Architecture (CCDA) interfaces. The total cost for interface deployment is a function of specific practice solutions involved and deployment parameters. These costs will be explored collaboratively with relevant stakeholders and clearly defined as part of the deployment planning process.
47	Approximate price of bidirectional interface (data received from EHR/PM System AND data sent to EHR/PM System)		Please see response to question #46 above.
48	Approximate incremental clinical staffing cost to support		Additional staffing to support will be negligible. Because of the intuitive PathWare™ design, new starts require only about 60 to 90 seconds to work through the setup and regimen selection process. Due to the operational efficiencies created by PathWare™, a "best practices" deployment may reduce overall staffing requirements.
49	Approximate incremental administrative staffing cost to support		Please see response to question #48 above.
50	Approximate total monthly use cost		Please see response to question #45 above.

Request for Information
 Pathway/Treatment Decision Support
Eviti (Click [HERE](#) to return to Directory)

	Functionality	Y/N	Comments
1	Can be used free-standing without connection to EHR)	Y	eviti is a web-based application and can be used from any device with Internet access and a supported browser, independent of an EHR.
2	Standard interface for patient demographics	Y	eviti's integration and connectivity services are publicly available and can be used to interface with a range of EHR solutions.
	Varian		
	Altos		
	Mosaic		
	IKnowMed		
	Other _____		
	Other _____		
3	Standard interface for clinical information	Y	eviti's integration and connectivity services are publicly available and can be used to interface with a range of EHR solutions.
	Varian		
	Altos		
	Mosaic		
	IKnowMed		
	Other _____		
	Other _____		
4	Displays cost information for evidenced based therapies	Y	Regimens contained in eviti's Evidence Based Medicine Library (EBML) are displayed with granular data pertaining to cost, outcomes, and toxicities to promote value-based decision making.
5	Allows for pricing options for pathway drug costs (ASP+2, or +4 or +6 etc.)	Y	Prices displayed in the eviti platform are ASP+6 with additional pricing options available through eviti Advisor Enterprise Edition, the practice administrative platform.
6	Displays practice reimbursement for evidenced based therapies	N	Prices displayed in eviti are intended for use as benchmarks, and do not currently reflect provider reimbursement.
7	Allows for display of customized selection parameters (e.g. formulary status, physician-preferred regimens)	Y	eviti can display, among other things, preferred regimens and formulary status.
8	Produces compliance reporting by disease	Y	eviti can generate detailed reports around any of the demographic or clinical data captured – including compliance by disease, stage, pathology, biomarkers, etc.
9	Produces compliance reports by disease stage	Y	(See previous answer.)
10	Produces compliance reporting by practice physician	Y	eviti Advisor Enterprise Edition generates reports on physician adherence to evidence based medicine, referral to clinical trials, and compliance with practice-specific prescribing standards.
11	Produces compliance reporting for	Y	eviti Connect allows for compliance reporting to

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	payers		participating payers.
12	Produces scheduled reports and distributes by email	Y	
13	Integrated pre-certification requirements	Y	eviti Connect facilitates payer pre-certification requirements. Prescribed treatments are electronically submitted for real-time approval.
	Clinical Content	Y/N	Comments
14	Checks compliance to NCCN Guidelines	Y	eviti displays treatment regimens that comply with NCCN Levels of Evidence of 1, 2A, and 2B.
15	Checks compliance to other pathways:	Y	eviti checks compliance with many other national consensus guidelines and authorities, including NCI, ASCO, FDA, ASH, ACR, ASTRO, and others.
	Aetna	Y	eviti can be configured to comply with any payer's plan language and/or pathways.
	United	Y	(See immediately above.)
	Other _____	Y	eviti can check compliance against a practice's or payer's preferred regimens.
	Other _____		
	Locally-defined pathways _____	Y	
16	Checks compliance to specific NCCN Level of Evidence (e.g., Level 2B or above)	Y	eviti includes treatments that are Category 1, 2A, and 2B in our EBM Library.
17	Receives monthly updates of NCCN information	Y	
18	Displays NCCN Regimen Templates	N	eviti displays the drug (or radiation) administration parameters for each Library regimen within the eviti suite of products
19	Displays NCCN references	Y	eviti displays appropriate supporting references for the treatment, outcomes, and toxicities for each Library regimen, including and beyond the references NCCN provides.
20	Checks availability of relevant clinical trials	Y	eviti has over 10,000 cancer clinical trials, including all federally registered trials. These trials may be searched using both diagnostic and geographic criteria.
21	Considers patient cancer staging prior to determination	Y	
22	Considers patient performance status prior to determination	Y	
23	Considers line of therapy (if metastatic) for determination	Y	
24	Checks compliance to diagnostic imaging pathway	Y	Because eviti considers biomarkers and tumor characteristics prior to determining evidence based status, it can be used to establish that appropriate diagnostic imaging has taken place. Full decision support and authorization functionality for imaging is planned for 2014.
25	Checks compliance to radiation oncology pathways	Y	

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26	Checks compliance to Guidelines/Pathways for white supportive therapy	Y	
27	Checks compliance to Guidelines/Pathways red cell supportive therapy	Y	
28	Checks compliance to Guidelines/Pathways for antiemetic supportive therapy	Y	
29	Recourse / required steps for 'off-pathway' or 'off-guideline' selections	Y	In eviti Connect, which is designed to facilitate prior authorization with participating payers, non-evidence based treatments are reviewed by eviti's clinical team and, if necessary, a peer-to peer conversation is conducted. The goal is to advocate for high-quality care on behalf of physicians and patients.
	Support Services Available	Y/N	Comments
30	Technical assistance including supportive documentation	Y	Training for any aspect of the eviti platform can be obtained through the eviti training portal at www.welcometoeviti.com where users can access videos and request literature and webinar sessions. Technical assistance can also be obtained by calling our customer support team.
31	Clinical workflow assistance including clinical education for providers	Y	In addition to the technical assistance described above, providers have access to clinical training and support through the same channels. Users may request literature and webinars which focus on clinical workflow and education. Our support team is backed by eviti's clinical staff, including oncology certified nurses and oncologists who are available to provide additional clinical guidance.
32	Reimbursement / therapeutic interchange / value education for providers	Y	eviti Advisor provides real-time education regarding regimen efficacy and cost effectiveness. Regimens can be viewed and compared side by side displaying granular detail on efficacy, toxicity, and cost for value-based clinical decision support and to facilitate value and cost conversations with patients.
33	Clinical education for payers	Y	eviti shows payers why treatments are evidence based and, therefore, reimbursable. The eviti clinical staff (oncology nurses, medical and radiation oncologists) advocate on behalf of the treating physicians to explain to payers what is standard of care in a proposed clinical trial or therapies when there is a medically justified variance. Providers and practices using eviti Connect no longer need be subject to unreimbursed time with payers.
34	Value education for payers	Y	eviti provides value education to payers and will work with them to identify ways of promoting value based care in their networks. Practices or payers can use eviti to established preferred regimens that reflect the highest value.
35	Payer contracting support for	Y	

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	providers		
36	COA Oncology Medical Home program support for providers	Y	Prescribed therapy for each patient can be shared in real time with the entire patient's healthcare team.
37	Integrated insurance pre-authorization	Y	Through eviti Connect, treatment plans may receive pre-authorization with participating payers. After submitting an evidence-based treatment plan, providers will receive an "eviti code" which is attached to the appropriate claim and signifies that the regimen being billed is evidence-based and complies with the payer's plan language.
38	Integrated insurance payment authorization		eviti Connect facilitates electronic preauthorization for improved payment assurance.
	Installations	Y/N	Comments
39	# Installations		Because eviti is a web-based application, it does not require local installation and may be accessed by any web-enabled device. Over 2,600 oncology practices have accessed eviti.
40	Average practice size = # of providers		eviti has been deployed nationwide across all practice types: major cancer centers; community hospitals; small and large private practices; in rural and urban settings. Because of this range, average practice size would not be a meaningful number.
41	Smallest practice - # of providers		The smallest practices utilizing eviti are one and two-physician practices.
42	Largest practice - # of providers		The largest are major cancer centers with more than 50 oncologists.
43	# of different states with installations		eviti is used by practices in all 50 states. Eviti requires no installation; it is accessed via the Internet.
	Pricing Structure	Y/N	Comments
44	Purchaser of your product:		
	Providers	N	eviti is available to individual physicians at no charge. Practices and institutions can license eviti Advisor Enterprise edition for a small fee to help manage care across their organizations.
	Payers	Y	eviti is licensed by payers on a per-member-per-month basis.
	Payers and Providers	Y	The eviti Advisor platform, which is designed to provide oncology decision support, is free to individual physicians. The eviti Connect platform, which provides expedited preauthorization, is licensed by payers for use by their provider network(s) and made available at no charge to practices. The eviti Advisor Enterprise Edition platform is licensed directly by practices and institutions for a small fee to manage care across their organizations.
	Other _____		
45	Approximate purchase price per provider		The use of eviti Advisor is free, and eviti Connect is also free to providers associated with a participating payer. eviti Advisor

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		Enterprise Edition, which provides data reporting, analytics, and configuration carries a per-physician monthly licensing fee of no more than \$100.
46	Approximate price of one way interface (data received from EHR / PM System)	The cost of creating a one-way interface will vary depending on several factors, including the work flow, required development, and the EHR itself. eviti represents a minimal percentage of any interface cost as our integration services are publicly available.
47	Approximate price of bidirectional interface (data received from EHR/PM System AND data sent to EHR/PM System)	The cost of creating a bidirectional interface will vary depending on several factors, including the work flow, required development, and the HER itself. eviti represents a minimal percentage of any interface cost as our integration services are publicly available.
48	Approximate incremental clinical staffing cost to support	There is no additional cost required to support the use of eviti in a practice. Using eviti Connect to pre-authorize treatments will decrease the work load demanded by existing preauthorization processes, provide increased assurance of payment, and decrease appeals and denials.
49	Approximate incremental administrative staffing cost to support	For eviti Advisor and eviti Connect, no additional administrative staffing cost is required. Beyond training and time spent reviewing metrics, eviti Advisor Enterprise Edition requires no additional administrative cost.
50	Approximate total monthly use cost	There is no monthly cost to individual physicians for use of eviti Advisor and eviti Connect. Access to eviti Advisor Enterprise Edition carries a small per-physician monthly licensing fee of no more than \$100.

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	Functionality	Y/N	Comments
1	Can be used free-standing without connection to EHR)	Y	Standalone version (not requiring EHR connectivity) can also be interfaced with practice management systems to import patient demographic data.
2	Standard interface for patient demographics	Y	Direct integration with EHR vendors for standard integrations includes patient demographic and clinical information. Contact McKesson Specialty Health (MSH) directly for information on your vendor.
	Varian		
	Altos		
	Mosaic		
	IKnowMed		
	Other _____		
	Other _____		
3	Standard interface for clinical information	Y	See question 2
	Varian		
	Altos		
	Mosaic		
	IKnowMed		
	Other _____		
	Other _____		
4	Displays cost information for evidenced based therapies	Y	
5	Allows for pricing options for pathway drug costs (ASP+2, or +4 or +6 etc.)	Y	Default information shown as ASP + 6, but can be customized
6	Displays practice reimbursement for evidenced based therapies	Y	Can integrate data from Regimen Profiler, to highlight reimbursement based on practice's fee schedules (as loaded in tool). Also supports practice-specified financial information as customizable feature.
7	Allows for display of customized selection parameters (e.g. formulary status, physician-preferred regimens)	Y	Practice-defined parameters can be implemented. Practice would coordinate with MSH for what it would like to have displayed as customized feature.
8	Produces compliance reporting by disease	Y	Reporting center offers aggregate and drill-down reporting filtered by multiple criteria.
9	Produces compliance reports by disease stage	Y	
10	Produces compliance reporting by practice physician	Y	
11	Produces compliance reporting for payers	Y	
12	Produces scheduled reports and distributes by email	Y	Practice can customize email distribution of desired reports during implementation or through custom report scheduler available within reporting center

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13	Integrated pre-certification requirements	Y	Can incorporate pre-certification requirements as customized field for each payer (see question 7) or through integration of Clear Coverage prior authorization technology (provides real-time authorization for participating payers).
	Clinical Content	Y/N	Comments
14	Checks compliance to NCCN Guidelines	Y	MSH partnership with NCCN includes licensing NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines).
15	Checks compliance to other pathways:	Y	Other 1: Value Pathways powered by NCCN -- MSH has partnered with NCCN to develop enhanced oncology pathways. NCCN Guidelines serve as the foundational evidence source and are supplemented by additional consideration of value. These pathways aim to help patients receive the highest-quality care with the best opportunity for positive outcomes, while also recognizing the importance of value in determining appropriate treatment options. Other 2: Practice-specific or payer-specific pathways can be maintained as a customized parameter for selection (see question 7 above)
	Aetna		
	United		
	Other _____		
	Other _____		
	Locally-defined pathways _____		
16	Checks compliance to specific NCCN Level of Evidence (e.g., Level 2B or above)	Y	Includes access to the NCCN Compendium for Drugs and Biologics. NCCN level of evidence (e.g. I, IIa, IIb) is displayed for all regimens on NCCN Guidelines or Value Pathways
17	Receives monthly updates of NCCN information	Y	All updates of NCCN Guidelines content are translated into the tool
18	Displays NCCN Regimen Templates	Y	Provides regimen details according to NCCN Regimen Templates. Regimen Templates are available as an additional content set (e.g. for populating your HER regimen library).
19	Displays NCCN references	Y	
20	Checks availability of relevant clinical trials	Y	Practice-specific clinical trials can be loaded. Practice tailored searching based on specific patient facts to be added in late 2013.
21	Considers patient cancer staging prior to determination	Y	
22	Considers patient performance status prior to determination	Y	
23	Considers line of therapy (if metastatic) for determination	Y	
24	Checks compliance to diagnostic imaging pathway	N	Additional content in development, including radiation therapy, diagnostic imaging, molecular diagnostics, surgery. Additional content modules to be available starting late 2013.
25	Checks compliance to radiation oncology pathways	Y	See question 24

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26	Checks compliance to Guidelines/Pathways for white supportive therapy	Y	Clear Value Plus lists the risks of neutropenia to support evidence-based decision-making regarding white blood cell supportive therapy for each regimen
27	Checks compliance to Guidelines/Pathways red cell supportive therapy	N	
28	Checks compliance to Guidelines/Pathways for antiemetic supportive therapy	Y	Clear Value Plus lists risks of emesis for each regimen to support evidence-based decision making regarding use of anti-emetic supportive care
29	Recourse / required steps for 'off-pathway' or 'off-guideline' selections	Y	Practice customizable exceptions process include structured data or free text collection for decisions not concordant with Guidelines or Pathways.
	Support Services Available	Y/N	Comments
30	Technical assistance including supportive documentation	Y	
31	Clinical workflow assistance including clinical education for providers	Y	Assistance and education provided during implementation.
32	Reimbursement / therapeutic interchange / value education for providers		These services can be provided by MSH's Innovative Practice Services -- a team of oncology specialists with expertise in optimizing reimbursement, payer strategy and negotiations, and operations.
33	Clinical education for payers	Y	Clinical education and training on basic pathways value concepts provided to participating payers. Detailed payer engagement and education on value proposition and pay for performance opportunities can be supported by Innovative Practice Services team.
34	Value education for payers	Y	See question 33.
35	Payer contracting support for providers	Y	See question 32. Services specific to value-based reimbursement, payer contracting strategy, and negotiation support are available through Innovative Practice Services.
36	COA Oncology Medical Home program support for providers	Y	Select measures of the COA Oncology Medical Home program can be directly reported from Clear Value Plus reporting center. Integration with COA OMH data registry and reporting center to be completed in 2013.
37	Integrated insurance pre-authorization	Y	Clear Value Plus integrates with McKesson's Clear Coverage program, a web-based solution that supports prior authorization of medical services spanning the spectrum of cancer care (e.g. including imaging, surgical procedures). Clear Coverage can provide oncology practices with transparency into payer's coverage, eligibility, and evidence-based clinical appropriateness of oncology services. Configurable clinical and business rules fully automate the authorization process with participating payers, and provides centralized prior authorization support for non-participating payers.

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 Pathway/Treatment Decision Support
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38	Integrated insurance payment authorization	N	Not currently supported, but technologically feasible. Integrated payment authorization could be supported through discussions with participating payers.
	Installations	Comments	
39	# Installations	Additional information available upon request.	
40	Average practice size = # of providers	Additional information available upon request.	
41	Smallest practice - # of providers	Additional information available upon request.	
42	Largest practice - # of providers	Additional information available upon request.	
43	# of different states with installations	Additional information available upon request.	
	Pricing Structure	Y/N	Comments
44	Purchaser of your product:	Y	Practices are the primary users and purchasers of the Clear Value Plus technology suite. In select scenarios, payers may directly purchase the tool for provider networks to participate in pay for performance programs. In select scenarios, payers and providers can collaborate to establish a shared purchase structures.
	Providers		
	Payers		
	Payers and Providers		
	Other _____		
45	Approximate purchase price per provider	Customer-specific offerings and pricing information are available upon request. Please contact MSH for details.	
46	Approximate price of one way interface (data received from EHR / PM System)	Customer-specific offerings and pricing information are available upon request. Please contact MSH for details.	
47	Approximate price of bidirectional interface (data received from EHR/PM System AND data sent to EHR/PM System)	Customer-specific offerings and pricing information are available upon request. Please contact MSH for details.	
48	Approximate incremental clinical staffing cost to support	\$0 – Clear Value Plus is designed to fit within clinical workflows, and support data capture without incremental effort.	
49	Approximate incremental administrative staffing cost to support	\$0 – Clear Value Plus is designed to fit within clinical workflows, and support data capture without incremental effort.	
50	Approximate total monthly use cost	Total monthly cost is equal to the monthly licensing fees.	

Request for Information
 Pathway/Treatment Decision Support
New Century Health (Click [HERE](#) to return to Directory)

	Functionality	Y/N	Comments
1	Can be used free-standing without connection to EHR)		Our pathway-driven prior authorization/decision support platform is a core feature of a comprehensive oncology quality and cost management program.
2	Standard interface for patient demographics		
	Varian	N	
	Altos	N	
	Mosaic	N	
	IKnowMed	N	
	Other_____	Y	The technology platform is easily configured to meet patient demographic EHR interfaces and data structure requirements.
	Other _____		
3	Standard interface for clinical information		
	Varian	N	
	Altos	N	
	Mosaic	N	
	IKnowMed	N	
	Other_____	Y	The technology platform is easily configured to meet clinical information EHR interfaces and data structure requirements.
	Other _____		
4	Displays cost information for evidenced based therapies	N	The system contains cost information for evidence-based , preferred pathway regimens.
5	Allows for pricing options for pathway drug costs (ASP+2, or +4 or +6 etc.)	N	The system has the capability to allow for different ASP pricing options.
6	Displays practice reimbursement for evidenced based therapies	N	
7	Allows for display of customized selection parameters (e.g. formulary status, physician-preferred regimens)	Y	Display of medication selection options includes: (1) New Century Health Preferred Pathway regimens; (2) Compendia-based regimens; (3) Payer policy; (4) Customized, physician-determined regimens
8	Produces compliance reporting by disease	Y	Reported quarterly
9	Produces compliance reports by disease stage	Y	Reported quarterly
10	Produces compliance reporting by practice physician	Y	Reported quarterly
11	Produces compliance reporting for payers	Y	Reported quarterly
12	Produces scheduled reports and distributes by email	Y	
13	Integrated pre-certification requirements	Y	The system generates automatic pre-authorization approvals for compendia-based, complete treatment requests.

Request for Information
 Pathway/Treatment Decision Support
New Century Health (Click [HERE](#) to return to Directory)

	Clinical Content	Y/N	Comments
14	Checks compliance to NCCN Guidelines	Y	We are a licensee of the NCCN Drugs & Biologics Compendium & NCCN Biomarkers Compendium.
15	Checks compliance to other pathways:		
	Aetna	N	Aetna is not a client, so their pathways are not yet incorporated into our platform.
	United	N	United is not a client, so their pathways yet are not incorporated into our platform.
	Other <u>National, Multi-state payers</u>	Y	Our pathways reflect payer input and are developed under the guidance of a national scientific advisory board.
	Other <u>Regional payers</u>	Y	Our pathways reflect payer input and are developed under the guidance of a national scientific advisory board.
	Locally-defined pathways _____	Y	Up to 15 % of our pathway content is from community practices.
16	Checks compliance to specific NCCN Level of Evidence (e.g., Level 2B or above)	Y	
17	Receives monthly updates of NCCN information	Y	
18	Displays NCCN Regimen Templates	N	
19	Displays NCCN references	N	
20	Checks availability of relevant clinical trials	TBD	This functionality is in development and is scheduled for Q2 2013 deployment
21	Considers patient cancer staging prior to determination	Y	
22	Considers patient performance status prior to determination	Y	
23	Considers line of therapy (if metastatic) for determination	Y	
24	Checks compliance to diagnostic imaging pathway	N	
25	Checks compliance to radiation oncology pathways	N	
26	Checks compliance to Guidelines/Pathways for white supportive therapy	Y	
27	Checks compliance to Guidelines/Pathways red cell supportive therapy	Y	
28	Checks compliance to Guidelines/Pathways for antiemetic supportive therapy	Y	
29	Recourse / required steps for 'off-pathway' or 'off-guideline' selections	Y	As appropriate, further clinical review may require submission of lab/test/biomarker data and/or peer-to-peer consultation.

Request for Information
 Pathway/Treatment Decision Support
New Century Health (Click [HERE](#) to return to Directory)

	Support Services Available	Y/N	Comments
30	Technical assistance including supportive documentation	Y	
31	Clinical workflow assistance including clinical education for providers	Y	
32	Reimbursement / therapeutic interchange / value education for providers	Y	
33	Clinical education for payers	Y	
34	Value education for payers	Y	
35	Payer contracting support for providers	Y	
36	COA Oncology Medical Home program support for providers	Y	
37	Integrated insurance pre-authorization	Y	
38	Integrated insurance payment authorization	Y	Our system's authorization of the treatment is coordinated with the health plan's provider reimbursement process.
	Installations		Comments
39	# Installations		Over 2,100 providers
40	Average practice size = # of providers		6
41	Smallest practice - # of providers		Confidential
42	Largest practice - # of providers		Confidential
43	# of different states with installations		15
	Pricing Structure	Y/N	Comments
44	Purchaser of your product:		
	Providers	N	Providers contracted with our clients receive free access to our system
	Payers	Y	Dependent upon scope of oncology quality and cost management services.
	Payers and Providers	NA	See above
	Other _____		
45	Approximate purchase price per provider		\$ zero. Providers contracted with our clients receive free access
46	Approximate price of one way interface (data received from EHR / PM System)		Marginal: approximately 95% of all chemotherapy treatment requests are submitted for prior authorization via the internet.
47	Approximate price of bidirectional interface (data received from EHR/PM System AND data sent to EHR/PM System)		Marginal: approximately 95% of all chemotherapy treatment requests are submitted for prior authorization via the internet

Request for Information
Pathway/Treatment Decision Support

New Century Health (Click [HERE](#) to return to Directory)

48	Approximate incremental clinical staffing cost to support	None: Our platform reduces practice administrative burden.
49	Approximate incremental administrative staffing cost to support	None: Our platform reduces practice administrative burden.
50	Approximate total monthly use cost	Marginal

Request for Information
 Pathway/Treatment Decision Support
Nucleus Pathways (Click [HERE](#) to return to Directory)

	Functionality	Y/N	Comments
1	Can be used free-standing without connection to EHR)	Y	Utilizes report from an EMR
2	Standard interface for patient demographics		
	Varian	Y	
	Altos	Y	
	Mosaic	Y	
	IKnowMed	Y	If a suitable report can be produced
	Other_____	Y	Can be done with any EMR if a suitable report can be produced
	Other _____		
3	Standard interface for clinical information		
	Varian	Y	
	Altos	Y	
	Mosaic	Y	
	IKnowMed	Y	If a suitable report can be produced
	Other_____	Y	Can be done with any EMR if a suitable report can be produced
	Other _____		
4	Displays cost information for evidenced based therapies	N	Can be coupled with Protocol Analyzer
5	Allows for pricing options for pathway drug costs (ASP+2, or +4 or +6 etc.)	N	Can be coupled with Protocol Analyzer
6	Displays practice reimbursement for evidenced based therapies	N	Can be coupled with Protocol Analyzer
7	Allows for display of customized selection parameters (e.g. formulary status, physician-preferred regimens)	Y	Utilizes current EMR/CPOE parameters
8	Produces compliance reporting by disease	Y	
9	Produces compliance reports by disease stage	Y	
10	Produces compliance reporting by practice physician	Y	
11	Produces compliance reporting for payers	Y	
12	Produces scheduled reports and distributes by email	Y	Distributed in ION Solutions Reporting Portal if contain PHI
13	Integrated pre-certification requirements	N	

Request for Information
Pathway/Treatment Decision Support

Nucleus Pathways (Click [HERE](#) to return to Directory)

	Clinical Content	Y/N	Comments
14	Checks compliance to NCCN Guidelines	Y	Compliant with any practice-provided content, subject to appropriate content licensure by practice
15	Checks compliance to other pathways:		
	Aetna	Y	
	United	Y	
	Other <u>ION Solutions National Physician Network Pathways</u>	Y	Physician developed, compendia approved
	Other _____	Y	Compliant with any practice-provided content, subject to appropriate content licensure by practice
	Locally-defined pathways _____	Y	Compliant with any practice-provided content, subject to appropriate content licensure by practice
16	Checks compliance to specific NCCN Level of Evidence (e.g., Level 2B or above)	Y	Compliant with any practice-provided content, subject to appropriate content licensure by practice
17	Receives monthly updates of NCCN information	N/A	Compliant with any practice-provided content, subject to appropriate content licensure by practice; done through practice current EMR/CPOE
18	Displays NCCN Regimen Templates	N/A	Compliant with any practice-provided content, subject to appropriate content licensure by practice; done through practice current EMR/CPOE
19	Displays NCCN references	N/A	Compliant with any practice-provided content, subject to appropriate content licensure by practice; done through practice current EMR/CPOE
20	Checks availability of relevant clinical trials	N/A	Compliant with any practice-provided content, subject to appropriate content licensure by practice; done through practice current EMR/CPOE
21	Considers patient cancer staging prior to determination	Y	
22	Considers patient performance status prior to determination	Y	
23	Considers line of therapy (if metastatic) for determination	Y	
24	Checks compliance to diagnostic imaging pathway	N	Can be added if there is a practice need
25	Checks compliance to radiation oncology pathways	N	Can be added if there is a practice need
26	Checks compliance to Guidelines/Pathways for white supportive therapy	Y	
27	Checks compliance to Guidelines/Pathways red cell supportive therapy	Y	
28	Checks compliance to Guidelines/Pathways for	N	Can be added if there is a practice need

Request for Information
Pathway/Treatment Decision Support

Nucleus Pathways (Click [HERE](#) to return to Directory)

	antiemetic supportive therapy		
29	Recourse / required steps for 'off-pathway' or 'off-guideline' selections	Y	Provider given opportunity to explain why they went off-pathway
	Support Services Available	Y/N	Comments
30	Technical assistance including supportive documentation	Y	
31	Clinical workflow assistance including clinical education for providers	Y	
32	Reimbursement / therapeutic interchange / value education for providers	Y	
33	Clinical education for payers	Y	
34	Value education for payers	Y	
35	Payer contracting support for providers	Y	
36	COA Oncology Medical Home program support for providers	Y	
37	Integrated insurance pre-authorization	N	
38	Integrated insurance payment authorization	N	
	Installations	Y/N	Comments
39	# Installations		4
40	Average practice size = # of providers		7
41	Smallest practice - # of providers		4
42	Largest practice - # of providers		9
43	# of different states with installations		1
	Pricing Structure	Y/N	Comments
44	Purchaser of your product:		
	Providers	Y	
	Payers	Y	
	Payers and Providers	Y	
	Other _____	Y	
45	Approximate purchase price per provider	Contact ION Solutions for pricing	
46	Approximate price of one way interface (data received from EHR / PM System)	\$0 - Included in price	
47	Approximate price of bidirectional	N/A	

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Pathway/Treatment Decision Support

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	interface (data received from EHR/PM System AND data sent to EHR/PM System)	
48	Approximate incremental clinical staffing cost to support	\$0 - utilizes current process
49	Approximate incremental administrative staffing cost to support	\$0 - utilizes current process
50	Approximate total monthly use cost	Contact ION Solutions for pricing

Request for Information
 Pathway/Treatment Decision Support
Via Oncology Clinical Pathways (Click [HERE](#) to return to Directory)

	Functionality	Y/N	Comments
1	Can be used free-standing without connection to EHR)	Y	2 options: (1) functionality for manual registration and scheduling is available for those desiring adherence reporting and patient completeness. Alternatively, licensing of Via Pathways clinical content ONLY is available.
2	Standard interface for patient demographics	Y	Varian, Altos, Mosaiq, Cerner, EPIC, Allscripts, any HL7 enabled PM/EHR
	Varian		
	Altos		
	Mosaic		
	IKnowMed		
	Other _____		
	Other _____		
3	Standard interface for clinical information	Y	Clinical Note Sent from Pathways to Patient Chart in any HL7 enabled EHR; for Aria and Epic Beacon, also able to filter and identify corresponding care plan.
	Varian		
	Altos		
	Mosaic		
	IKnowMed		
	Other _____		
	Other _____		
4	Displays cost information for evidenced based therapies	Y	Costs for the Via Pathways are evaluating from the perspective of the payer/patient. All patient/payer costs assumed at ASP+6 to create a normalized comparison.
5	Allows for pricing options for pathway drug costs (ASP+2, or +4 or +6 etc.)	N	Costs for the Via Pathways are evaluating from the perspective of the payer/patient. All patient/payer costs assumed at ASP+6 to create a normalized comparison.
6	Displays practice reimbursement for evidenced based therapies	N	Costs for the Via Pathways are evaluating from the perspective of the payer/patient. All patient/payer costs assumed at ASP+6 to create a normalized comparison.
7	Allows for display of customized selection parameters (e.g. formulary status, physician-preferred regimens)	Y	Allow practices to customize pathways for local preferences, although to date (due in large part to our inclusive disease committee process), none have felt the need to do so.
8	Produces compliance reporting by disease	Y	Standard monthly report available through customer reporting portal
9	Produces compliance reports by disease stage	Y	Standard monthly report available through customer reporting portal
10	Produces compliance reporting by practice physician	Y	Standard monthly report available through customer reporting portal
11	Produces compliance reporting for payers	Y	Standard monthly report available through customer reporting portal
12	Produces scheduled reports and distributes by email	Y	Automated distribution via email to each individual physician user
13	Integrated pre-certification	N	Pre-certification staff optionally may receive a document with

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Via Oncology Clinical Pathways (Click [HERE](#) to return to Directory)

	requirements		the detailed patient presentation and evidence basis for each physician selection in Via Pathways. Structured text to populate EDI standard for prior auth (277) is available.
	Clinical Content	Y/N	
14	Checks compliance to NCCN Guidelines	N	Via Pathways are created in processes that do not rely on NCCN. Standard operating procedures are in place to evaluate all publicly available data. We are not aware of any areas where our pathway recommendations are not also recommendations within the NCCN guidelines.
15	Checks compliance to other pathways:		One Via Pathways customer (Texas) is participating in United Episode rate pilot as one of five sites.
	Aetna	N	
	United	Y	
	Other _____		
	Other _____		
	Locally-defined pathways _____		
16	Checks compliance to specific NCCN Level of Evidence (e.g., Level 2B or above)	N	NCCN information is the proprietary intellectual property of NCCN. See answer to 14.
17	Receives monthly updates of NCCN information	N	NCCN information is the proprietary intellectual property of NCCN. See answer to 14.
18	Displays NCCN Regimen Templates	N	NCCN information is the proprietary intellectual property of NCCN. We develop and maintain proprietary Via Pathways Regimen Templates.
19	Displays NCCN references	N	NCCN information is the proprietary intellectual property of NCCN. Via Pathways provide links to cited literature on PubMed and other journals . Evidence Review Documents are maintained for every state and stage of disease.
20	Checks availability of relevant clinical trials	Y	Site specific clinical trials are presented at the applicable state and stage of disease as a selectable option. They are shown as the first option, ahead of standard of care options. Selection of Clinical Trial is always counted as "On Pathway" in reporting. Capture of reasons not accrued to trial are collected when trials not selected and reported back to the local research department.
21	Considers patient cancer staging prior to determination	Y	In addition to staging, the use of evidence based biomarkers are recommended throughout the Via Pathways and the documented results drive the decision support to certain therapies.
22	Considers patient performance status prior to determination	Y	
23	Considers line of therapy (if metastatic) for determination	Y	
24	Checks compliance to diagnostic imaging pathway	N	Via Pathways provide decision support guidance but we do not capture compliance at this time.

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 Pathway/Treatment Decision Support
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25	Checks compliance to radiation oncology pathways	Y	Separate detailed content for Radiation Oncology within the same Via Pathways Portal interface.
26	Checks compliance to Guidelines/Pathways for white supportive therapy	N	Recommendations are built into all regimens where WBC growth factor should be used but actual compliance to use in other less myelosuppressive regimens is not measured.
27	Checks compliance to Guidelines/Pathways red cell supportive therapy	N	
28	Checks compliance to Guidelines/Pathways for antiemetic supportive therapy	N	Recommendations built into all Via Pathways for antiemetics/premedications but we do not capture compliance.
29	Recourse / required steps for 'off-pathway' or 'off-guideline' selections	Y	Via Pathways require the capture of a Reason for Off Pathway use (structured text) as well as what alternative therapy is selected. Optional intra-practice peer-review workflow is available for Off Pathway selections.
	Support Services Available	Y/N	
30	Technical assistance including supportive documentation	Y	Included in Implementation and Maintenance
31	Clinical workflow assistance including clinical education for providers	Y	Included in Implementation
32	Reimbursement / therapeutic interchange / value education for providers	Y	Via Pathways include toxicity profiles of treatments (from original study), cost information and dose modification guidance.
33	Clinical education for payers	Y	For payers designated by each practice customer, we provide access to a practice's Payers to the Pathways Portal, all associated tools, and monthly reporting to facilitate a practice relationship with the payer.
34	Value education for payers	Y	For payers designated by each practice customer, we provide access to a practice's Payers to the Pathways Portal, all associated tools, and monthly reporting to facilitate a practice relationship with the payer.
35	Payer contracting support for providers	Y	For payers designated by each practice customer, we provide access to a practice's Payers to the Pathways Portal, all associated tools, and monthly reporting to facilitate a practice relationship with the payer.
36	COA Oncology Medical Home program support for providers	Y	Via Pathways support the Oncology Medical Home strategy in many different ways. The Via Pathways drive the highest value care (quality+outcomes/cost) for patients across the spectrum of care (90% of cancer types, work-up including biomarkers, radiation and medical oncology treatments, surveillance, palliative care, clinical research). The Via Pathways promote early and honest discussions with patients about palliative care and treatment intent as well avoidance of additional treatment in later lines of therapy. Our disease committees prioritize treatments with lower toxicities when

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 Pathway/Treatment Decision Support
Via Oncology Clinical Pathways (Click [HERE](#) to return to Directory)

		<p>outcomes are otherwise comparable among options, leading to fewer side effects and hospitalizations. The Via Pathways present printable patient education materials at the point of care and provide guidance around evidence based dose reductions. The Via Pathways address both medical and radiation oncology care for better coordination of care and will begin addressing surgical oncology starting in the second half of 2013. Finally, symptom management pathways are prioritized for development starting in Summer 2013.</p> <p>Treatment Plan – N - Treatment Plan summary document under development for release in Oct/Nov 2013 at which time we will support this metric.</p> <p>Staging – Y - Every new treatment initiation requires the capture of staging and relevant work-up characteristics (biomarkers, labs)</p> <p>Chemotherapy NCCN Guidelines – Y - Available at a patient level at the time of prescribing and available in total for all patients through monthly reporting.</p> <p>Appropriate antiemetic – Y - Via Order Templates define antiemetic recommendations based on emetogenic potential of each regimen.</p> <p>GCSF as needed – Y - All Via Order Templates that contain a risk of FN \geq 20% have a requirement for concurrent GCSF prophylaxis</p> <p>ER Visits – N - Not directly to capture this metric (typically only available from payers). Via Pathways support decreasing hospitalizations/ED visits by prioritizing the recommendation of less toxic regimens when options have equal efficacy and by presenting dose modification considerations in line with treatment selection. This has been shown to decrease the hospitalization/ED visit rate in the Via network.</p> <p>Hospital admissions – N - Not directly to capture this metric. Via Pathways support decreasing hospitalizations/ED visits by prioritizing the recommendation of less toxic regimens when options have equal efficacy and by presenting dose modification considerations inline with treatment selection.</p> <p>End of Life Care Discussions – Y - Every new treatment initiation or change of treatment requires the capture of intent of therapy and how that intent was communicated to the patient (correspond to 2 of the ASCO QOPI measures).</p>
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 Pathway/Treatment Decision Support
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			Days Hospice at time of Death – N -Via Pathways promotes the selection of Hospice / Palliative Care in non-curative disease and limits lines of therapy recommendations. All other OMH measure – N – No comments
37	Integrated insurance pre-authorization	N	Structured text to populate EDI standard for prior auth (277) is available
38	Integrated insurance payment authorization	N	Structured text to populate EDI standard for prior auth (277) is available
	Installations	Y/N	Comments
39	# Installations		15
40	Average practice size = # of providers		Mean = 35, Median = 13
41	Smallest practice - # of providers		1
42	Largest practice - # of providers		205
43	# of different states with installations		11 States (Internationally 1 in India and 1 in Ireland)
	Pricing Structure	Y/N	Comments
44	Purchaser of your product:		We strongly advocate practice adoption of a uniform set of pathways across all their patients, which is not possible if each payer selects a different pathways program.
	Providers	Y	
	Payers	N	
	Payers and Providers	N	
	Other _____	Y	Blinded relationship through saleSEER makes the Via Oncology Master content (no data) available for subscription to Industry.
45	Approximate purchase price per provider		Variable and confidential, based on implementation
46	Approximate price of one way interface (data received from EHR / PM System)		\$6,000
47	Approximate price of bidirectional interface (data received from EHR/PM System AND data sent to EHR/PM System)		\$9,000
48	Approximate incremental clinical staffing cost to support		negligible
49	Approximate incremental administrative staffing cost to support		negligible
50	Approximate total monthly use cost		Variable and confidential, based on implementation