

Transplant Services Overview

Transplant Services – Covered Services:

Charges made for human organ and tissue transplant services, which include solid organ and bone marrow/stem cell procedures at designated facilities throughout the United States or its territories.

This coverage is subject to the following conditions and limitations:

• Transplant services include the recipient's medical, surgical, and hospital services; inpatient immunosuppressive medications; and costs for organ or bone marrow/stem cell procurement. Transplant services are covered only if they are required to perform any of the following human-to-human organ or tissue transplants: allogeneic bone marrow/stem cell; autologous bone marrow/stem cell; corneal; heart/lung; kidney; kidney/pancreas; liver; lung; pancreas; or intestine (which includes small bowel, liver, or multiple viscera).

All transplant services, other than corneal, are payable at 100% when authorized by the Plan and through Transplant Resource Network and/or other contracted transplant providers (there are no other contracted providers at present). Maine Medical Center is not contracted for transplant services. Non-authorized transplant services will not be covered.

Benefits for (authorized) transplant services, when received from participating provider facilities other than Transplant Resource Network are payable at the in-network benefit level. (Currently there are no additional in-network providers contracted.) Cornea transplants are covered services but not available through the Transplant Resource Network.

Coverage for organ procurement costs are limited to costs directly related to the procurement of an organ from a cadaver or a live donor. Organ procurement costs shall consist of surgery necessary for organ removal, organ transportation, and the transportation, hospitalization, and surgery of a live donor. Compatibility testing undertaken prior to procurement is covered if medically necessary. Costs related to the search for, and identification of, a bone marrow or stem cell donor for an allogeneic transplant are also covered.

Transplant Travel Services - Charges made for reasonable travel expenses incurred in connection with a pre-approved organ/tissue transplant are covered (refer to Exhibit B for daily and lifetime maximums), subject to the following conditions and limitations:

• Transplant travel benefits are not available for corneal transplants. Benefits for transportation, lodging, and food are available only to the recipient of a pre- approved organ/tissue transplant through the Optum/Transplant Resource Network and/or other contracted transplant provider. The term "recipient" includes a person receiving authorized transplant- related services during any of the following: (a) evaluation; (b) candidacy; (c) transplant event; or (d) post- transplant care. Travel expenses for the person receiving the transplant will include charges for: transportation to and from the transplant site (including charges for a rental car used during a period of care at the transplant facility); lodging while at, or traveling to and from, the transplant site:

- In addition to the recipient's coverage for the charges associated with these items, travel expenses for one companion to accompany the recipient are also covered. The term "companion" includes the recipient's spouse; a member of the family; a legal guardian; or any person not related to the recipient, but actively involved as a caregiver. The following travel expenses are excluded: costs incurred due to travel within 60 miles of your home; laundry bills; telephone bills; alcohol or tobacco products; and charges for transportation that exceed coach class rates.
- These benefits are only available when the covered person is the recipient of an organ transplant. No benefits are available when the covered person is a donor.
- For information on submitting travel receipts, contact Beacon's Customer Service Team at the telephone number on the back of the member's identification card.

Process of Accessing Transplant Services:

- 1. When a member requires transplant services, a referring provider (PCP or specialist) should submit a normal Prior-Authorization form to Evolent Medical Management.
- 2. Once the PA form is received by Evolent Medical Management, medical necessity and the Center of Excellence Affiliation (COE) will be reviewed for approval by Medical Management. Once both the medical necessity and the COE is approved by Medical Management, the request will be forwarded to the Transplant Resource Network. All medical management coordination is then handled by the Transplant Resource Network.
- 3. Transplant Programs around the country apply to participate in the Transplant Resource Network. Approval to join the Transplant Resource Network is based on transplant volume, and outcomes (mortality & morbidity).
- 4. The transplant program provider sends all claims associated with the transplant service to the Transplant Resource Network. The Transplant Resource Network sends a repriced claim to Evolent for payment processing.