

## Anthem Centers of Medical Excellence Transplant Facility Listing

State	Facility Name	City
<b>CA</b>	<b><i>California Pacific Medical Center-Van Ness Campus</i></b>	<b><i>San Francisco</i></b>
	<b>Program Types</b> Heart-Adult Kidney-Adult Kidney/Liver-Adult Liver-Deceased Donor-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	
<b>CA</b>	<b><i>Cedars-Sinai Medical Center</i></b>	<b><i>Los Angeles</i></b>
	<b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Heart-Adult Heart/Lung-Adult Kidney-Adult Kidney-Pediatric Kidney/Liver-Adult Liver-Deceased Donor-Adult Lung-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	
<b>CA</b>	<b><i>Children's Hospital of Los Angeles</i></b>	<b><i>Los Angeles</i></b>
	<b>Program Types</b> Blood/Marrow-Allogeneic-Pediatric Blood/Marrow-Autologous-Pediatric Heart-Pediatric Kidney-Pediatric Liver-Deceased Donor-Pediatric Liver-Living Donor-Pediatric	
<b>CA</b>	<b><i>Children's Hospital of Orange County</i></b>	<b><i>Orange</i></b>
	<b>Program Types</b> Blood/Marrow-Allogeneic-Pediatric Blood/Marrow-Autologous-Pediatric	
<b>CA</b>	<b><i>City of Hope National Medical Center</i></b>	<b><i>Duarte</i></b>
	<b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Allogeneic-Pediatric Blood/Marrow-Autologous-Adult Blood/Marrow-Autologous-Pediatric	
<b>CA</b>	<b><i>Keck Hospital of USC</i></b>	<b><i>Los Angeles</i></b>
	<b>Program Types</b> Heart-Adult Kidney-Adult	

CME = Anthem Centers of Medical Excellence. The CME designation is awarded by Anthem to those programs meeting the participation requirements for Anthem's Transplant network and all other future specialty networks developed by Anthem. Each Center has been selected through a rigorous evaluation of clinical data that provides insight into the facility's structures, processes, and outcomes of care.

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CA	<b><i>Keck Hospital of USC</i></b> <b>Program Types</b> Kidney/Liver-Adult Liver-Deceased Donor-Adult Liver-Living Donor-Adult Lung-Adult	<b><i>Los Angeles</i></b>
CA	<b><i>Loma Linda University Medical Center</i></b> <b>Program Types</b> Blood/Marrow-Autologous-Pediatric Blood/Marrow-Allogeneic-Pediatric Heart-Adult Heart-Pediatric Kidney-Adult Kidney-Pediatric Kidney/Liver-Adult Liver-Deceased Donor-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	<b><i>Loma Linda</i></b>
CA	<b><i>Lucile Salter Packard Children's Hospital</i></b> <b>Program Types</b> Blood/Marrow-Allogeneic-Pediatric Blood/Marrow-Autologous-Pediatric Heart-Pediatric Kidney-Pediatric Liver-Deceased Donor-Pediatric Liver-Living Donor-Pediatric Lung-Pediatric	<b><i>Palo Alto</i></b>
CA	<b><i>Rady Children's Hospital San Diego</i></b> <b>Program Types</b> Blood/Marrow-Allogeneic-Pediatric Blood/Marrow-Autologous-Pediatric Heart-Pediatric Kidney-Pediatric	<b><i>San Diego</i></b>
CA	<b><i>Ronald Reagan UCLA Medical Center</i></b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Allogeneic-Pediatric Blood/Marrow-Autologous-Adult Blood/Marrow-Autologous-Pediatric Heart-Adult Heart-Pediatric Heart/Lung-Adult Kidney-Adult	<b><i>Los Angeles</i></b>

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State	Facility Name	City
CA	<b>Ronald Reagan UCLA Medical Center</b> <b>Program Types</b> Kidney-Pediatric Kidney/Liver-Pediatric Kidney/Liver-Adult Liver-Deceased Donor-Adult Liver-Deceased Donor-Pediatric Liver-Living Donor-Pediatric Lung-Adult	Los Angeles
CA	<b>Scripps Green Hospital</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Kidney-Adult Kidney/Liver-Adult Liver-Deceased Donor-Adult	La Jolla
CA	<b>Sharp Memorial Hospital</b> <b>Program Types</b> Heart-Adult Kidney-Adult	San Diego
CA	<b>Stanford Hospital and Clinics</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Heart-Adult Heart/Lung-Adult Kidney-Adult Kidney/Liver-Adult Liver-Deceased Donor-Adult Lung-Adult	Stanford
CA	<b>Sutter Medical Center Sacramento</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Heart-Adult	Sacramento
CA	<b>UC Davis Medical Center</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Kidney-Adult Kidney-Pediatric	Sacramento
CA	<b>UC Irvine Medical Center</b> <b>Program Types</b> Kidney-Adult	Orange

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State	Facility Name	City
<b>CA</b>	<b><i>UCSD La Jolla John M &amp; Sally B Thornton Hospital</i></b>	<b><i>La Jolla</i></b>
	<b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Heart-Adult Heart/Lung-Adult Kidney-Adult Kidney/Liver-Adult Liver-Deceased Donor-Adult Lung-Adult	
<b>CA</b>	<b><i>UCSF Benioff Children's Hospital Oakland</i></b>	<b><i>Oakland</i></b>
	<b>Program Types</b> Blood/Marrow-Allogeneic-Pediatric Blood/Marrow-Autologous-Pediatric	
<b>CA</b>	<b><i>UCSF Medical Center</i></b>	<b><i>San Francisco</i></b>
	<b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Allogeneic-Pediatric Blood/Marrow-Autologous-Adult Blood/Marrow-Autologous-Pediatric Heart-Adult Heart/Lung-Adult Kidney-Adult Kidney-Pediatric Kidney/Liver-Adult Kidney/Liver-Pediatric Liver-Deceased Donor-Adult Liver-Deceased Donor-Pediatric Liver-Living Donor-Adult Liver-Living Donor-Pediatric Lung-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	
<b>CA</b>	<b><i>USC Kenneth Norris Jr Cancer Hospital</i></b>	<b><i>Los Angeles</i></b>
	<b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult	
<b>CO</b>	<b><i>Presbyterian St. Luke's Medical Center</i></b>	<b><i>Denver</i></b>
	<b>Program Types</b> Kidney-Adult	
<b>CO</b>	<b><i>University of Colorado Hospital</i></b>	<b><i>Aurora</i></b>
	<b>Program Types</b> Heart-Adult	

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<b>CO</b>	<b>University of Colorado Hospital</b> <b>Program Types</b> Heart/Lung-Adult Kidney/Liver-Adult Liver-Deceased Donor-Adult Liver-Living Donor-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>Aurora</b>
<b>CT</b>	<b>Hartford Hospital</b> <b>Program Types</b> Kidney-Adult	<b>Hartford</b>
<b>GA</b>	<b>Emory University Hospital</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Heart-Adult Kidney-Adult Kidney/Liver-Adult Liver-Deceased Donor-Adult Lung-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>Atlanta</b>
<b>GA</b>	<b>Northside Hospital</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult	<b>Atlanta</b>
<b>GA</b>	<b>Piedmont Hospital</b> <b>Program Types</b> Heart-Adult Kidney-Adult Kidney/Liver-Adult Liver-Deceased Donor-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>Atlanta</b>
<b>IN</b>	<b>Ascension St. Vincent Hospital</b> <b>Program Types</b> Heart-Adult Kidney-Adult	<b>Indianapolis</b>
<b>IN</b>	<b>Indiana Blood and Marrow Transplantation (Franciscan)</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult	<b>Indianapolis</b>

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State	Facility Name	City
<b>IN</b>	<b>Indiana University Health Methodist Hospital</b> <b>Program Types</b> Heart-Adult Lung-Adult	<b>Indianapolis</b>
<b>IN</b>	<b>Indiana University Health University Hospital</b> <b>Program Types</b> Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>Indianapolis</b>
<b>KY</b>	<b>UK Healthcare Hospitals</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Heart/Lung-Adult Lung-Adult	<b>Lexington</b>
<b>MA</b>	<b>Lahey Clinic</b> <b>Program Types</b> Kidney-Adult Kidney/Liver-Adult Liver-Deceased Donor-Adult Liver-Living Donor-Adult	<b>Burlington</b>
<b>ME</b>	<b>Maine Medical Center</b> <b>Program Types</b> Kidney-Adult	<b>Portland</b>
<b>NY</b>	<b>Montefiore Medical Center</b> <b>Program Types</b> Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>Bronx</b>
<b>NY</b>	<b>Mount Sinai Hospital</b> <b>Program Types</b> Heart-Adult Kidney-Adult Kidney-Pediatric Kidney/Liver-Adult Liver-Deceased Donor-Adult Liver-Living Donor-Adult Liver-Deceased Donor-Pediatric Liver-Living Donor-Pediatric Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>New York</b>
<b>OH</b>	<b>University of Cincinnati Medical Center</b> <b>Program Types</b> Blood/Marrow-Allogeneic-Adult Blood/Marrow-Autologous-Adult Kidney/Liver-Adult	<b>Cincinnati</b>

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State	Facility Name	City
<b>OH</b>	<b>University of Cincinnati Medical Center</b> <b>Program Types</b> Liver-Deceased Donor-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>Cincinnati</b>
<b>VA</b>	<b>UVA Health University Hospital</b> <b>Program Types</b> Heart-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>Charlottesville</b>
<b>WI</b>	<b>Aurora St. Luke's Medical Center</b> <b>Program Types</b> Blood/Marrow-Autologous-Adult	<b>Milwaukee</b>
<b>WI</b>	<b>Children's Wisconsin</b> <b>Program Types</b> Heart-Pediatric Kidney-Pediatric	<b>Milwaukee</b>
<b>WI</b>	<b>Marshfield Medical Center</b> <b>Program Types</b> Blood/Marrow-Autologous-Adult	<b>Marshfield</b>
<b>WI</b>	<b>UW Health University Hospital</b> <b>Program Types</b> Heart-Adult Pancreas Alone-Adult Pancreas/Kidney-Adult	<b>Madison</b>

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**Anthem Centers of Medical Excellence (CME) Transplant Program**  
**Minimum Participation Requirements for Solid Organ Transplant (SOT) Programs**

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**Core/Absolute Criteria Requirements:**

- Facility, Medical Group, and all hospital based physicians located at the Facility who provide Covered Transplant Services to Covered Members must be participating providers in all Anthem's commercial provider networks and have corresponding agreements, including reimbursement rates, in place with Anthem.
  - Facility and Medical Group must execute a stand-alone Anthem Centers of Medical Excellence (CME) transplant global case rate agreement inclusive of facility, professional and donor services specific to transplant services and abide by all terms and conditions contained therein as follows:
    - A newly designated Anthem CME transplant facility requires a stand-alone Anthem CME transplant global case rate agreement within 12-months from the date of initial approval notification by Anthem CME Transplant Quality Program.
    - A Transplant Facility that has been re-designated by Anthem CME for their transplant programs and have a current stand-alone Anthem CME transplant global case rate agreement executed more than 36 months ago: will require the execution of the most recent stand-alone Anthem CME transplant global case rate agreement within 12 months from the date of approval notification by Anthem CME Transplant Quality Program for continued participation in the CME Transplant Network.

**Important:** This requirement applies regardless of whether Facility is or becomes party to any other contract with an Anthem plan. A participating provider agreement between Facility and an individual Anthem Plan does not take the place of this requirement. Entry into the most current Anthem Centers of Medical Excellence transplant global case rate agreement is an absolute requirement.
    - A newly approved transplant program for a transplant Facility with a current stand-alone Anthem CME transplant global case rate agreement, executed within the most recent 36 months: will require an amendment to their current stand-alone Anthem CME transplant global case rate agreement to include the newly designated programs, within 12 months from the date of initial approval notification by Anthem CME Transplant Quality Program.
- OR**
- A newly approved transplant program for a transplant Facility with a current stand-alone Anthem CME transplant global case rate agreement, executed more than 36 months ago: will require the execution of the most recent stand-alone Anthem CME transplant global case rate agreement within 12 months from the date of approval notification by Anthem CME Transplant Quality Program for continued participation in the CME Transplant Network
- Facility and Medical Group are subject to annual re-designation process and must meet annual quality criteria, as stated within this document, with formal program approval and notification from Anthem.
  - Facility shall be given thirty (30) business days to submit an appeal in writing from date of any de-designation correspondence from Anthem on their continued participation in the Centers of Medical Excellence (CME) Transplant Network. Once the appeal is reviewed and a determination for de-designation is made by the National Transplant Quality Review Committee (NTQRC) panel and issued in writing to the provider and unless otherwise stated in the CME Transplant Agreement, facility shall be given sixty (60) days from date of de-designation notice until the program is termed from the CME Transplant Network.
  - Facility and Medical Group must meet/continue to meet Network participation requirements as stated herein, including but not limited to the requirement to provide notice to Anthem within twenty-four (24) hours of a Working Day or seventy-two (72) hours of a weekend day of any material changes in its team or program structure, changes in federal rating status (such as loss of Medicare Certification/UNOS Membership Status) or any adverse event that requires notification to CMS and/or UNOS and that could result in failure of provider to continue to satisfy any of the criteria for participation in the Anthem Centers of Medical Excellence Transplant Network as stated herein.
  - Facility's solid organ transplant program(s) must have and maintain certification in good standing with the Centers for Medicare and Medicaid Services (CMS).
  - For Adult Heart Program Reviews: Ventricular Assist Device (VAD) Program must be CMS Certified
  - Facility must be an Institutional Member of United Network for Organ Sharing (UNOS) meeting all applicable UNOS membership criteria and is always currently in good standing (not on 'Probation' or a 'Member Not in Good Standing') during the term of this Agreement.
  - Facility must have been actively performing transplantation over the course of the most recent 36-month period.



**Anthem Centers of Medical Excellence (CME) Transplant Program**  
**Minimum Participation Requirements for Solid Organ Transplant (SOT) Programs**

**Adult Volume Requirements:**

- Using volume data publicly reported by the Organ Procurement and Transplantation Network (OPTN)

<b>Transplant Type</b>	<b>Adult Volume Requirements</b>
Heart:	<ul style="list-style-type: none"> <li>• Average of 10 per year over the most recent 36 months with no less than 10 in the most recent calendar year</li> </ul>
Lung:	<ul style="list-style-type: none"> <li>• Average of 10 per year over the most recent 36 months with no less than 10 in the most recent calendar year</li> </ul>
Heart/Lung:	<ul style="list-style-type: none"> <li>• Must meet both adult heart and lung CME criteria for participation</li> </ul>
Liver (all donor types):	<ul style="list-style-type: none"> <li>• Average of 25 per year over the most recent 36 months with no less than 25 in the most recent calendar year</li> </ul>
Liver-Living Donor:	<ul style="list-style-type: none"> <li>• Adult Deceased Donor Liver program must meet CME criteria for participation</li> <li>• Average of 6 per year over most recent 36 months with no less than 6 in the most recent calendar year</li> <li>• Living donor and recipient protocols must be provided in writing</li> </ul>
Kidney: <i>(The program must meet both the overall volume and living donor volume benchmarks to meet the adult kidney volume benchmark)</i>	<p>Overall volume (deceased &amp; living combined):</p> <ul style="list-style-type: none"> <li>• Average of 30 per year over the most recent 36 months with no less than 30 in the most recent calendar year</li> </ul> <p>Living Donor volume:</p> <ul style="list-style-type: none"> <li>• Average of 12 living donor per year over the most recent 36 months with no less than 12 in the most recent calendar year</li> <li>• Living donor and recipient protocols must be provided in writing</li> </ul>
Liver-Kidney	<ul style="list-style-type: none"> <li>• Must meet both adult liver and kidney CME criteria for participation</li> </ul>
SPK, PAK & PTA:	<ul style="list-style-type: none"> <li>• Kidney program must meet CME criteria for participation</li> <li>• Average of 6 per year over the most recent 36 months with no less than 6 in the most recent calendar year</li> </ul>

**Pediatric Volume Requirements:**

- Using volume data publicly reported by the Organ Procurement and Transplantation Network (OPTN)

<b>Transplant Type</b>	<b>Volume Requirements</b>
Heart:	<ul style="list-style-type: none"> <li>• Average of 4 per year over the most recent 36 months with no less than 4 in the most recent calendar year</li> </ul>
Congenital Heart Surgery:	<ul style="list-style-type: none"> <li>• Minimum of 400 cases over the most recent 36 months</li> </ul>
Lung:	<ul style="list-style-type: none"> <li>• At least 1 transplant over the most recent 2 calendar years</li> </ul>
Heart/Lung:	<ul style="list-style-type: none"> <li>• Must meet both pediatric heart and lung CME criteria for participation</li> </ul>
Liver (all donor types):	<ul style="list-style-type: none"> <li>• Average of 10 per year over the most recent 36 months with no less than 5 in the most recent calendar year</li> </ul>
Liver-Kidney	<ul style="list-style-type: none"> <li>• Must meet both pediatric liver and kidney CME criteria for participation</li> </ul>
Kidney (all donor types):	<ul style="list-style-type: none"> <li>• Average of 10 per year over the most recent 36 months with no less than 10 in the most recent calendar year</li> </ul>
Kidney (when team is shared with adult team*):	<ul style="list-style-type: none"> <li>• Adult kidney program must meet CME criteria for participation</li> <li>• Average of 6 per year over the most recent 36 months with no less than 6 in the most recent calendar year</li> </ul>

\*A shared team is defined as an adult-pediatric program sharing the same transplant surgeons and technical experience.

**Anthem Centers of Medical Excellence (CME) Transplant Program**  
**Minimum Participation Requirements for Solid Organ Transplant (SOT) Programs**

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**Adult and Pediatric Patient Survival Rate Requirements:**

Using the latest Scientific Registry of Transplant Recipients (SRTR) Center-Specific Report:

For patient survival at 1 month, 1 year and 3 years, the lower limit of the 95% Credible Interval (CI) should not be greater than the hazard ratio of 1.0, based on the national experience.

**Adult and Pediatric Graft Survival Rate Requirements:**

Using the latest Scientific Registry of Transplant Recipients (SRTR) Center-Specific Report:

For graft survival at 1 month, 1 year and 3 years, the lower limit of the 95% Credible Interval (CI) should not be greater than the hazard ratio of 1.0, based on the national experience.

**Additional Measurements for Solid Organ Programs:**

When there has been a change in the UNOS primary physician and/or surgeon over the course of the most recent 36-month period, the program must provide verification of OPTN/UNOS MPSC approval.

**Additional information used to evaluate all transplant programs:**

- Transplant team composition
- Stability of the transplant team
- Quality Improvement Plan for the transplant program
- Patient Safety initiatives
- The Joint Commission Accreditation

**NOTE:** Satisfaction of the program quality criteria is not a guarantee of designation.

# Anthem Centers of Medical Excellence (CME) Transplant Program

## Minimum Participation Requirements for Bone Marrow/Stem Cell Transplant (BMT/SCT) Programs

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### Core/Absolute Criteria Requirements:

- Facility, Medical Group, and all hospital-based physicians located at the Facility who provide Covered Transplant Services to Covered Members must be participating providers in all Anthem's commercial provider networks and have corresponding agreements, including reimbursement rates, in place with Anthem.
  - Facility and Medical Group must execute a stand-alone Anthem Centers of Medical Excellence (CME) transplant global case rate agreement inclusive of facility, professional and donor services specific to transplant services and abide by all terms and conditions contained therein as follows:
    - A newly designated Anthem CME Transplant Facility requires a stand-alone Anthem CME transplant global case rate agreement within 12-months from the date of initial approval notification by Anthem CME Transplant Quality Program.
    - A Transplant Facility that has been re-designated by Anthem CME for their transplant programs and have a current stand-alone Anthem CME transplant global case rate agreement executed more than 36 months ago: will require the execution of the most recent stand-alone Anthem CME transplant global case rate agreement within 12 months from the date of approval notification by Anthem CME Transplant Quality Program for continued participation in the CME Transplant Network.  
**Important:** This requirement applies regardless of whether Facility is or becomes party to any other contract with an Anthem plan. A participating provider agreement between Facility and an individual Anthem Plan does not take the place of this requirement. Entry into the most current Anthem Centers of Medical Excellence transplant global case rate agreement is an absolute requirement.
    - A newly approved transplant program for a transplant Facility with a current stand-alone Anthem CME transplant global case rate agreement, executed within the most recent 36 months: will require an amendment to their current stand-alone Anthem CME transplant global case rate agreement to include the newly designated programs, within 12 months from the date of initial approval notification by Anthem CME Transplant Quality Program.
- OR**
- A newly approved transplant program for a transplant Facility with a current stand-alone Anthem CME transplant global case rate agreement, executed more than 36 months ago: will require the execution of the most recent stand-alone Anthem CME transplant global case rate agreement within 12 months from the date of approval notification by Anthem CME Transplant Quality Program for continued participation in the CME Transplant Network
- Facility and Medical Group are subject to annual re-designation process and must meet annual quality criteria, as stated within this document, with formal program approval and notification from Anthem.
  - Facility shall be given thirty (30) business days from date of any de-designation correspondence to submit an appeal. Unless otherwise stated in the participation agreement, facility shall be given sixty (60) days from date of de-designation notice until the program is termed from the agreement.
  - Facility and Medical Group must meet/continue to meet Network participation requirements as stated herein, including but not limited to the requirement to provide notice to Anthem within twenty-four (24) hours of a Working Day or seventy-two (72) hours of a weekend day of any material changes in its team or program structure, changes in federal rating status (such as loss of FACT Accreditation) or any adverse event that could result in failure to continue to satisfy any of the criteria for participation in the network as stated herein.
  - Facility must submit data for both the autologous and allogeneic bone marrow/stem cell transplant programs to the Center for International Blood & Marrow Research (CIBMTR) Registry.
  - Facility must have and maintain Foundation for the Accreditation of Cellular Therapy (FACT) accreditation for both Autologous and Allogeneic Bone Marrow/Stem Cell Transplants.
  - If Facility currently performs, or is considering performing, both autologous and allogeneic transplants, must continuously meet criteria as noted herein, for both transplant types in order to be designated as a CME in the Anthem Transplant Network.

## Anthem Centers of Medical Excellence (CME) Transplant Program

### Minimum Participation Requirements for Bone Marrow/Stem Cell Transplant (BMT/SCT) Programs

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#### **Core/Absolute Criteria Requirements- Continued:**

- Facility must be always a participating member of the National Marrow Donor Program (NMDP) in good standing during the term of this Agreement.
- Facility must have, at minimum, two (2) bone marrow transplant physicians on its team who have worked together for the most recent consecutive 12-month period.
- Facilities currently performing transplantation on an outpatient basis at a free standing outpatient facility, in addition to meeting the above noted criteria, must also be affiliated with a hospital to provide the inpatient transplant services that is a member of the NMDP/Be the Match transplant center network and is fully FACT Accredited as a bone marrow/stem cell transplant center.

#### **Adult Volume Requirements:**

Autologous: Ten (10) cases per year over the most recent three (3) calendar years

Allogeneic: Ten (10) cases per year over the most recent three (3) calendar years

#### **Pediatric Volume Requirements:**

Autologous: No volume requirement

Allogeneic: Ten (10) cases per year over the most recent three (3) calendar years

#### **Adult Patient Survival Requirements:**

Facility must have a one (1) year survival rate that is 'Similar to' or 'Above' the expected rate as noted in the most recently released annual Center for International Blood & Marrow Transplant Research (CIBMTR) Center Specific Report

#### **Pediatric Patient Survival Requirements (for programs reporting to CIBMTR as a stand-alone Pediatric Program):**

Facility must have a one (1) year survival rate that is 'Similar to' or 'Above' the expected rate as noted in the most recently released annual Center for International Blood & Marrow Transplant Research (CIBMTR) Center Specific Report

#### **Pediatric Patient Survival Requirements (for programs reporting outcomes to CIBMTR as an adult/pediatric combined program):**

Transplant Type	100-day	1-year
Autologous	Informational only	
Allogeneic	≥75%	≥66%

#### **Additional information used to evaluate all transplant programs:**

Transplant team composition  
Stability of the transplant team  
Quality Improvement Plan for the transplant program  
Patient Safety initiatives

**NOTE:** Satisfaction of the program quality criteria is not a guarantee of designation.