

# Network inclusion guidelines for Transplants and Advanced Cellular Therapies

Cigna LifeSOURCE Network



LifeSOURCE classifies its national network of providers and programs into one of two levels of participation, “**Designated**” and “**Supplemental**”. A Designated provider or program in the Cigna LifeSOURCE Transplant Network® is comprised of programs that meet or exceed the requirements, accreditation and/or certifications listed below. The Supplemental providers and programs meet some, but not all of the requirements, accreditation, and/or certifications below.

## Referral Requirements:

- The program must be a Cigna Healthcare<sup>SM</sup> participating provider.
- The program must maintain hospital accreditation (e.g., Joint Commission of Hospital Accreditation or the National Integrated Accreditation for Healthcare Organizations [NIAHO] by Det Norske Veritas [DNV] Healthcare).
- For adult solid organ programs, Centers for Medicare and Medicaid Services (CMS) certification must be maintained. CMS certification for pediatric solid organ programs is voluntary unless the transplant center is a primary pediatric center or performs 50% or more of their transplants on pediatric candidates. For more information, visit [www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Transplant](http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Transplant).
- Listing at the Designated level will also be dependent on a market check to confirm the rates for each program are competitively priced relative to equivalent programs in the region and/or market.
- Cigna LifeSOURCE Transplant Network Performance Review Committee (NPRC) has sole discretion in making final determinations on program consideration.

## For Solid Organ Programs:

- Designated-level programs must have three-year risk-adjusted performance data published by the Scientific Registry of Transplant Recipients (SRTR) in the July Program Specific Reports (PSRs) and continue to meet the annual program volumes in the table below. For more information, visit [www.srtr.org/reports/program-specific-reports/](http://www.srtr.org/reports/program-specific-reports/).
- Supplemental-level programs must have one-year risk-adjusted performance data published in the SRTR July PSRs.

## For Bone Marrow/Stem Cell Programs

- Bone marrow transplant (BMT) programs must have accreditation from the Foundation for the Accreditation of Cellular Therapy (FACT): [www.factwebsite.org](http://www.factwebsite.org).
- All BMT programs must also participate in the National Marrow Donor Program (NMDP) as a transplant center ([bethematch.org](http://bethematch.org)) and report data into the Centers for International Blood and Marrow Transplant Research (CIBMTR).

## I. Program Volume Guidelines for LifeSOURCE Designated Network Programs

### Solid Organ Annual Designated-Level Minimum Volume Guidelines

Transplant Type	Adult	Pediatric
Heart	12	Average of 5 in the previous 2 years
Lung	12	Minimum of 1 in the previous 2 years
Liver	12*	5
Kidney	30**	5
Intestine	3	Minimum of 3 in the previous 2 years
PTA/PAK/SPK***	Kidney program must be approved	N/A

\* Adult liver – 12 total combined deceased and living donors. Living liver programs must demonstrate active, ongoing live donor transplants annually.

\*\* Adult kidney – 30 total combined deceased and living donors. Transplant centers with kidney-only transplant programs will be considered on a case-by-case basis only.

\*\*\* Pancreas Transplant Alone (PTA), Pancreas After Kidney (PAK), Simultaneous Pancreas Kidney (SPK). Transplant center must have an active pancreas and kidney-pancreas transplant program.



### Bone Marrow/Stem Cell Annual LifeSOURCE Designated Level Minimum Volume Guidelines

- Adult programs must have 50 total, with at least 20 being allogeneic.
- Pediatric programs must have 15 total, inclusive of both autologous and allogeneic.

## 2. Performance Guidelines for Participating LifeSOURCE Network Solid Organ Programs

### Adult programs

#### LifeSOURCE Designated Program Level:

- Programs must have three-year risk-adjusted performance data reported in the July SRTR PSRs. Overall program performance must not rank in the lowest rating of the Relative Performance Index (RPI) or receive one bar in the one-year graft performance.

#### Supplemental Program Level:

- Programs that receive one bar in the one-year SRTR graft performance or RPI ranks in quintile I.

Note: Programs receiving the designation of “statistically lower” by the SRTR for the one-year graft and/or one-year patient survival will not be considered for inclusion in the network if not already participating.

#### The RPI Metrics:

On an annual basis utilizing the July SRTR Program Specific Reports (PSRs), the Cigna LifeSOURCE NPRC determines the relative performance index (RPI) of the adult program performance outcomes based on the following metrics: the waitlist transplant rate (getting a deceased donor transplant faster), the one-year graft survival and three-year graft survival rates. The July SRTR PSR program 5-tier outcome assessment is used in the heart and lung RPI calculation. Refer to the Relative Performance Index Methodology for Solid Organ Programs document.

### 3. Network Performance Guidelines for BMT/SCT Programs

All adult and pediatric bone marrow programs perform both autologous and allogeneic transplants and must achieve and maintain FACT accreditation for hematopoietic stem cell therapy and NMDP accreditation as a transplant center.

#### LifeSOURCE Designated Program Level:

- Be listed as “Performing as Predicted” or “Over-Performing” on the current Center for International Blood and Marrow Research (CIBMTR) Center Specific Survival Report.
  - LifeSOURCE Designated network-level programs subsequently listed as “underperforming” (–I) in the current year will move to the Supplemental level.
  - Programs show actual-over-predicted survival ratios (actual/predicted) equal to or better than 0.90.
  - Adult and combined adult and pediatric programs listed on the annual CIBMTR report with actual-over-predicted ratios (actual/predicted) less than 0.90 will move from the Designated level to the Supplemental level.

#### Supplemental Program Level:

- Achieve FACT and NMDP transplant center certification.
- Demonstrate active program volumes each year by reporting the data to the CIBMTR annually.

New BMT programs for network consideration must perform “As Predicted” or “Over-Performing” on the current CIBMTR Center Specific Survival Report.

### 4. Ventricular Assist Device (VAD) Network

Heart transplant programs must be in the Cigna LifeSource Network in order for the VAD program to be included in the Cigna LifeSource VAD Network. The VAD program must obtain and maintain CMS certification for destination therapy and hold accreditation by the Joint Commission or DNV Healthcare.

### 5. Advanced Cellular Therapy Network

- The associated Bone Marrow/Stem Cell Transplant (BMT/SCT) Program must be an in-network facility in the Cigna LifeSOURCE Network.
- All Advance Cellular Therapies which include bone marrow transplantation, chimeric antigen receptor T-cell therapy and tumor infiltrating lymphocyte therapy programs must obtain and maintain FACT of both hematopoietic stem cell therapy and immune effector cell therapy respectively.

### 6. Additional Network Program Requirements

- All new facility transplant programs approved for the LifeSOURCE Designated level must agree to a site visit if requested.
- All network transplant programs must participate in the annual survey. Programs that do not respond may be subject to administrative action under the terms of their agreement with Cigna Healthcare; actions may include shifting the programs from the LifeSOURCE Designated to the Supplemental level.
- LifeSOURCE Designated programs must continue to meet the minimum volume and outcome performance requirements annually.
- LifeSOURCE Designated solid organ programs that do not continue to meet the minimum volume, experience statistically lower-than-expected graft or patient outcomes, or have their RPI in the lowest rating may move to the Supplemental level.

- LifeSOURCE Designated level BMT/SCT programs should not be listed as underperforming in the annual CIBMTR Transplant Center-Specific Survival Report. Programs listed as under-performing (-I) on this report in the current year will move from the LifeSOURCE Designated to the Supplemental level during the annual survey of network transplant programs.
- Solid organ transplant programs with live donor programs must continue to demonstrate ongoing live donor transplants on a yearly basis to be listed as a live donor program.
- LifeSOURCE Designated- and Supplemental-level programs must permit Cigna Healthcare customers to multi-list.
- Programs that are at risk of losing accreditations or certifications will be removed from the network program listings.

Note: Cigna LifeSOURCE Network remains committed to continuing discussions with the national transplant organizations and providers in the development of network inclusion guideline updates. In addition, the network providers are independent care providers and are not employees or agents of Cigna Healthcare.



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