



## ***Clear Value Plus***

### **Evidence-based cancer care and financial information at your fingertips**

**Clear Value Plus<sup>SM</sup> (CVP) is a regimen support tool that highlights evidence-based treatment options and provides clinical and financial information at the point of care, improving workflows and care delivery for physicians and practice staff.**

**The application presents Value Pathways powered by NCCN<sup>TM</sup> and NCCN Clinical Practice Guidelines in Oncology<sup>®</sup> (NCCN Guidelines<sup>®</sup>) within the clinical workflow — offering integrated financial information, real-time reporting and benchmarking, and the ability to interface with your electronic health record (EHR).**

#### **Benefits of Clear Value Plus across your practice**

##### **Deliver quality cancer care**

- Access Value Pathways powered by NCCN and NCCN Guidelines at the point of care
- Keep pace with personalized medicine and the use of diagnostic tests through automatic clinical updates to pathways and guidelines as new evidence emerges
- Improve clinical consistency and view patient information and treatment decisions in one place

##### **Increase financial transparency**

- Prospectively evaluate cost effectiveness of different treatment options and improve scheduling workflow with easy access to patient financial responsibility information
- Minimize exposure to denied claims by documenting adherence to evidence-based treatments

##### **Accelerate prior authorization and ease the burden of documentation**

- Confirm regimen selections are on-guideline and on-pathway, minimizing the burden of documentation for prior authorization, quality reporting or compliance
- Automatically record treatment decisions in the patient record of the practice's integrated EHR, including iKnowMed<sup>SM</sup>
- Collaborate with payers to opt out of prior authorization by demonstrating adherence to pathways

##### **Participate in value-based care programs**

- Confirm chosen therapies are consistent with nationally recognized clinical guidelines to meet requirements of the Oncology Care Model (OCM) and the Merit-based Incentive Payment System (MIPS) Improvement Activities category
- Use real-time reporting to demonstrate quality, including key performance metrics such as adherence, regimen utilization history and program participation — for an individual provider, a single site or across the entire practice



**“Most importantly for the back-office staff, clinical staff and patients, CVP has sped up turnaround for prior authorizations on average from 3–4 days to 1–2 days — which means patients can be treated more quickly and reimbursement arrives sooner.”**

**Kim Woofter**  
Chief Clinical Officer  
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