

Information for Doctors: Letter of Medical Necessity Checklist

Your patient has applied for and been denied health plan coverage for the BMS Oncology product you wish to prescribe. Your *Letter of Medical Necessity* will be critical to the appeals outcome. Please consider whether your letter covers the following points:

- ✓ Patient name
- ✓ Patient ID or HIC #
- ✓ Initial date of diagnosis
- ✓ Specific cell-type per pathology report, including documentation of metastasis, if applicable
- ✓ Current treatment rendered, including all drugs, dosages, and schedules
- ✓ Response to treatment being appealed
- ✓ For prior treatment given, list all drugs, dosages, schedules, clinical responses, and reason for discontinuation

Access Support®, the Bristol Myers Squibb Access and Reimbursement services program, offers patient assistance support, benefits review, prior authorization assistance, and appeals assistance. Site Care Coordinators are available **Monday through Friday, from 8 AM to 8 PM ET at 1-800-861-0048**, to assist oncology offices with access and reimbursement questions regarding their insured and uninsured patients. You can also find information online at www.BMSAccessSupport.com