The Association of Northern California Oncologists (ANCO) was organized in 1990 to be an advocate for, educate, and inform the practicing hematologist/oncologist. ANCO currently represents 503 hematologists/oncologists throughout northern California and Nevada who practice in the community as well as at the regional academic cancer centers—Stanford University, UC Davis, and UC San Francisco—and The Permanente Medical Group. We serve the interests of our physician members, their nurses and practice managers, and people living with cancer. ANCO is a member of the Association of Community Cancer Centers (ACCC), a state/regional affiliate of the American Society of Clinical Oncology (ASCO), and (along with the Medical Oncology Association of Southern California or MOASC) the specialty delegation representative for hematology/oncology at the California Medical Association (CMA).

ANCO is dedicated to the delivery of the highest quality care to people living with cancer by providing a forum for the exchange of ideas, data, and knowledge and by representing the interests of physicians and people living with cancer. To these ends, ANCO disseminates information via e-mail, FAX broadcast, the ANCO FAX News, the California Oncology Weekly (jointly with MOASC), and its website; sponsors clinical education meetings for physicians and nurses and professional education meetings for physicians, and nurse and practice managers; and, advocates on behalf of physicians and people living with cancer before State and Federal government agencies, regional and national hematology/oncology and medical societies, and insurance and pharmaceutical companies. ANCO’s goal is to defend and preserve the autonomy of hematologists/oncologists and to provide the highest quality cancer care to people living with cancer.

ANCO’s clearly defined objectives are to:

- **Disseminate the latest and best information** impacting the practice of hematology/oncology to members.

- **Provide clinical education** to physicians and nurses and **professional education** to physicians, nurses, and practice managers.

- **Serve as an advocate and liaison** for its members before regional and national organizations (i.e., government, private, and corporate).
• **Play an active role in the reimbursement environment** on behalf of physicians, nurses, managers, and people living with cancer.

Under the direction of the *Board of Directors* and leadership of *President* Daniel P. Mirda, M.D., and *Executive Director* José Luis González, ANCO continues to make progress in accomplishing its goal and these objectives. The *2014 Annual Report* summarizes the activities and accomplishments of 2014 and describes plans for 2015.

**Administration**

A full-time *Executive Director* under the direction of the ANCO *Officers* and *Board of Directors* efficiently and effectively manages ANCO. Fundraising efforts continue to be successful through the *Corporate Membership Program*. ANCO renewed the Institutional Memberships of *Stanford University*, *UC Davis*, and *UC San Francisco* and the Group Membership for *The Permanente Medical Group*. And, ANCO successfully retained and recruited new physician members. In conclusion, ANCO is a financially sound organization that is proud to be viewed by government, corporate, and other medical organizations throughout California and the United States as a leader among state oncology societies.

Specifically:

• ANCO’s *Board of Directors* met on one occasion, teleconferenced regularly, and communicated via e-mail on many occasions. Summary minutes of these *Board* meetings are available from the ANCO office. Among the items discussed and acted upon by the *Board* were:

  - nominations and elections to the *Board*.
  - elections of a *President* and *Vice President* (for two-year terms).
  - an FY2014 budget and investments for the *Association*.
  - designation of ANCO representatives to various forums (e.g., ACCC, ASCO, ASH, CMA, and MOASC).
  - advocacy efforts on behalf of individual ANCO members and hematologists/oncologists in general before ACCC, ASCO’s *State Affiliate Council*, and the *California Medical Association*; and Noridian/JEMAC’s *Contractor Advisory Committee* (for Medicare), DHCS/MediCal, *Department of Managed Health Care*, and CMS; state and national legislative bodies (i.e., *California State Legislature* and *Congress*); a variety of local IPAs, managed care organizations, and private insurance companies; and, the *California Technology Assessment Forum* (CTAF).
  - clinical and professional education proposals; and, cosponsored or co-marketed programs organized by ACCC, ASCO, ASH, and *Corporate and Institutional Members*.
  - membership benefits (Patient Satisfaction Survey) and activities.
The Board will continue to meet once and teleconference regularly in 2015. Group and Institutional Member contacts will be routinely included in ANCO Board meetings. ANCO and MOASC Boards of Directors will continue to be invited to each other’s meetings.

- FY2014 will end with a deficit of approximately $3,600 and assets of approximately $490,000. (Exact financial information will be available after December 31st, 2014.)

The FY2015 budget will be balanced with an excess of expenses over revenues ($1,200). There will be an increase in Corporate Membership dues for 2015 (for the first time in the history of the Association). The $50 contribution to the California Oncology Political Action Committee, or CalCancerPAC, will continue to be included (on a voluntary basis) in the basic membership dues. CalCancerPAC raises funds in support of candidates in California friendly to cancer care.

- $205,500 was raised through ANCO’s Corporate Memberships during 2014. Eight (8) new Corporate Members were added to the roster in 2014 (i.e., Alexion Pharmaceuticals, Dendreon, Foundation Medicine, Gilead Sciences, Helsinn Oncology, NanoString, Pharmacyclics, and Sargas Pharmaceutical Adherence & Compliance (SPAC) International) and five (5) Corporate Members did not renew their memberships for 2014 (i.e., ARIAD Pharmaceuticals, Biodesix, Dfine, eviti, and ProStrakan).

ANCO is very appreciative of the support provided by our Corporate Members:

**Diamond Level**
($10,000 and more per year)

AMGEN • Astellas Oncology • Bayer Healthcare Pharmaceuticals/Onyx Pharmaceuticals
Bristol-Myers Squibb Oncology • Cardinal Health Specialty Solutions • Celgene • Eisai
Genentech BioOncology • Genomic Health • Janssen Biotech • Lilly Oncology • Millennium
Novartis Oncology • Onyx Pharmaceuticals • Pharmacyclics • Teva Oncology

**Gold Level**
($5,000 to $9,999 per year)

McKesson Specialty Health • Merck • NanoString • Pfizer Oncology • Sanofi Oncology
Seattle Genetics

**Silver Level**
($1,000 to $4,999 per year)

Agendia • Alexion Pharmaceuticals • AMAG Pharmaceuticals • Axess Oncology
Boehringer Ingelheim Pharmaceuticals • Daiichi Sankyo • Dendreon • Foundation Medicine
Genoptix Medical Laboratory • Genzyme • Gilead Sciences • Helsinn Oncology • Incyte • Innovatix
Current Corporate Members will be asked to renew and encouraged to increase their membership support level in 2015. Non-renewing Corporate Members will be asked to rejoin ANCO. And, several new Corporate Memberships will be solicited. A Sustaining Level Corporate Membership ($20,000) will be introduced for 2015 and other category membership dues will be increased for the first time.

• ANCO has three Institutional Members—Stanford University, UC Davis, and UC San Francisco. In addition, ANCO has one Group Member—The Permanente Medical Group.

Current Group and Institutional Members will be asked to renew and additional organizations will be invited to join.

• There are currently 203 physician members in ANCO, an increase of 36 (7.7 %) from 2013. Of these, 172 are community (161) or government (1) based hematologists/oncologists, 10 are retired from full-time medical practice, 227 are affiliated with one of the three regional academic cancer centers—Stanford University (80), UC Davis (46), and UC San Francisco (101)—and 104 practice at The Permanente Medical Group (at 20 locations). Eighty-five (89) members practice at six (6) multi-site (often multi-disciplinary) community practices (ranging in size from 8 to 23 physicians at 2 to 6 sites). Finally, 72 members practice in 40 single-site practices (ranging in size from 1 to 6 physicians).

Individual members will be asked to renew and new memberships will be solicited in 2015.

Advocacy
ANCO advocates on behalf of all hematologists/oncologists to improve the healthcare environment for physicians, their nurses and practice managers, and people living with cancer. In general, the Board deliberated on and recommended policies, and was represented and communicated these policies at a variety of forums in 2014.

Specifically:

• ANCO sent representatives to ASCO’s State Affiliate Council meetings.

• ANCO continued its relationship with Noteware Government Relations, a Sacramento-based advocacy firm; monitored cancer-related and general medical legislation; and, worked with the CMA to help pass, improve, and/or defeat cancer-related legislation, amongst other pieces of legislation; including,
- AB209, would delay implementation of SB866 (2011) establishing a uniform prior authorization process until 2015. ANCO supports this legislation.

- AB1202 (2012), would adopt occupational safety and health standards with the input of oncologists for the handling of antineoplastic and other hazardous drugs in health care facilities regardless of the setting; supported by ANCO, signed by Governor; ANCO provided input on the development of these standards in advance of draft regulations (expected before the end of 2014).

- AB1886, would remove a requirement for the Medical Board of California (MBC) to remove website postings of disciplinary and certain legal actions against a licensed physician after ten (10) years and all the indefinite online posting of such information. ANCO opposed this legislation; the Governor signed this legislation.

- AB2139, would require a physician to notify a patient of their legal end-of-life options upon making a diagnosis that the patient has a terminal illness. ANCO opposed this legislation; the Governor signed this legislation.

- AB2400, would prohibit so-called “all products clauses” from physician contracts with health plans. ANCO supports this legislation.

- AB2418, would help increase patient adherence to prescription medications by streamlining the prescription refill process. ANCO supported this legislation; the Governor vetoed this legislation.

- SB1004, would propose the development of a pilot project to determine whether to include a palliative care benefit under the MediCal program; ANCO supported this legislation; the Governor signed this legislation.

- SB1052, would direct the Department of Insurance and the Department of Managed Health Care to develop and mandate a standard formulary template for use by health plans by 2017. ANCO supported this legislation; the Governor signed this legislation.

- SB1215, would eliminate the in-office exception to the self-referral prohibition for advanced imaging, radiation therapy, anatomic pathology, and physical therapy. ANCO opposes this legislation.

- SB1258, would require e-prescribing of controlled substances, reporting of Schedule V controlled substances to the CURES database, expand government access to CURES, and dictate the quantity of controlled substances allowed to be prescribed. ANCO opposes this legislation.

- Hematology/Oncology, as represented by ANCO and MOASC, was represented at the CMA’s Specialty Delegation, Council on Legislation, and House of Delegates.

- ANCO and MOASC raised funds for CalCancerPAC that supports candidates and legislators friendly to hematology/oncology.
• ANCO communicated with Noridian/JEMAC to discuss Medicare issues in California and the Department of Health Care Services to discuss Medicaid (DHCS/MediCal) issues.

• ANCO communicated its concern with coverage policies at a variety of private insurance companies, IPAs, and the California Technology Assessment Forum (CTAF)

ANCO will continue to advocate on behalf of its constituents before government agencies, payers and corporations, and medical societies in 2015. The Board of Directors welcomes and encourages feedback from members on issues of importance that require organizational intervention and advocacy efforts.

Meetings
The ANCO Board of Directors continued to implement its clinical and professional educational strategy in 2014.

Specifically:

• Clinical Education Meetings. Two (2) ANCO-organized clinical education meetings took place in 2014:

San Antonio Breast Cancer Symposium Highlights 2013 (with A. Jo Chien, M.D., Kathleen Horst, M.D., Hope S. Rugo, M.D., and Anthony D. Yang, M.D.)

ASCO Highlights 2014 (with Rebecca Ann Brooks, M.D., Scott Christensen, M.D., Siddhartha Mitra, M.D., Ph.D., Chong-Xian Pan, M.D., Ph.D., George W. Sledge, Jr., M.D., Katherine Van Loon, M.D., M.P.H., and Heather Wakelee, M.D.)

Hematological Malignancies Updates (with Bruno Medeiros, M.D., Joseph Tuscano, M.D., and Jeffrey Wolf, M.D)

ANCO also cooperated in marketing ACCC, ASCO, ASH, and Corporate and Institutional Member meetings; and, other oncology meetings in 2014.

In 2015, ANCO will repeat its San Antonio Breast Cancer Symposium Highlights and host an ANCO event at ASCO’s Best of ASCO in San Francisco.

• Professional Education Meetings. ANCO’s professional education meetings and webcasts present speakers on topics about the management of office-based medical practices and hematology/oncology reimbursement techniques. Participants not only learn at these meeting, but they also form a network of resources to turn to when billing and reimbursement and management issues arise. Two (2) successful professional education meetings/webcasts were held in 2014:
Medicare Reimbursement for Oncology 2014 (with Roberta Buell, M.B.A., and Cheryl Bradley, Noridian/JEMAC)

Does Your Practice Measure Up? ANCO’s Patient Satisfaction Survey Program Can Help You Find Out (with Thomas P. Jeffrey, President, SullivanLuallinGroup)

A full schedule of quarterly professional education meetings and webcasts on timely issues of importance is anticipated for 2015.

Information Dissemination

The ANCO FAX News, a biweekly summary of advocacy, educational, membership, and Association news, was FAXed to each member practice and e-mailed to ANCO Group and Institutional Members and Corporate Member contacts (for redistribution to their colleagues). The California Oncology Weekly, a joint publication with MOASC, is e-mailed and FAXed to the same audience weekly. ANCO FAX/e-mail broadcasts kept members and others up-to-date on important information to hematology/oncology practices.

ANCO maintained an updated online edition of the Directory of Members in 2014. Besides a comprehensive listing of ANCO physician members, nurses, and managers, the Directory also includes an updated list of Corporate Member drug reimbursement and patient assistance programs, and ANCO’s Articles of Incorporation and By-Laws. Both the Directory and drug reimbursement and patient assistance programs will be regularly updated at www.anco-online.org/ANCODIR.pdf and www.anco-online.org/assistance.html, respectively.

ANCO’s independent website (www.anco-online.org) is a major resource to members on all matters related to the Association.

The ANCO FAX News, California Oncology Weekly, and FAX/e-mail broadcasts will continue to evolve and inform members and the hematology/oncology community of issues of importance in 2015.

Information

For more information about ANCO membership and activities, please contact:

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