INTRODUCTION

The ANCO FAX News focuses on ANCO’s core activities—advocacy, clinical and professional education, and Association news. While membership mailings and e-mail or FAX broadcasts continue, the ANCO FAX News summarizes this information in a regular forum of important news to members. Contact the ANCO office for additional information regarding any item published in the ANCO FAX News or to contribute items.

The ANCO FAX News is FAXed to Individual Member practices, and e-mailed to Group, Institutional, and Corporate (contacts) Members. The next regular ANCO FAX News will be published on November 16th. Send your comments or contributions to ANCO, P.O. Box 151109, San Rafael, CA 94915-1109; Voice: (415) 472-3960; FAX: (415) 472-3961; execdir@anco-online.org.

ADVOCACY

[Editor’s Note: ANCO meets regularly with national, regional, and statewide organizations to discuss issues of importance to hematology/oncology practices and people living with cancer. We continually seek input from members on agenda items for these meetings. Send your issues to the ANCO office.]

ACCC, ASCO, ASH, and National Legislative & Regulatory Issues

[Editor’s Note: ANCO is a member of the Association of Community Cancer Centers (ACCC) and a state/regional affiliate of the American Society of Clinical Oncology (ASCO). ANCO and the American Society of Hematology (ASH) share information with members. We regularly participate with these organizations on matters of national importance to cancer care.]

One Voice Against Cancer, a coalition of public interest groups—including ASCO—representing millions of cancer researchers, doctors and other health professionals, patients, and survivors and their loved ones, sent a letter urging members of Congress to work together to avoid across the board budget cuts (i.e., sequestration) that would stall progress in the...
prevention, detection, and treatment of cancer. Sequestration cuts are scheduled to be implemented on January 2nd, 2013 and would include a $2.5B cut in medical research at the National Institutes of Health, including more than $450M from cancer research.

Physicians also face a 27% cut in their Medicare payments at the start of next year unless Congress passes legislation averting these cuts. According to Congressional sources, the House Republican leadership would like to push through a one-year “doc fix” at the end of this year though Congressional staff are also considering a three-month Medicare physician payment “patch” expiring at the end of March. The one-year fix is seen by some as the best-case scenario, but House Speaker John Boehner’s staff thinks a three-month patch is the most likely outcome since Congress would need to find a way to offset costs. The ASH Grassroots Network is mobilizing for the next fight in Congress to repeal the flawed sustainable growth rate (SGR) formula. Even with politicians hot on the campaign trail and primarily focused on the fast approaching November elections, ASH continues to remind lawmakers that yet another deadline looms large. Visit the ASH Advocacy Center at grassroots.hematology.org to facilitate your communication with your Congressional representatives.

According to a recent MGMA-ACMPE survey and as reported by Modern Healthcare, 45% percent of physician group practices say they would reduce appointments for new Medicare beneficiaries if Congress does not take steps to avert scheduled cuts to Medicare physician reimbursement. The survey included responses from more than 1,000 group practices with more than 26,000 practicing physicians. It found that 76% of respondents would reduce staff salaries and/or benefits if the cuts are not averted and 60% have delayed purchasing new equipment or facilities over the past decade because of payment instability from short-term fixes to Medicare’s SGR. Meanwhile, 18% of respondents said they are participating in a new Medicare payment delivery model or pilot project such as the Medicare Shared Savings-ACO program, the Pioneer ACO model, or bundled payments. ASCO’s comments on the proposed 2013 Medicare Physician Fee Schedule are available atascoaction.asco.org (Sep-13). The comments commend CMS for adding new oncology measures to the Physician Quality Reporting System (PQRS). ASCO believes these measures will increase the feasibility of PQRS participation for oncologists. ASCO’s comments also question the proposed “value based modifier” program and the lack of measures to guard against under-utilization of and disparities in cancer care; and, addressed e-prescribing incentive programs, the proposed post-discharge care coordination G-code, and the lack of a permanent fix to the SGR.

ASH’s detailed summary and analysis of the proposed Medicare Physician Fee Schedule for 2013 is available at www.anco-online.org/ASH2013Analysis.pdf and ASH’s comments are at www.hematology.org/Advocacy/Testimony/ (8/29/2012). ASH’s comments focus on recommendations about the proposed code for transitional care management services and how it will apply to hematologists and other medical subspecialists. They also noted concerns regarding payment for molecular pathology codes, anticoagulation management, and practice expenses for chemotherapy codes. ASH also recommended that CMS include an exemption for physicians that cannot report any Medicare-approved PQRS measures because of their subspecialization and patient population. ACCC’s analysis is available at www.acc-cancer.org/advocacy/pdf/2013-PFSProposedRule.pdf. Listen to a recording of ACCC’s teleconference on the CMS proposed rule at www.acc-cancer.org/members_only/. The Community Oncology Alliance’s (COA) analysis is available a www.communityoncology.org. COA has created a new administrator tool to help you measure the potential impact of changes to the Medicare Physician Fee Schedule under a number of scenarios at can.communityoncology.org (registration required).

ASCO members should have received ASCO’s national survey on the impact of oncology drug shortages on their practice via e-mail in early October. The questionnaire is intended to help ASCO and its membership understand the impact of legislation and administration efforts to mitigate drug shortages. The anonymous survey
includes 10 questions and should take less than five minutes to complete. Please check your e-mail for the survey link; contact cancerpolicy@asco.org if you did not receive the link via e-mail.

If your practice is experiencing a shortage of a particular therapy, the American Society of Health-System Pharmacists (ASHP) has prepared guidance for purchasing drugs in short supply at www.ashp.org/DocLibrary/Policy/DrugShortages/Purchasing-Drug-Products-in-Short-Supply.aspx and guidelines on managing drug product shortages at www.ashp.org/s_ashp/docs/files/BP07/Procure_Gdl_Shortages.pdf. A patient update from the FDA is available at www.fda.gov/ForConsumers/ConsumerUpdates/ucm258152.htm. Price gouging is a by-product of drug shortages and falls under the enforcement authority of the Federal Trade Commission (FTC). It has investigated and filed suit against pharmaceutical firms for price gouging in the past. New complaints can be filed at www.ftccomplaintassistant.gov/. The ASHP encourages physicians to report price gouging to their State Attorney General’s office (oag.ca.gov/).

CMS’s Physician Quality Reporting System (PQRS) provides a financial incentive for eligible professionals to participate in a voluntary quality-reporting program. Eligible professionals who successfully report a designated set of quality measures on claims may earn a lump sum bonus payment of .5% of Medicare Physician Fee Schedule charges for 2012. CMS has posted 2012 PQRS educational products at www.cms.gov/PQRS/. It is not too late to start participating in the 2012 PQRS. Visit www.palmettogba.com/j1b > News (07/31/2012) for more information. ASH provides user-friendly information on PQRS at www.hematology.org/Practice/PQRI/2941.aspx and has a web-based tool to help hematologists obtain the incentive payment. Visit hematology.pqriwizard.com/default.aspx for more information.

CMS’s Electronic Prescribing (eRx) Incentive Program webpage at www.cms.hhs.gov/ERxIncentive includes updated eRx educational products. Starting in 2012 (and based on eRx activities in 2011), physicians not using e-prescribing will be penalized (i.e., receiving 99% or one percent less of their Medicare Part B Physician Fee Schedule amount that would otherwise apply to such claimed services). CMS did not provide an advisory of the eRx penalty. All providers are urged to review 2012 remittance advices for claims submitted for services on or after January 1st and look for Claim Adjustment Reason Code (CARC) 237 and Remittance Advice Remark Code (RARC) N545. While CMS does not have a formal appeal process, physicians who have concerns or disagreements with their reimbursement status can call CMS’s QualityNet Help Desk (at 888-288-8912 or qnetsupport@sdsps.org) and explain their individual situation. Beginning November 1st, CMS will reopen the Quality Reporting Communication Support Page (through January 31st, 2013) to allow individual eligible professionals and CMS-selected group practices the opportunity to request a significant hardship exemption from the 2013 eRx payment adjustment.

CMS has finalized Stage 2 of the EHR Meaningful Use Incentive program that offers financial incentives to eligible healthcare providers for the adoption and use of an EHR. For Stage 2, eligible professionals must use their EHR to meet a total of 20 objectives; providers must meet all 17 core objectives, and then choose 3 additional measures to fulfill from a menu of 6 objectives. Providers must also report on clinical quality measures. With the Stage 2 rule, CMS has streamlined reporting for both Stages 1 and 2. For more information, go toascoaction.asco.org (October 9). CMA has analyzed the CMS reporting requirements and created a fact sheet about the final rule entitled Federal EHR Incentive Programs: Stage 2 of Meaningful Use and Changes to Stage 1. The fact sheet is available in CMA’s online resource library (www.cmanet.org/resource-library).

Oncologists who wish to receive their full incentive payment through the Medicare EHR Meaningful Use Incentive Program should begin participating in 2012. Those who do will receive a maximum of $44,000, but providers who begin next year will receive $39,000. Providers participating for the first time this year should remember to report on specific meaningful use
measures that will gauge the use of an EHR. In addition, physicians must report for 90 consecutive days in 2012, meaning that October 3rd was the last day this year to begin a reporting period. ASCO is happy to help address your EHR questions at ehr@asco.org.

ASCO will host a free webinar on November 13th from 1-2:30PM on avoiding Medicare payment reductions related to CMS reporting requirements for PQRS, eRx, and the EHR incentive programs. Physicians and their practice staff can earn more about Medicare reporting requirements and how to avoid reductions in reimbursement by participating in this webinar. For more information on reporting requirements, penalties, and registration for the webinar, please visit www.asco.org/cmsreporting.

The California Health Information Partnership & Services Organization (CalHIPSO; www.calhipso.org) provides education and training, EHR selection and implementation, and other technical services. The California HealthCare Foundation (CHCF) has published a series of papers entitled Electronic Health Record Deployment Techniques. The papers discuss Workflow Analysis, Training Strategies, Clinical Documentation, and Chart Abstraction. Visit www.chcf.org/publications/2010/03/ehr-deployment-techniques for more information. The California Medical Association’s (CMA) ROI Calculator helps physicians estimate savings and return on investment if they make the switch from traditional paper medical records to electronic health record (EHR) technology. In addition, CMA’s model EHR contract provides members with an example of a physician-friendly vendor agreement that can be used in negotiating vendor contracts. CMA has also published an Electronic Health Records Desk Reference (www.cmanet.org/resource-library/detail?item=ehr-desk-reference). For the latest information on health information technology (HIT), visit www.cmanet.org/hit/.

CMA, MOASC, and State Legislative & Regulatory Issues

[Editor’s Note: ANCO and the Medical Oncology Association of Southern California (MOASC) are members of the California Medical Association’s (CMA) Council on Legislation, House of Delegates, and specialty delegation. ANCO and MOASC coordinate advocacy activities in California. ANCO’s advocacy reporting is supported by a grant from Pfizer Oncology.]

CMA Practice Resources (CPR) is a monthly e-mail bulletin from CMA’s Center for Economic Services that is full of tips and tools to help physicians and their office staff improve practice efficiency and viability. Subscribing to CPR is free and open to anyone, but CMA membership is necessary to access the resources, toolkits, forms, and tools that are located on the members-only CMA website. Please visit www.cmanet.org/cpr to subscribe.

CMA’s contracting tool kit entitled Taking Charge: Steps to Evaluating Relationships and Preparing for Negotiations—A Focus on Payer Contracting helps physicians negotiate and manage complex third-party payer agreements. It is available free to CMA members at the members-only website. Nonmembers can purchase the tool kit for $100 in the CMA bookstore (call (800) 882-1262). This tool kit and several other CMA tool kits (i.e., Back to Basics: A Step-by-Step Guide to Maximizing Your Cash Flow, Getting Paid: Strategies to Maximize Reimbursement) aim at empowering physician practices vis-à-vis their relationships with private payers.

CMA has led the way in analyzing Federal health care reform and what it will mean to physicians. One key element of reform involves establishing Accountable Care Organizations (ACOs) as a new model of care. Under the new law, groups of physicians who see Medicare patients and agree to work together—meeting certain government requirements to qualify as an ACO—would be eligible for bonuses if they meet cost benchmarks for caring for their patient population and other criteria. CMA has adopted ACO and medical foundation principles for physicians to follow. For detailed information, please visit www.cmanet.org/news/detail?article=cma-creates-governance-guidance-for-new. In addition, the California HealthCare

**Palmetto/J1MAC, DHCS/MediCal, & Private Payers**

[Editor’s Note: ANCO communicates regularly with Palmetto/J1MAC that administers the J1MAC (Medicare) in California, and the Department of Health Care Services (DHCS) that administers DHCS/MediCal in California.]

CMS has awarded the Jurisdiction E A/B MAC contract to Noridian Administrative Services for Medicare Part B claims for covered services in California, Hawaii, and Nevada. The current Part A/B MAC is Palmetto GBA and they will continue to administer provider claims for up to six months as CMS oversees the transfer of these responsibilities to Noridian. For more information, please visit www.anco-online.org/mma.html. ANCO has learned that Palmetto GBA is appealing CMS’s decision and that no transition activities have been initiated.

**Palmetto/J1MAC is presenting free E/M workshops in Salinas (November 26), Monterey (December 3), and Daly City (January 14) designed for physicians/nonphysician practitioners (NPPs) and coding staff that will assist with introducing, applying, and selecting the proper E/M level of service. Go to www.palmettogba.com/j1b > Learning & Education > POE News (09/12/2012) for more information.**

**Palmetto/J1MAC has published guidelines/instructions on the appropriate use of modifier JW (drug wastage). Go to www.palmettogba.com/j1b > Browse by Topic > Modifier Lookup > HCPCS Modifier JW (10/23/2012) for more information.**

ANCO has learned that some members are in receipt of Medicare Recovery Audit Contractor (RAC; HealthDataInsights) letters requesting medical records about the use of Neulasta on the same day as chemotherapy. Please let the ANCO office (execdir@anco-online.org) know if you have received such letters. Please be prepared to provide ANCO with the dates of service covered by the letters and the protocols being impacted. ANCO encourages all members to comply with these requests in a timely fashion and appeal recoupments if appropriate.

Use Palmetto/J1MAC’s Redetermination Status Tool to find out if your redetermination request has been received and whether it is pending or completed. To access the Tool all you need is the ICN from your Medicare remittance notice for the claim you appealed. Go to www.palmettogba.com/j1b > Browse by Topic > Appeals (10/18/2012) for more information.

**Palmetto/J1MAC’s November Medicare Advisory is available at www.palmettogba.com > Publications > Medicare Advisory. Of specific relevance to oncology, the current edition features:**

- Updated ICD-10 Implementation Information
- Partial Code Freeze Prior to ICD-10 Implementation
- Notice of New Interest Rate
- LAB: New Waived Tests
- Revised and Clarified Place of Service (POS) Coding Instructions

For the latest CMS e-News (published weekly on Wednesday) visit www.palmettogba.com/j1b > Browse by Topic > General > CMS e-News.

**ANCO is working with CMA to clarify an item that was published in the June 2012 Medi-Cal Update (Bulletin 456). Item 26, Reimbursement Policy Update for Physician Administered Drugs states:**

Effective retroactively for dates of service on or after September 1, 2011, the reimbursement rate for physician administered drugs, including vaccines, will be equal to the Medicare rate of reimbursement, where applicable, or to the pharmacy rate of reimbursement when the Medicare rate is not available.

On October 1st, DHCS/MediCal posted the following item on its website:

On June 26, 2012, DHCS received approval from CMS for a SPA, effective date September 1, 2011, to establish the reimbursement rate for physician administered drugs (PADs)…equal to the CMS Medicare rate of
reimbursement...Implementation of the approved reimbursement methodology will start December 2012 and will initially apply to claims with dates of service beginning September 1, 2012, and forward. For claims transactions prior to September 1, 2012, DHCS is currently exploring the logistics involved in the implementation of the reimbursement methodology for that period.

DHCS/MediCal has identified December 31st as the final date that providers can submit claims in 4010/5.1/1.1 format. Effective on or after January 1st, 2013, all 4010/5.1/1.1 formatted claims will be rejected due to HIPAA non-compliance and will not be processed. This will result in non-payment of claims. Providers who have not yet converted to 5010/D.0/12 formats are strongly advised to do so before the December 31st deadline. Go to www.medical.ca.gov > HIPAA 5010/4010/NCPDP for more information.

UnitedHealthcare’s Network Bulletin for November includes new and/or updated coverage policies for Avastin, IVIG, and Lupron. Go to unitedhealthcareonline.com > Tools & Resources > News > Network Bulletin (Front & Center) for more information.

Did you know that California has a quick, easy, and free way for physicians to get help with claims payment problems? The Department of Managed Health Care’s (DMHC) Provider Complaint Unit (PCU) was created as an alternative way for physicians to resolve claims payment issues without having to go to court. An online Provider Complaint System evaluates claim reimbursement disputes such as timely submission and payment of claims, failure to pay according to contracts, coding disputes, and enforcement of the provider bill of rights. The PCU investigates and addresses individual claims problems and also systemic unfair payment or billing patterns among health plans. The DMHC is the State agency that regulates all California HMOs, and Anthem Blue Cross and Blue Shield PPOs. If you are a physician and would like to report a problem regarding claims payment, please contact DMHC at (877) 525-1295 or visit www.healthhelp.ca.gov. DMHC is interested in current preauthorization/certification, claims processing, and payment problems facing the hematology/oncology community. Visit www.anco-online.org/Resources.pdf for specific instructions on how to report your issues to DMHC. The independent dispute resolution process is described at www.hmohelp.ca.gov/dmhc.consumer/pc/pc_imr.aspx. Practices can review past DMHC enforcement actions at www.hmohelp.ca.gov/dmhc.consumer/pc/pc_arbitration.aspx; or, past independent medical review findings at www.hmohelp.ca.gov/dmhc.consumer/pc/pc_imrdec.aspx. (Read a history of California’s independent medical review process at www.chcf.org/publications/2012/01/independent-medical-review-history.)

EDUCATION

[Editor's Note: ANCO organizes clinical and professional education meetings throughout the year and throughout Northern California."

ACCC’s Webinar Course on Financial Assistance to Patients

ACCC is in the midst of its 10-part online course entitled The Financial Information and Learning Network for Community-Based Cancer Programs. The next course is available on November 30th and is entitled Reporting Processes and Data to Internal Stakeholders. These programs are designed for financial specialists, social workers, patient navigators, administrators, and other staff that provide financial assistance to patients and families. Visit www.accc-cancer.org/education/FinancialCounseling-Courses.asp for more information.

The Role of Oncology in ACOs and Value-Based Reimbursement Programs

ANCO will host a webcast entitled The Role of Oncology in ACOs and Value-Based Reimbursement Programs on November 28th at 12:30PM. Please join Matt Brow, Vice President of Public Policy & Reimbursement Strategy for McKesson Specialty Health and The US Oncology Network for a discussion of the current state of value-based reimbursement programs, ACOs, and the role of oncology practices in such structures.
This webcast is sponsored by Medivation/Astellas and Millennium. Watch for the meeting announcement in early November. Visit www.anco-online.org/Brow2012.html to download the registration instructions.

**ASCO’s Quality Care Symposium: Quality Matters**

ASCO is hosting its first *Quality Care Symposium: Quality Matters* in San Diego on November 30th-December 1st. Visit quality2012.asco.org for more information.

**54th ASH Annual Meeting**

The 54th ASH Annual takes place December 8-11th in Atlanta. Visit www.hematology.org/Meetings/Annual-Meeting/ for more information.

**SAVE THE DATE—ANCO’s Medicare Reimbursement for Oncology 2013**

ANCO will host its annual *Medicare Reimbursement for Oncology* programs in Sacramento, Fresno, and San José on January 2nd-4th, respectively. Roberta Buell, M.B.A., *onPoint Oncology*, will provide a comprehensive update of coding, billing, and reimbursement changes for Medicare; Arthur Lurvey, M.D., *Palmetto/J1MAC*, will also present the latest information on Medicare from the Contractor Medical Director’s perspective. Announcements will be mailed in mid-November.

**SAVE THE DATE—ANCO’s SABCS Highlights 2012**

ANCO’s annual *SABCS Highlights* will take place on January 16th at the *Four Seasons Hotel* in San Francisco. Faculty from *Stanford University, UC Davis*, and *UC San Francisco* will present and review the clinically most relevant results presented at December 2012’s *San Antonio Breast Cancer Symposium*. Announcements will be mailed in early December.

**Additional Education Meetings**

Other meetings of possible interest to ANCO member practices are:

- November 6th

  **Progress in the Treatment of Myelodysplastic Syndrome (MDS)**
  - CancerCare
  - Connect Education Workshop

- November 28th

  **Medical Update on Pancreatic Cancer**
  - CancerCare
  - Connect Education Workshop

- November 29th

  **Progress in the Treatment of Multiple Myeloma**
  - CancerCare
  - Connect Education Workshop

  **November 29th-December 1st**

  - *Joint International Oncology Congress (5th Symposium on Cancer Metastasis and the Lymphovascular System and the 8th International Sentinel Node Society Congress)*
  - Los Angeles

  (www.sn-cancermets.org/)

- December 12th

  **Understanding the Affordable Care Act (ACA) For People Living with Cancer**
  - CancerCare
  - Connect Education Workshop

- December 14th

  **Understanding the Molecular Portrait of Breast Cancer**
  - CancerCare
  - Connect Education Workshop

- December 20th

  **Update on Lymphoma from the 2012 ASH Annual Meeting**
  - CancerCare
  - Connect Education Workshop

Please contact the ANCO office for more information about these meetings.

**ASSOCIATION NEWS**

**Annual Election**

Four seats on the ANCO *Board of Directors* are up for election in 2012. ANCO seeks *nominations for candidates for these seats*. This year’s election will be conducted via mail ballot in December. Candidates with the top four vote totals will serve for three years (i.e., from 2013-...
2015, inclusive). Nominate an ANCO member (including yourself) to stand for election to the Board via e-mail/FAX to the ANCO office at execdir@anco-online.org/(415) 472-3961 no later than November 16th.

Board of Directors

The ANCO Board of Directors meets by teleconference and occasionally in person to discuss issues affecting the Association, clinical and professional education, and ways to better serve the membership. Board meetings are open to individual physician members. The next regularly scheduled ANCO Board of Directors teleconference will take place on November 15th. Please call José Luis González, ANCO Executive Director, at (415) 472-3960 if you wish to participate in a future teleconference/meeting.

Individual Member News

Peter Paul Yu, M.D., Palo Alto Medical Foundation, an ANCO member and past ANCO President, is running for ASCO President. The other candidate is Robin T. Zon, M.D., Michiana Hematology-Oncology (Indiana). ANCO urges all members to vote in the ASCO election through November 20th at www.asco.org/election. Results will be announced in January 2013.

An updated Directory of Members is available online at wwwancoonlineorgpubshtml as a .pdf document. We urge all ANCO members to download their own edition of The ANCO Directory of Members. The online edition is regularly updated. Therefore, please verify your Directory entry and contact the ANCO office at execdir@anco-online.org with any corrections, additions, and/or deletions.

Group Member News

ANCO initiated a Group Membership in 2008 based on a mutual set of perceived values and benefits and a mutual set of interests. The ANCO Board believes that the Association and The Permanente Medical Group (TPMG) will each receive value from Group Membership. ANCO thanks The Permanente Medical Group for joining ANCO.

ANCO initiated a Multi Site Group Membership in 2010 to encourage all physicians (medical and radiation oncologists) from multi-site and multidisciplinary practices to join. ANCO thanks Diablo Valley Oncology & Hematology Medical Group, EastBay Partners in Cancer Care, Pacific Cancer Care, Palo Alto Medical Foundation, Redwood Regional Oncology Center, and Valley Medical Oncology Consultants for their multi site group memberships.

Institutional Member News

ANCO initiated an Institutional Membership in 2002. Department(s) of Hematology and/or Oncology of accredited, degree granting teaching universities or research institutions are eligible for institutional membership. ANCO thanks the following Institutional Members for their support:

- Stanford University Medical Oncology
- University of California, Davis, Cancer Center
- University of California, San Francisco

UC San Francisco’s Head and Neck Cancer Update takes place in San Francisco on November 8th. For more information, please visit www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MOT13005B.

UC Davis and UC San Francisco in association with the International Association for the Study of Lung Cancer (IASLC) will host a Regional Symposium on the Multi-Disciplinary Management of Non-Small Cell Lung Cancer at the Sir Francis Drake Hotel in San Francisco on November 10th. For more information and to register, please contact Amanda Santangelo, Clinical Insights, at (212) 965-9358 x280 or amandasantangelo@clinicalinsights.net; or visit events.r20.constantcontact.com/register/event?llr=ah79pxdb&oeidk=a07e5wnlhea1da4d988&oeq=

UCSF’s Radiation Oncology Update: Cross-Platform Radiation Therapy in an Evidence-Based World takes place at The St. Regis Hotel in San Francisco on February 15-17th, 2013. For more information, please visit www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MRO13001.
Stanford’s 14th Multidisciplinary Management of Cancers returns on Friday and Saturday, March 8-9th, 2013. This meeting will take place at Stanford University. Watch for the meeting brochure in November.

For information on Institutional Member clinical trials (also see below), please visit:

- cancertrials.stanford.edu/
- https://ccresources.ucdmc.ucdavis.edu/cst/content/clinicaltrialspublicsearch.csr
- cancer.ucsf.edu/clinical-trials

Corporate Member News

ANCO thanks the following Corporate Members for their generous support that enables ANCO to provide services to the hematology/oncology community in Northern California, and to provide its members and their patients with substantial benefits in the areas of advocacy, education, and information dissemination:

Agenda • Allos Therapeutics • AMGEN
AMAG Pharmaceuticals • Ateliers Oncology
AstraZeneca • Baxter BioScience
Bayer Healthcare/Onyx Pharmaceuticals
Biosetix • Bristol-Myers Squibb Oncology
Cardinal Health Specialty Solutions
Celgene • Dendreon • Eisai
Genentech BioOncology • Genomic Health
GlaxoSmithKline Oncology • Incyte • Innovatisx
Janssen Biotech
Lash Group Healthcare Consultants
Lilly Oncology • McKesson Specialty Health
Medivation • Merck • Millennium
Novartis Oncology • Oncology Supply/ION
Onyx Pharmaceuticals • Pfizer Oncology
ProStrakan • Sanofi Oncology • Seattle Genetics
Spectrum Pharmaceuticals • Teva Oncology

We especially wish to thank and welcome AMAG Pharmaceuticals, Biosetix, Incyte, Innovatisx, Medivation, Onyx Pharmaceuticals, and ProStrakan as new Corporate Members for 2012. Alexion Pharmaceuticals, The Apothecary Shop, biogenIDEc, bioTheranostics, Boehringer Ingelheim Pharmaceuticals, Clarient Diagnostic Services, Myriad Genetics, and Pathwork Diagnostics did not renew their Corporate Membership for 2012. Please visit www.anco-online.org/assistance.html for updated Corporate Member drug reimbursement and patient assistance program information.

Bayer Healthcare/Onyx Pharmaceuticals will host a webcast for healthcare professionals on Stivarga on Thursday, November 8th. Visit www.revealinformededucate.com for more information and to register.

Cardinal Health Specialty Solutions’s VitalSource GPO has designed a web-based educational series focused on marketplace events that impact your practice every day. You are invited to participate in the next webcast entitled Medicare Changes—Staying Ahead of the Curve with Michelle Weiss. This webcast takes place on Wednesday, November 14th at 1PM. Visit cardinalhealth.event.com/events/medicare-changes-staying-ahead-of-the-curve/registration-e896bd9f9e4df2af3952ccc302399.aspx to register for this webcast or e-mail webconferences@cardinalhealth.com or call (888) 364-5228.

Genentech BioOncology informs ANCO that the United States Food and Drug Administration has approved a 90-minute infusion for Rituxan starting Cycle 2 for patients with non-Hodgkin’s lymphoma who did not experience a grade 3 or 4 infusion-related adverse reaction during Cycle 1. Patients with clinically significant cardiovascular disease and high circulating lymphocyte counts greater than or equal to 5000/mcl are not recommended to receive the faster infusion.

Teva Oncology informs ANCO that the United States Food and Drug Administration has approved Synribo for the treatment of adult patients with chronic or accelerated phase chronic myeloid leukemia (CML) with resistance and/or intolerance to two or more tyrosine kinase inhibitors (TKIs).

Publications, Resources, Services, & Surveys

In the next few weeks, ASH in collaboration with multiple specialty societies will randomly distribute an American Medical Association Relative Value Scale Update Committee (RUC) survey of the infusion codes 96365-96368 and chemotherapy infusion codes 96413, 96415,
and 96417. These services are utilized widely by ASH and ASCO members and their relative value units (RVUs) need to be accurate and fairly represented to CMS. Hence, it is very important that you complete the survey if you receive a copy. The survey will run from November 5th–21st. Read more at www.hematology.org/News/2012/9133.aspx.

ASCO is embarking on CancerLinQ, a multi-phase initiative that promises to change the way cancer is understood and treated. This rapid learning system will harness technological advances to connect oncology practices, measure quality and performance, and provide physicians with decision support in real time. Read more at www.asco.org/cancerlinq. CancerLinQ addresses the Institute of Medicine’s (IOM) core recommendations for learning health systems (see www.iom.edu/Reports/2012/Best-Care-at-Lower-Cost-The-Path-to-Continuously-Learning-Health-Care-in-America.aspx) and will be shared at ASCO’s inaugural Quality Care Symposium in San Diego.

The ASCO website now includes a Cancer Portals page that serves as a resource for physicians to discover the latest findings in various areas of cancer research through scientific abstracts, videos, links, and other materials. Visit www.asco.org > Practice & Guidelines > Cancer Portals.

ASCO’s Quality Oncology Practice Initiative (QOPI) is designed to promote excellence in cancer care by helping oncologists create a culture of self-examination and improvement. ASCO offers the QOPI Certification Program to recognize QOPI participants who achieve rigorous standards for cancer care. The QOPI Certification designation can be used by certified practices to demonstrate an advanced commitment to quality. For more information or to register, go to qopi.asco.org.

ASCO in Action has posted a new section containing useful resources for members on policy and practice issues. Under the new Resources tab on ASCO in Action, members can find information on insurance coverage for clinical trials, including Federal regulations for private insurance coverage, Medicare coverage information, and states laws and cooperative agreements. Check out the Resources tab now atascoaction.asco.org > Resources.

ACCC’s 2012 Patient Assistance and Reimbursement Guide helps community cancer centers meet the ongoing challenge of ensuring access to care for all patients with cancer. Expanded and updated, the Guide features a quick reference guide by drug name with links directly to the drug manufacturers, a list of pharmaceutical and non-pharmaceutical patient assistance programs, a patient assistance program flow chart, directions on how to apply and links to enrollment forms, and an in-depth look at the value of financial counselors. Visit www.accc-cancer.org/publications/publications-PAP.asp to access this resource.

The Community Oncology Alliance’s (COA) Administrators’ Network (CAN) website is available at can.communityoncology.org/#. Bobbi Buell is the CAN Web Mistress. The site includes a variety of presentations, tools, resources, and copies of her newsletter.