The ANCO FAX News focuses on ANCO’s core activities—advocacy, clinical and professional education, and Association and membership news. While membership mailings and e-mail/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. Find the ANCO FAX News online at www.anco-online.org/pubs.html.

In this issue:
• CMS’s core medical oncology quality measures
• 16th Multidisciplinary Management of Cancer—Register Now
• ASCO’s Clinical Cancer Advances 2016
• ASCO’s Survey of Oncology Practice Operations

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 March 4th. 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.

The ANCO FAX News has information for every member of your practice or organization. Pass it along!

- Physician Members
- Nurses & Office Managers
- Office Staff
- Colleagues & Representatives

The Association of Northern California Oncologists (ANCO) is an association of hematologists/oncologists dedicated to promoting high professional standards of cancer care by providing a forum for the exchange of ideas, data, and knowledge. The material contained in the ANCO FAX News is intended as general information for ANCO members. Because diagnostic, treatment, contracting, coding, and billing decisions should be made on a case-by-case basis, any such information contained in the ANCO FAX News may not apply in any given situation. Members are encouraged to contact their own consultants or advisors to obtain specific advice on matters relating to contracting, coding, and billing. The information contained in the ANCO FAX News should not be used as a substitute for such advice.
ADVOCACY
[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 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 meets regularly with these and other 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, COA, and National Legislative & Regulatory Issues

CMS has announced the development of seven sets of clinical quality measures developed by the Core Quality Measure Collaborative. The core measures include a set for medical oncology. Payors have committed to using these core sets of quality measures for reporting as soon as feasible. Access the medical oncology measures at www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Downloads/Medical-Oncology-Measures.pdf; read the CMS fact sheet at www.cms.gov/Newsmoor/MediaReleaseDatabase/Fact-sheets/2016-Fact-sheets-items/2016-02-16.html.

ANCO signed onto an ASCO “Thank You” letter to Vice President Biden regarding his “moon shot” cancer initiative. Specifically, ANCO thanks the Vice President and President for proposing $1B for the National Cancer Moon Shot. Read the letter at asco1.sharefile.com/share?cmd=d&cid=5b9d3ae6686e43958#view/s5bd3ae6686e43958_k=xk5lg9; read more about ASCO’s efforts in this regard at www.asco.org/advocacy/asco-official-participates-vice-president’s-“moonshot”-launch.

ASCO has released a new policy statement with recommendations to ensure that clinical pathways in oncology promote—and not hinder—the care of patients with cancer. Published in the Journal of Oncology Practice, the statement asserts that the way in which these treatment management tools in cancer care have proliferated raises significant concerns about patient access, care quality, and transparency in pathway development and implementation. Read ASCO’s policy statement at jop.ascopubs.org > Featured Content.

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) introduced significant changes, on an ambitious timeline, to how Medicare will pay oncologists for the care they provide—and now is the time to understand and prepare for these changes. Besides repealing the Sustainable Growth Rate formula for reimbursement related to the Medicare Physician Fee Schedule, MACRA’s goal is to move Medicare toward a value-based practice environment that ensures high-quality, affordable health care. Learn more about MACRA at www.asco.org/macra and www.hematology.org/Advocacy/Policy-News/2015/4702.aspx. Download ASCO’s presentation on MACRA at www.asco.org/sites/www.asco.org/files/macra_december_2015_webinar_slides.pdf. For an introduction to MACRA, read MACRA: Transforming Oncology Practice at www.asco.org/advocacy/asco-action-brief-macra. ASH staff have prepared a document that provides information about the Alternative Payment Model (APM) option included in MACRA at www.hematology.org/Advocacy/Policy-News/2016/4855.aspx. The American Medical Association’s (AMA) Guide to Physician-Focused Alternative Payment Models describes seven different APMs under MACRA that can help physicians in every specialty redesign the way they deliver care in order to improve patient care, manage health care spending, and qualify for APM annual bonus payments. Download the Guide at download.ama-assn.org/resources/doc/washington/alernative-payment-models-physician-guide.pdf.

ASCO has released a proposal to significantly improve the quality and affordability of care for cancer patients. The ASCO proposal would fundamentally restructure the way oncologists are paid for cancer care by providing sufficient payment to support the full range of services that cancer patients need and removing the barriers created by the current payment system to delivering high-quality, affordable care. ASCO’s Patient-Centered Oncology Payment: Payment Reform to Support Higher Quality, More Affordable Cancer Care (PCOP) proposal is designed to simultaneously improve services to patients and reduce spending for Medicare and other payers. Review ASCO’s proposal at www.asco.org/paymentreform.

CMS has finalized a rule that will require providers to return Medicare overpayments going back six years. Read more about this rule at...
Electronic claims must be submitted as follows:

- Claims with ICD-10 diagnosis codes must use ICD-10 qualifiers; all claims for services on or after October 1, 2015, must use ICD-10.
- Claims with ICD-9 diagnosis codes must use ICD-9 qualifiers; only claims for services before October 1, 2015, can use ICD-9.

How to use ICD-10 qualifiers:

- For ASC X12 837P 5010A1 claims, the HI01-1 field for the Code List Qualifier Code must contain the code ABK to indicate the principal ICD-10 code being sent. When sending more than one diagnosis code, use the qualifier code ABF for the Code List Qualifier Code to indicate up to 11 additional ICD-10 diagnosis codes that are sent.
- For ASC X12 837I 5010A1 claims, the HI01-1 field for the Principal Diagnosis Code List Qualifier Code must contain the code ABK to indicate the principal ICD-10 code being sent. When sending more than one diagnosis code, use the qualifier code ABF for each Other Diagnosis Code to indicate up to 24 additional ICD-10 diagnosis codes that are sent.
- For NCPDP D.0 claims, in the 492.WE field for the Diagnosis Code Qualifier, use the code 02 to indicate an ICD-10 diagnosis code being sent.

ASH has conversion charts for the most common hematologic ICD-10 codes as well as a pocket guide for ICD-10 coding for benign hematologic diseases at www.hematology.org/Clinicians/Practice-Policy/2325.aspx.

CMS has extended the 2015 PQRS data submission timeframes:

- EHR Direct or Data Submission Vendor (QRDA I or III) by March 11th
- Qualified Clinical Data Registries (QCDRs; QRDA III) by March 11th
- Group Practice Reporting Option (GPRO) Web Interface by March 11th
- Qualified Registries (Registry XML) by March 31st
- QCDRs (QCDR XML) by March 31st

Because of a delay in the publication of regulations governing the Medicare meaningful use program, CMS is allowing eligible physicians to apply for an exemption under the “extreme and uncontrollable circumstances” category. Physicians are urged to preemptively file for a 2015 hardship exemption to avoid penalties in 2016. The deadline for applying for the exemption is March 15th. Go to www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentive Programs/paymentadj-hardship.html for more information. Alternatively, visit ASCO’s update at www.asco.org/advocacy/congress-passes-legislation-allowing-cms-expedite-stage-2-meaningful-use-hardship-0.

CMA, MOASC, and State Legislative & Regulatory Issues

The California Oncology Political Action Committee (or CalCancerPAC), formed by ANCO and MOASC, supports candidates sensitive to the needs of hematologists/oncologists and people living with cancer in California. ANCO membership dues include a contribution to CalCancerPAC.

The California Medical Association (CMA) has released guidance for prescribing lethal doses of medication under California’s new physician assisted death law (ABX2-15). CMA’s The California End of Life Option Act is available at www.cmanet.org/resource-library/detail?item=the-california-end-of-life-option-act. The CMA guidance details the legal and medical steps physicians must take before prescribing life-ending medication and physicians’ legal rights to participate or opt out based on their moral or religious beliefs. The guidelines are written in a Q&A format and provide detailed information about the new law. However, they do not currently recommend what type of drug physicians should use to facilitate aid-in-dying and they state that physicians can choose not to assist patients to end their own lives. ABX2-15 will not become law until 90 days after the
adjournment of the legislature’s current special session on healthcare financing.

Sacramento can be a dangerous place for doctors. Many bills impacting medicine wind their way through the Capitol on their journey to the Governor’s desk. And, many of these bills threaten the medical profession with the backing of powerful lobbyists and PACs. It’s critical that physicians have an advocate at work for them every day and who knows how to speak on their behalf. That advocate is the California Medical Association (CMA). While physicians keep a close eye on their patients, CMA is keeping a close eye on those bills…and more. Got payment delays? Feeling victimized by payers and overwhelmed by the process? Don’t let the health plans mistreat you. The CMA’s Center for Economic Services (CES) has a team of reimbursement specialists available to assist ANCO’s CMA members experiencing payment problems with third-party payers. For membership, please call (916) 551-2042; for reimbursement assistance, please call CMA’s Reimbursement Helpline at (888) 401-5911.

Forthcoming CMA webinars include:
- CMS Physician Compare Website (February 23, 24, 25)
- HIPAA Compliance: Key Risks All Physicians Should Know (February 24)
- Closing a Medical Practice (March 9)

Contact CMA’s member help center at (800) 786-4262 or memberservice@cmanet.org for more information. Register online at www.cmanet.org/events.

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.

Noridian/JEMAC, DHCS/MediCal, & Private Payers

Noridian Administrative Services is the Jurisdiction E (JE) Medicare Administrative Contractor (MAC). Jurisdiction E includes California. Regularly review postings at the Noridian/JEMAC website at med.noridianmedicare.com/web/jeb. Recent updates include:
- MLN Connects Provider eNews Announcements—EHR Incentive Programs: Clinical Decision Support Interventions; EHR Incentive Programs: New Tipsheet on Eligibility for Broadband Access Exclusions Claims, Pricers, and Codes—Qualifiers for ICD-10 Diagnosis Codes on Electronic Claims
- Events—Provider Enrollment Revalidation Call-Register Now; Physician Compare Public Reporting Information Sessions
- Publications & Videos—Telehealth Services Fact Sheet-Revised; Reading a Professional Remittance Advice Booklet-Reminder
- New Waived Tests CR9515
- HCPCS Codes Subject to and Excluded from CLIA Edits CR9502
- ASP Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files April 2016 CR9536
- MolDX: HLA-B 15:02 Genetic Testing Final LCD-Effective April 1, 2016
- MolDX: Molecular RBC Phenotyping Final LCD-Effective April 1, 2016

Noridian/JEMAC’s Electronic Data Interchange Support Services (EDISS) invites you to subscribe to its e-mail distribution list to receive current information at www.edissweb.com/cgp/news/index.html.

Subscribe today to receive the DHCS/Medi-Cal Subscription Service (MCSS) via e-mail. The MCSS is a free service that can help keep you up-to-date on the latest DHCS/MediCal news. Go to the MCSS Subscriber Form (files.medicalexchange.ca.gov/pubsdoco/mcss/mcss.asp), enter an e-mail address and a ZIP code, and customize your subscription by selecting the specific subject areas you are interested in. For more information about MCSS, visit the MCSS Help page at files.medicalexchange.ca.gov/pubsdoco/mcss/mcss_help.asp.

A list of DHCS/MediCal webinars is at files.medicalexchange.ca.gov/pubsdoco/newsroom/newsroom_23149.asp?utm_source=...
Anthem (formerly Wellpoint) is offering California oncologists a monetary incentive for each patient who receives treatment as specified by one of the insurer’s recommended regimens. Learn more about the Anthem program at www.cancercarequalityprogram.com. ANCO members are encouraged to review Anthem’s Cancer Care Quality Program Treatment Pathways and send their comments to ANCO at execdir@anco-online.org. ANCO’s comments on the Program and Anthem’s response are available online at www.anco-online.org/index.html.

EDUCATION

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

REGISTER NOW
16th Multidisciplinary Management of Cancers: A Case-Based Approach

The 16th Multidisciplinary Management of Cancers: A Case-Based Approach returns to the Silverado Resort and Spa in Napa on March 18-20th. The meeting is sponsored by the Stanford University School of Medicine and the Association of Northern California Oncologists and presented in collaboration by the Stanford Cancer Institute, UC Davis Comprehensive Cancer Center, and the UCSF Helen Diller Family Comprehensive Cancer Center. Download the meeting brochure and register at med.stanford.edu/cme/courses/2016/multicancer2016.html.

ASCO Annual Meeting

Registration and housing for the 2016 ASCO Annual Meeting, June 3rd-7th, at McCormick Place in Chicago is now open. Reserve your room and register at am.asco.org/.

Additional Education Meetings

Other meetings of possible interest to ANCO member practices are:

February 24th
Update on Pancreatic Neuroendocrine Tumors
CancerCare
Connect Education Workshop

February 26th
When the Diagnosis is Cancer of Unknown Primary: Guidelines for Care
CancerCare
Connect Education Workshop

March 2nd-4th
Cancerscape: Policy, Value & Quality (ACCC 42nd Annual Meeting)
Association of Community Cancer Centers
Washington, D.C.
(www.accc-cancer.org/meetings/AM2016.asp)

March 9th
Progress in the Treatment of Oral and Head and Neck Cancer
CancerCare
Connect Education Workshop

March 10th
Treatment Update on Mantle Cell Lymphoma
CancerCare
Connect Education Workshop

March 11th
New Perspectives in the Treatment of Advanced Skin Cancer: Basal Cell and Squamous Cell Cancers (Part I of Living with Advanced Skin Cancer)
CancerCare
Connect Education Workshop

March 17th
Managing the Cost of Care When You Have Lymphoma
CancerCare
Connect Education Workshop

March 18th
Emerging Treatments for Metastatic Melanoma (Part II of Living with Advanced Skin Cancer)
CancerCare
Connect Education Workshop

March 19th
A Look at Where We are Now—Moving Forward: 15th Annual Allison Taylor Holbrooks Barbara Jo Johnson Breast Cancer Conference
Cancer Prevention Institute of California
San Francisco
(www.cpic.org)

March 22nd
Treatment Update on Colorectal Cancer
CancerCare
Connect Education Workshop

March 23rd
Progress in the Treatment of Myeloproliferative Neoplasms (MPN; Part I of Living with Myeloproliferative Neoplasms)
CancerCare Connect Education Workshop
March 24th Update on Glioblastoma CancerCare Connect Education Workshop
March 28th Update on Polycythemia Vera (Part I of Living with Polycythemia Vera) CancerCare Connect Education Workshop
March 30th Managing Aches and Pains, and Treatment Side Effects from Myeloproliferative Neoplasms (MPN; Part II of Living with Myeloproliferative Neoplasms) CancerCare Connect Education Workshop
April 1st The Role of Immuno-Oncology in the Treatment of Melanoma (Part III of Living with Advanced Skin Cancer) CancerCare Connect Education Workshop
April 4th Managing Eye and Vision Changes Related to Cancer Treatments CancerCare Connect Education Workshop
April 8th Advances in the Treatment of Renal Cell Cancer CancerCare Connect Education Workshop
April 11th Coping with the Stresses of Caregiving When Your Loved One Has Polycythemia Vera (Part II of Living with Polycythemia Vera) CancerCare Connect Education Workshop
April 12th Advances in the Treatment of Lung Cancer (Part I of Living with Lung Cancer) CancerCare Connect Education Workshop
April 13th The Role of Nutrition, Exercise and Meditation in Coping with Myeloproliferative Neoplasms (MPN; Part III of Living with Myeloproliferative Neoplasms) CancerCare Connect Education Workshop
April 14th Progress in the Treatment of Multiple Myeloma (Part I of Living with Multiple Myeloma) CancerCare Connect Education Workshop
April 14-15th The COA 2016 Community Oncology Conference—Innovation in Cancer Care: Moving from Theory to Practice Community Oncology Alliance Orlando, FL (www.coaconference.org)

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

**ASSOCIATION & MEMBERSHIP NEWS, RESOURCES, & BENEFITS**

**Board of Directors**

The ANCO Board of Directors teleconferenced on February 11th to discuss and/or act upon the following issues:

- **ANCO President & Vice President and FY2016 Budget**
- California ballot initiatives and legislative issues
- Multidisciplinary Management of Cancers educational program

Contact the ANCO office for additional information on any of these items.

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 teleconferences/meetings are open to individual physician members. The next regularly scheduled ANCO Board of Directors teleconference is scheduled for April 12th. 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**

A current Directory of Members is available online at www.anco-online.org/pubs.html as a .pdf document. We urge all ANCO members to download their own edition of The ANCO Directory of Members. 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 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 Annadel Medical Group/St Joseph’s Heritage Healthcare, California Cancer Associates for Research and Excellence, Diablo Valley Oncology & Hematology Medical Group, EPIC Care, Pacific Cancer Care, Palo Alto Medical Foundation, 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 Cancer Center
- University of California, Davis, Cancer Center
- University of California, San Francisco

**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:

- AbbVie • Alexion Pharmaceuticals • AMGEN
- Astellas Oncology • AstraZeneca
- Bayer Healthcare/Onyx Pharmaceuticals
- Biodex • Boehringer Ingelheim Pharmaceuticals
- Bristol-Myers Squibb Oncology
- Cardinal Health Specialty Solutions
- Celgene • Clovis Oncology • Daiichi Sankyo
- Dendreon • Eisai • Foundation Medicine
- Genoptix Medical Laboratory

- Genentech BioOncology • Genomic Health
- Gilead Sciences • Helsinn Oncology
- Incyte • Infinity Pharmaceuticals
- Ipsen Biopharmaceuticals
- Janssen Oncology • Jazz Pharmaceuticals
- Lilly Oncology • Merrimack Pharmaceuticals
- Medivation • Merck
- nanoString • Novartis Oncology
- Oncology Supply/IQN • Onyx Pharmaceuticals
- Pfizer Oncology • Pharmacyclics
- Prometheus Therapeutics & Diagnostics
- Sandoz Biopharmaceuticals • Sanofi Genzyme
- Sargas Pharmaceutical Adherence & Compliance (SPAC) International
- Seattle Genetics • Taiho Oncology
- Takeda Oncology • Tesaro • TEVA Oncology

We especially wish to thank and welcome **AbbVie**, **Biodex**, **Clovis Oncology**, **Infinity Pharmaceuticals**, **Ipsen Pharmaceuticals**, **Jazz Pharmaceuticals**, **Merrimack Pharmaceuticals**, **Prometheus Therapeutics & Diagnostics**, **Sandoz Biopharmaceuticals**, **Sanofi Genzyme**, **Sargas Pharmaceutical Adherence & Compliance (SPAC) International**, **Seattle Genetics**, **Taiho Oncology**, **Takeda Oncology**, and **Tesaro** as new Corporate Members for 2016. Please visit wwwanco-online.org/assistance.html for the [Corporate Member drug reimbursement and patient assistance program information](http://wwwanco-online.org/assistance.html). ANCO encourages all member practices to use this resource and enroll all patients at the start of treatment in all available and appropriate patient assistance programs.

**AMGEN** is hosting an ongoing webinar series entitled **2016 Medicare Updates** covering the 2016 Medicare Physician Fee Schedule and Outpatient Prospective Payment System as they relate to **AMGEN Oncology**, as well as other coding and Medicare developments of relevance to practice managers. Contact your **AMGEN** representative for more information.

**nanoString** informs ANCO that the updated ASCO guideline on the use of tumor markers in early stage breast cancer includes an update that if a patient has ER/PgR-positive, HER2-negative (node-negative) breast cancer, the clinician may use the PAM50 risk of recurrence (ROR) score (Prosigna Breast Cancer Prognostic Gene Signature Assay), in conjunction with other clinico-pathologic variables, to guide decisions on adjuvant systemic therapy. The guideline assigns the following parameters to Prosigna:

**Type=evidence-based; Evidence Quality=high; Strength of Recommendation=strong.**

**Novartis Oncology** has announced NDC changes for former **GlaxoSmithKline** products, as follows: Arzerra (1 vial x 50mL), new NDC #0078-0690-
Clinical Trial News

UC San Francisco brings the following oncology clinical trials (not previously listed or changed) to the attention of the ANCO membership:

- A Phase II/III Trial of Neoadjuvant FOLFOX, with Selective Use of Combined Modality Chemoradiation versus Preoperative Combined Modality Chemoradiation for Locally Advanced Rectal Cancer Patients Undergoing Low Anterior Resection with Total Mesorectal Excision (Alliance N1048). Contact: Samantha Maisel, (415) 502-3310, samantha.maisel@cc.ucsf.edu
- A Phase 3, Randomized, Double-blind, Controlled Study of Cabozantinib (XL184) vs Placebo in Subjects with Hepatocellular Carcinoma Who Have Received Prior Sorafenib (CC#13455). Contact: Blake Rosenthal, (415) 514-5633, blake.rosenthal@ucsf.edu
- An Open-Label, Parallel-Group, Multicenter, Phase I Study to Investigate the Pharmacokinetics of NKTR-102 for Injection (Etitinotecan Pegol) in Patients with Advanced or Metastatic Solid Tumors and Mild or Moderate Hepatic Impairment (CC#13955). Contact: Jeremy Burbanks-Ivey, (415) 514-6248, jeremy.burbanks-ivey@ucsf.edu.
- A Phase II Clinical Trial of Pembrolizumab (MK-3475) in Subjects with Select Biomarker Positive Advanced Solid Tumors (KEYNOTE-158). Contact: Wesley Goodman-Levy, (415) 514-6363, wesley.goodman-levy@ucsf.edu.
- Evaluation of Gallium-68 DOTA-TOC Imaging of Somatostatin Receptor Positive Malignancies. Contact: Thomas Hope, thmoas.hope@ucsf.edu.

• Randomized Phase II Study of Cisplatin and Etoposide versus Temozolomide and Capecitabine in Patients with Advanced G3 Non-Small Cell Gastroenteropancreatic Neuroendocrine Carcinomas (EA2142). Contact: Hannah Mills, (415) 353-7792; hannah.mills@ucsf.edu
• A Study of Safety, Tolerability, and Clinical Activity of MEDI4736 and Tremelimumab Administered as Monotherapy and in Combination to Subjects with Unresectable Hepatocellular Carcinoma. Contact: Andrea Bocobo, (415) 476-3755; andresgrace.bocobo@ucsf.edu
• A Phase I Study of AZD1775 (WEE1 inhibitor) Monotherapy in Patients with Advanced Solid Tumors (CC159513). Contact: Illaria Mastroserio, (415) 514-6245; illaria.mastroserio@ucsf.edu
• A Phase I, Open-Label, Dose-Escalation and Dose Expansion Study Evaluating the Safety, Pharmacokinetics and Pharmacodynamics and Clinical Effects of Orally Administered CB-5083 (AAA ATPase, p97 inhibitor) in Patients with Advanced Solid Tumors (CC149511). Contact: Jenna Zhang, (415) 514-8867; jenna.zhang@ucsf.edu

Further information is available at cancer.ucsf.edu/clinical-trials.

Publications, Resources, Services, & Surveys

ASCO has announced that immunotherapy is the top cancer advance of 2016. Recent breakthroughs in immunotherapy—along with almost 60 other important cancer research advances—are described in ASCO’s recently released report, Clinical Cancer Advances 2016: ASCO’s Annual Report on Progress Against Cancer available online at www.cancerprogress.net/cca/cancer-advances-2016.

ASCO’s CancerLinQ is a cutting-edge health IT platform that securely connects and powerfully analyzes real-world cancer care data from many data sources. Vice President Joe Biden recently discussed ASCO’s CancerLinQ as one of the major undertakings designed to advance the pace of progress in the fight against cancer at the World Economic Forum in Davos, Switzerland. Guided by ASCO’s expertise and mission to support all cancer physicians—in every community and every setting—and powered by the SAP HANA platform, CancerLinQ equips oncologists with a fast network of information to improve the quality of patient care and maximize outcomes. CancerLinQ will improve the care for all cancer patients and provide valuable tools to enhance practice efficiencies. We hope you can
join this effort to empower oncologists everywhere to deliver high-quality care to their patients. When your practice joins CancerLinQ, designated users will have access to view, query, and visualize:

- Data for individual patients they are treating
- Data specific to their practice
- Aggregated de-identified data on all patients from all CancerLinQ practices

Between now and June 1st, if your practice signs a participation agreement, you will receive the following additional benefits:

- Waived connection fee (a $50,000 minimum value)
- Waived user fees for 5 years
- Opportunity for national recognition alongside your professional society (ASCO)
- Open line of communication to help develop the next wave of CancerLinQ functionality

Watch a CancerLinQ presentation at www.asco.org/advocacy/watch-cancerlinq-llc-ceo-kevin-fitzpatrick’s-presentation-during-sap’s-big-data-webinar. For additional information, please see the FAQs at www.asco.org/sites/www.asco.org/files/cancerlinq_frequently_asked_questions.pdf and the Practice Kit at www.asco.org/sites/www.asco.org/files/clq_practice_kit.pdf. To set up an informational meeting, please contact Duane Heitkemper at (571) 344-9499 or duane.heitkemper@cancerlinq.com or Jeff Szykowny at (571) 242-9499 or jeff.szykowny@cancerlinq.org.

ASCO’s Clinical Affairs Department has released a new annual survey, the 2016 Survey of Oncology Practice Operations (SOPO), which seeks feedback on practice management. The business and operations data reported in this survey, open now through February 22nd, will be used to prepare benchmarks and standards in practice management, and all participants will receive a copy of the survey report. Take the survey at www.asco.org/advocacy/asco’s-clinical-affairs-department-opens-new-survey-practice-operations.

ASCO’s Practical Tips for the Oncology Practice (6th Edition) is a comprehensive business and management resource for oncology practices.

Recognizing the increasing burdens that oncology practices face in today’s healthcare delivery system, ASCO is releasing this guide with new information on Medicare reimbursement, ICD coding, and safe drug handling guidelines and requirements. The 6th edition is only available to download as an eBook giving practices enhanced search functions to easily find and access key information. Order the latest edition at store2.asco.org.

ASCO published an ASCO Core Curriculum for Cancer Survivorship Education in the Journal of Oncology Practice. The Curriculum consists of a set of recommended content areas and core competencies to be used to guide the education and training of physicians and other allied health professionals in addressing the needs of the growing number of cancer survivors. Read the article at jop.ascopubs.org/content/early/2016/01/21/JOP.2015.009449.full.pdf.

The February 2016 issue of ASCO’s Journal of Oncology Practice (JOP) is available online and features an article entitled ReCAP: Physician Experience and Attitudes Toward Addressing the Cost of Cancer Care. Visit jop.ascopubs.org for more information.

ASCO has released updated guidelines on the use of tumor markers in early stage breast cancer at jco.ascopubs.org/cgi/doi/10.1200/JCO.2015.65.2289.

CMS has approved ASCO’s Quality Oncology Practice Initiative (QOPI) as a qualified clinical data registry (QCDR), a pathway for oncologists to meet the agency’s current quality reporting requirements. Oncology practices registered with QOPI will have the opportunity to fulfill CMS’s PQRS or QCDR reporting requirements through QOPI. Go to www.asco.org/advocacy/cms-approval-new-platform-making-qopi-participation-easier for more information. 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.

ACCC’s online Oncology Drug Database provides quick access to information on oncology drug coding, billing, and reimbursement at www.accc-cancer.org/drugdatabase/.
ACCC’s enhanced set of Financial Advocacy Network resources are at www.accc-cancer.org/resources/FinancialAdvocacy-Overview.asp. This “one-stop” destination for comprehensive financial advocacy information includes online training materials, practical financial advocacy tools, peer-to-peer networking, and more.

ACCC’s 2016 Patient Assistance and Reimbursement Guide is an essential tool for cancer program staff to use in helping patients with issues related to the cost of treatment and in meeting reimbursement challenges. The Guide features a list of pharmaceutical and non-pharmaceutical patient assistance programs (PAPs), including directions on how to apply and links to enrollment forms. New for 2016 are tips for optimizing co-pay assistance programs and new financial advocate skills for the new healthcare environment. Visit www.accc-cancer.org/publications/pdf/Patient-Assistance-Guide-2016.pdf to access this resource. In addition, ACCC has developed a tool for accessing patient assistance and reimbursement programs for use on a desktop, table, or mobile device. The Financial Advocacy Network (FAN) app is available at accc-fan-app.org. ASH also has a webpage (at www.hematology.org/Clinicians/Drugs/Programs/) that provides a consolidated list of resources for hematologists and patients trying to access high cost hematologic drugs. And, at NCCN’s Reimbursement Resource Room (www.nccn.org/reimbursement_resource_room/default.asp) you can select a cancer diagnosis or supportive care indication and learn about reimbursement help and services available to you. Finally, assistPoint is your website for complimentary one-stop cancer Patient Assistance. You can search by generic, brand name, manufacturer, or diagnosis for the enrollment forms you need; get enrollment form PDFs for 113 cancer drugs; get NDC numbers for all of those drugs; find the HCPCS J-code for each drug; get coding and billing guidelines for many drugs; and, learn more about the drugs you give. Go to www.assistpoint.com to learn more.

Whether you unable to attend the 57th ASH Annual Meeting or simply missed out on key sessions, you can access educational and scientific content from the meeting at ashondemand.org, including:

• ASH/FDA Joint Symposium on Late-Breaking Drug Approvals

• Genomics, the Next Frontier: Novel Approaches to Study Cancer and Development

• Update in Large Cell Lymphoma

• The ASH Choosing Wisely Campaign: Top Five Non-ASH Choosing Wisely Recommendations of Relevance to Hematology

• Best of ASH

The Community Oncology Alliance Administrator’s Network has a great set of resources. Tools are available for E&M services, HR forms, and dozens of other office forms. The resources are free, but join the Network for more information. The resources are available online at can.communityoncology.org/site/forms.htm.


NCCN has updated their Clinical Practice Guidelines in Oncology and/or Drugs & Biologics Compendium for older adult oncology (v1.2016) and published a new clinical practice guideline for vulvar cancer.

The Medical Group Management Association (MGMA) has a one-page spreadsheet to review and compare the performance of your major payors. The tool can be modified to meet the needs of any size or type of medical practice and is available at www.mgma.com/practice-resources/tools/payer-evaluation-spreadsheet-for-any-type-of-medical-practice.

Individual Membership Dues for 2016

Second notices of membership renewal for 2016 were mailed to all members in early February. If you have not yet done so, then please return your 2016 membership dues to ANCO now to ensure your inclusion in The ANCO Directory of Members. Be sure to provide ANCO with your e-mail address and the name(s) and e-mail address(es) of office and/or nurse manager contact(s). Those not renewing their membership by June 30th will be deleted from the Directory of Members, and will no longer be eligible for any ANCO benefits. Contact the ANCO office if you do not receive or misplaced your membership dues renewal notice.