

ANCO FAX News

Association of Northern California Oncologists
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INTRODUCTION

The *ANCO FAX News* focuses on ANCO's core activities—advocacy, clinical and professional education, membership benefits, and *Association* news. While membership mailings, FAX broadcasts, and ListServ postings 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 *ANCO FAX News* will be published on June 6th. 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.]

The United States Food and Drug Administration reports that injectable heparin products and heparin flush solutions may be contaminated with oversulfated chondroitin sulfate (OSCS). The FDA asks that health professionals and facilities please review and examine all drug/device storage areas, including

**There is information in the
ANCO FAX News
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.

emergency kits, dialysis units, and automated drug storage cabinets to ensure that all of the recalled heparin products have been removed and are no longer available for patient use. In addition, FDA would like to inform health professionals about other types of medical devices that contain, or are coated with, heparin. To read this update, and to learn how to report these problems to FDA, please visit www.fda.gov/cdrh/safety/heparin-healthcare-update.html. Please report to FDA adverse reactions associated with these devices, as well as any reactions associated with heparin or heparin flush solutions. If you have questions or would like more information about this request, please contact the FDA's *Division of Drug Information* at (301) 796-3400.

CMS has issued revised instructions on the acceptable uses of ESAs. Read the updated instructions at www.cms.hhs.gov/MLN MattersArticles/downloads/MM5818.pdf. ASCO's revised **instruction sheet on reporting hematocrit/hemoglobin in conjunction with claims for ESAs** and other anti-anemia drugs is now available at www.anco-online.org/ASCO_ESA_Reporting_2008.pdf. In addition, NHIC/Medicare reminds **providers to follow their instructions for ESA claims** (at www.medicarenhic.com/providers/articles/esacoverage_0108.pdf).

Noridian Administrative Services (NAS), the designated carrier for the CAP, offers interactive, online workshops about the CAP for Part B Drugs and Biologicals. These workshops train CAP vendors and elected physicians on a number of CAP topics and requirements such as billing for CAP claims, and NAS personnel are available to answer questions. Physicians and/or their staff are strongly encouraged to attend. Interested parties may view additional information about and register for these workshops at www.noridianmedicare.com/cap_drug/train/workshops/index.html. Upcoming workshops will be held on May 28th, June 24th, and July 24th.

CMS's Physician Quality Reporting Initiative (PQRI) establishes 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. CMS recently announced new reporting options and incentive payments for physicians participating in the PQRI. For complete information on PQRI, including teleconference materials, user guides, tool kits for successful reporting, beneficiary letters, and FAQs, visit www.cms.hhs.gov/PQRI. The next CMS PQRI teleconference is scheduled for May 28th. Visit www2.eventsvc.com/palmettogba/052808 for more information and to register. The *American Medical Association (AMA)* has posted PQRI worksheets for the 2008 PQRI program at its website (www.ama-assn.org). In addition, **ASCO has updated its PQRI website (www.asco.org/pqri) to include relevant links and a table of oncology-related measures.**

Electronic health records (EHR) are an important vehicle for advancing quality cancer care. To help oncology practices select, purchase, and implement an EHR, ASCO has developed a new handbook, *The Oncology Electronic Health Record Field Guide: Selecting and Implementing an EHR*—the only oncology-specific consumer manual designed to guide oncology practices in selecting current and future oncology-specific EHRs for clinical practice management and quality-of-care measurement and improvement. The chapters in the *Field Guide* address the core functionalities desired in an oncology-specific EHR, including:

- Identifying an EHR project team
- Selecting an EHR
- Building a budget
- Using the EHR to support quality of care and patient safety
- Post-implementation management

The *Field Guide* is available in hard copy as well as PDF. Electronic users can print worksheets and forms as they go through the *Field Guide's* material. Both formats of the *Field Guide* can be purchased by e-mailing support@articleworks.com or calling (800) 804-1425. More information is available at www.asco.org/ehrfieldduide. In addition, **ASCO is sponsoring its 2nd EHR Lab at the 2008**

Annual Meeting in Chicago. Attendees will have an opportunity to learn about EHR technologies appropriate for their practices and gain hands-on experience with the latest EHRs. Vendors will demonstrate the capacity of their products to provide clinical decision support and experts will be onsite to answer questions attendees may have about the adoption and use of EHR technology. The EHR Lab, located in McCormick Place, East Building, Room E253, will be open Friday, May 30th, 1-6PM, Saturday, May 31st, 9AM-5PM, and Sunday, June 1st, 9AM-5PM.

ANCO and ASCO continue to work towards ensuring that people with cancer have access to quality cancer care in the community. Practice resources are available at www.anco-online.org and www.asco.org/mma, including:

- ASCO's *Adapting to Changes in Medicare 2008 PowerPoint* presentation. (Also visit www.asco.org/janaudiocall for additional materials and a downloadable recording of the presentation.)
- The April 2008 quarterly update for the *Average Sales Price (ASP) Medicare Part B drugs pricing file*.

Members may also call/e-mail ASCO's billing and coding hotline at (703) 299-1054/practice@asco.org for up-to-date information on changes in coding for drug administration services, as well as billing and payments for drugs.

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) House of Delegates and Council on Legislation. ANCO and MOASC coordinate advocacy activities in California.]

Noteware Government Relations represents ANCO (and MOASC) in Sacramento. They report:

- In previous years, *Assemblymember* Patty Berg authored two physician-assisted suicide bills. ANCO opposed those bills and both failed. This year, *Assemblymember* Berg has a new approach with AB 2747, also opposed by ANCO, that would mandate a physician discuss two options for a patient with a terminal

diagnosis to end their lives—voluntary stopping of eating and drinking and palliative sedation. This legislation is pending on the *Assembly* floor and has until May 30th to be approved or die.

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.

A coalition of health care providers (including ANCO) led by CMA sued the state of California to stop the 10% cut in MediCal reimbursements scheduled to take effect on July 1st. The class action lawsuit, filed jointly by CMA, the *California Hospital Association*, the *California Dental Association*, the *California Association for Adult Day Services*, the California chapter of the *American College of Emergency Physicians*, the *California Pharmacists Association*, and the *California Association of Public Hospitals* seeks an immediate injunction to block the reduction in MediCal reimbursement rates. In February, the *Legislature* approved and the *Governor* signed into law a total of \$1.3B in cuts to the MediCal program in an effort to stem the state's budget crisis. The lawsuit, filed in Los Angeles County Superior Court, contends that the planned cuts violate state and federal laws which require that Medicaid (MediCal) payments "must be sufficient to enlist enough providers so that services under the (state's Medicaid) plan are available to recipients at least to the extent that those services are available to the general public." According to the complaint, the reimbursement cuts authorized in February were implemented "solely due to state budgetary woes, without regard to the impact on the availability of MediCal services." Such cuts are illegal, according to the complaint, and are "being imposed on a system already in crisis, wherein inadequate payment levels have resulted in a scarcity of willing providers, creating serious access hurdles for MediCal beneficiaries." California ranks last in the nation when it comes to payments to doctors, hospitals, and other providers who care for Medicaid (MediCal) patients. The state now has 30 days to file a response to the allegations.

At that point, the court will schedule a hearing.

CMA has learned that many physicians renegotiating their contracts with *Blue Cross of California* have been asked to sign an amendment to the insurer's *Prudent Buyer Plan Participating Physician Agreement*. Before signing any new contract or contract amendment, it is critical that you review it carefully and make sure the terms of the agreement are mutually beneficial. This particular amendment contains several onerous provisions. Specifically:

- Physicians cannot close their practice to new *Blue Cross* patients unless they also stop taking new patients from all other contracted health plans.
- Physicians are not allowed to disclose or discuss the terms of the amendment with anyone, even their own attorneys or business managers. Doing so will constitute a material breach of the agreement and *Blue Cross* may unilaterally and without notice reduce the physician's fee schedule, terminate the agreement, and/or take legal action against the physician.
- The contract term is 3 years and physicians do not have the right to renegotiate or terminate the agreement until the contract expires.

Physicians should also be aware that *Blue Cross* considers the amendment to be an "individually negotiated contract." Physicians who sign individually negotiated contracts do not qualify for protection under the *Wellpoint* RICO settlement.

NHIC/Medicare, Palmetto/J1MAC, MediCal, & Private Payors

[Editor's Note: ANCO communicates regularly with National Heritage Insurance Company (NHIC) that administers Medicare in California, Palmetto that will administer the J1MAC in California, and the Department of Health Care Services (DHCS) that administers MediCal in California.]

Palmetto/J1MAC will host a series of Medicare Part B transition teleconference calls for Part B providers in Hawaii, Nevada, California, Guam, American Samoa and the Northern Mariana Islands. These one-hour sessions will provide you

with the most recent transition information and will address the questions you have about the implementation. This is your opportunity to speak with Palmetto/J1MAC and to discuss the implementation topic of your choice. The teleconferences are similar to the "Ask-the-Contractor Teleconferences" (ACT) offered by the Medicare fee-for-service contractors but will be focused on J1MAC transition issues. For more information, visit www.palmettogba.com/palmetto/j1.nsf/DocsCat/Home and review the Events section.

Palmetto/J1MAC will be conducting workshops throughout the region and will be available to answer your questions concerning the transition. You will have an opportunity to hear directly from your *Medicare Administrative Contractor* (MAC) regarding such topics as transition dates, what is needed to continue to bill electronically, how the *Local Coverage Determination* process will work, address any differences in claims processing guidelines, and much more. Visit www.palmettogba.com/palmetto/j1.nsf/DocsCat/Palmetto%20GBA%20Announces%20Transition%20Workshops!%3Fopendocument for the schedule of workshops (i.e., San Francisco, July 9th; Fresno, July 16th).

Palmetto/J1MAC sent a letter to all California Medicare providers on April 1st requesting a new completed *Electronic Funds Transfer* (EFT) agreement (i.e., CMS-588). The contact telephone number listed in the original letter is incorrect and should be (866) 749-4301. The link to the CMS-588 form is www.cms.hhs.gov/cmsforms/downloads/CMS588.pdf. Complete the EFT agreement with your current banking information and forward along with a copy of a voided check to the following address:

Palmetto GBA Finance
J1 EFT
Post Office Box 100277
Columbia, SC 29202-3277

Due to the volume of EFTs being processed, submit your EFT agreement as soon as possible and no later than August 1st. Failure to submit the form by the deadline date will revert payment to hard copy checks beginning with the first cycle after conversion. Please contact Palmetto/J1MAC

at EFT.Admin@PalmettoGBA.com or (866) 749-4301 should you have any questions or need assistance and identify yourself as a new J1 provider to expedite your call. Alternatively, visit www.palmettogba.com/palmetto/j1.nsf/DocsCat/Home and follow the EDI links. There you will find updated Application Forms, Frequently Asked Questions (and Answers), Hot Topics, and information about Support Center hours of operation.

To subscribe to Palmetto's e-mail ListServ for the transition, visit www.palmettogba.com/palmetto/j1.nsf/DocsCat/Home). Also visit www.palmettogba.com/Palmetto/J1.nsf/docsCat/Welcome_to_Palmetto_GBA?opendocument?open&cat= to view a Palmetto *PowerPoint* presentation that provides background information on Palmetto, introduces timelines and other important information regarding the J1MAC, and lays out some details regarding the transition period.

CMS has implemented the use of the revised *Advance Beneficiary Notice of Noncoverage* (ABN) and is allowing a six-month transition period from the date of implementation (March 1st) for use of the revised form and instructions. All providers and suppliers must begin using the new ABN no later than September 1st. The new form replaces both the CMS-R-131G and the CMS-R-131L. You can access the new form and instructions online at www.cms.hhs.gov/bni.

Medicare fee-for-service claims must include an NPI in the primary provider fields on the claim (i.e., the billing, pay-to provider, and rendering provider fields). You may continue to submit NPI/legacy pairs in these fields or submit only your NPI. The secondary provider fields (i.e., referring, ordering and supervising) may continue to include only your legacy number, if you choose. Failure to submit an NPI in the primary provider fields will result in your claim being rejected. In addition, if you already bill using the NPI/legacy pair and your claims are processing correctly, now is a good time to submit to your contractor a small number of claims containing only the NPI. This test will serve to assure your claims will successfully process when only the

NPI is mandated on all claims. **Effective May 23rd, claims must be submitting using NPI only in all provider fields on the claim. Legacy numbers may not be used.**

In accordance with the NPI final rule, when an identifier is reported on a paper or electronically submitted claim for ordering/referring/attending/operating/supervising/purchased service/other/service facility provider (in the x12N 837 claims transactions), that identifier must be an NPI. For Medicare purposes, this requirement is effective May 23rd. If the entity to be identified does not furnish an NPI at the time of the order/referral/purchase or time of service, the billing provider must attempt to obtain that NPI in order to use it in the claim. The billing provider may use the NPI Registry (at nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do) or may need to contact the ordering/referring/attending/operating/supervising/purchased service/other/service facility in order to obtain the NPI.

Beginning May 24th, MediCal will no longer accept claims billed with a MediCal legacy provider number. Providers who have registered their NPIs but have not submitted claims using their NPI are strongly encouraged to start submitting NPI claims now to avoid interruption in claim payments. Providers who have not already registered their NPI with MediCal may have their claims rejected. MediCal previously announced that providers would no longer need to use both sets of identifiers on claims because the *Department of Health Care Services* (DHCS) was able to accept an NPI only, effective December 17th, 2007. Providers who were not ready to transition to the NPI were informed they could continue to submit their MediCal provider number until instructed otherwise. In February 2008, providers were reminded that once a claim was submitted with an NPI, the associated MediCal legacy provider number(s) would be end-dated. In other words, effective for dates of service beyond the date of a claim submitted with an NPI, the MediCal provider number would no longer be valid. Using the associated MediCal provider number(s) following a claim submission with an NPI results in claim denials for subsequent dates of service. DHCS plans to

deactivate all MediCal legacy provider numbers as early as May 23rd. This information is available at files.medi-cal.ca.gov/pubsdoco/npi/articles/npi_9364.asp. Should you have any questions or need additional information, please call the Telephone Service Center (TSC) at (800) 541-5555 or visit the NPI page on the MediCal Web site.

EDUCATION

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

ASCO Annual Meeting

ASCO members can register for the *2008 Annual Meeting* at www.asco.org/annualmeeting. Browse the complete *Annual Meeting* program at www.asco.org/AMprogram. Finally, ASCO members can now access the complete content of the *2008 ASCO Educational Book* at www.asco.org/edbook. The online edition contains 91 original articles by speakers and chairs of sessions to be held at the *2008 Annual Meeting* and is fully searchable by title, category, keyword, and author name. Members and pre-registered *Annual Meeting* attendees will receive copies of the *2008 ASCO Educational Book* on CD-ROM by mail beginning in early May; attendees will receive print copies in their tote bags upon their arrival at the *Annual Meeting*.

Transplanting Procurement Best Practices into Community Oncology

Transplanting Procurement Best Practices into Community Oncology will take place on June 10th in Sacramento and June 11th in San José. Kyle Gilman, Esq., *President & CEO, Forgefinder*, and Bev Favret, *Co-Founder & Vice President, OneOncology* will provide concepts, examples, and tools with which to optimize procurement economies, effectiveness, and efficiencies. These programs are being supported by *OneOncology*. Download the meeting announcement/registration form at www.anco-online.org/procurement.html.

2008 Best of ASCO Meetings

Oncology professionals who are unable to attend

ASCO's *2008 Annual Meeting* as well as attendees who wish to review the cutting-edge science presented at the *Annual Meeting* can now register for the upcoming *Best of ASCO Meetings*. The *Best of ASCO Meetings* condense highlights from the *ASCO Annual Meeting* into a two-day program presented in two locations—Boston and Los Angeles. These summary meetings will feature high-impact abstracts presented at ASCO's *2008 Annual Meeting* that represent the most relevant scientific findings in primary disease sites and practice changing advances in cancer prevention and treatment. For the first time, the *Best of ASCO Meeting* in Los Angeles will be held in conjunction with the *World Conference on Interventional Oncology's (WCIO) Annual Meeting*. Attendees will have the opportunity to examine advances in scientific and translational cancer research, evaluate the role of new diagnostic techniques and therapeutic approaches, and gain the knowledge to implement new disease management and patient care strategies and to revise existing ones. Research in the fields of breast cancer, developmental therapeutics, gastrointestinal cancer (colorectal and noncolorectal), genitourinary cancer, gynecologic cancer, head and neck cancer, leukemia, lung cancer, lymphoma, melanoma, and patient care will be presented. The *2008 Best of ASCO Meetings* will be held on June 22nd-25th, *Hyatt Regency Century Plaza*, Los Angeles, and June 27-28th, *Renaissance Boston Waterfront Hotel*. Visit www.asco.org/boa to register and to obtain more information about the *Best of ASCO Meetings*. Please note that **ANCO will organize its ASCO Highlights in 2008 featuring local faculty on September 6th in Oakland.**

ACCC's 25th National Oncology Economics Conference

Mark your calendar for the *Association of Community Cancer Center's 25th National Oncology Economics Conference*, September 17-20th, San Francisco. Are you prepared to weather the storm? Increased competition, reduced reimbursement, and rising demand require a solid plan. Learn how to protect and strengthen your cancer program. Watch this space for details or visit www.accc-cancer.org/mainevent.

4th Annual Oncology Congress



The 4th Annual Oncology Congress takes place September 25-28th at the *Hilton San Francisco*. All content is programmed by a multidisciplinary board of 20 advisors and speakers are the thought leaders in their fields. The *Oncology Congress* engages you in productive peer-to-peer discussions about cancer prevention, diagnosis, and treatment options, giving you the practical knowledge, tools, and insight needed to improve care and quality of life for your patients today. The first 50 ANCO members to register attend for free; all others pay a discounted rate of \$395 for physicians or \$195 for nurses and physician assistants. Register at www.oncologycongress.com/anco and use priority code ANCO. For assistance, contact Jeannie Cook at (203) 840-5562 and ask about special attendance rates for partners.

Additional Education Meetings

Other meetings of possible interest to ANCO member practices are:

June 4th

Medical Update on Triple Negative Breast Cancer
CancerCare

Telephone Education Workshop

June 5-6th

Achieving Efficient Practice Operations
Medical Group Management Association
Reno

June 7-8th

Negotiation Skills for Medical Practice Management
Medical Group Management Association
Reno

June 12-15th

Food as Medicine Professional Nutritional Training Conference

Center for Mind-Body Medicine
Baltimore

June 19th

Medical Update on Ovarian Cancer from the American Society of Clinical Oncology (ASCO) Annual Meeting

CancerCare

Telephone Education Workshop

June 24th

The Sixth Annual Cancer Survivorship Series: Living With, Through and Beyond Cancer

CancerCare

Telephone Education Workshop

June 25th

Medical Update on Head and Neck Cancer from the American Society of Clinical Oncology (ASCO) Annual Meeting

CancerCare

Telephone Education Workshop

June 25-26th

9th Annual Patient Congress

Patient Advocate Foundation

Washington DC

June 26th, July 24th

Updates on Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma (CLL/SLL)

CancerCare

Telephone Education Workshop

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

MEMBERSHIP RESOURCES & BENEFITS

[Editor's Note: All ANCO members are also eligible for several tangible benefits.]

Benefits

As a follow-up to the recent professional education meetings entitled *Managing in Whitewater Times*, ANCO has negotiated an exclusive membership offer (including free practice assessment, aggressive discounts on pricing, and potential access to ANCO member-specific benchmarking data) for *RemitDATA's* powerful suite of web-based, plug-n-work productivity tools that help providers become more profitable. *Reimbursement Pro* helps managers and collectors better control their reimbursement process including the identification of payer problems, identification

and appeals of denials, submission of secondary claims, and finding and copying paper EOBs and other common money pits. Contact Matthew Trogden at (972) 249-8661 or mtrogdon@remidata.com for more information.

ASSOCIATION NEWS

Board of Directors

The ANCO *Board of Directors* meets regularly 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 June 17th. Please call José Luis González, *ANCO Executive Director*, at (415) 472-3960 if you wish to participate in a future meeting.

Individual Member News

The ANCO Directory of Members 2007 was published and mailed to ANCO physician members; nurse and office manager contacts; and, Corporate Member representatives at the end of June 2007. Additional copies are available from the ANCO office upon request. Please verify your *Directory* entry and contact the ANCO office with any corrections, additions, and/or deletions. The next *Directory* will be published in June 2008.

The following **update(s) to the *Directory*** should be inserted in the appropriate location(s):

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Group Member News

ANCO has 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. A complete roster of TPMG physicians that are now ANCO members is available at www.anco-online.org/pubs.html (under *ANCO FAX News*, Vol. 7, No. 5).

Institutional Member News

ANCO thanks the following **Institutional Members** for their support:

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

For information on **continuing medical education meetings organized by our Institutional Members**, please visit:

- med.stanford.edu/seminars/cme-all.jsp?qcme=on
- www.ucdmc.ucdavis.edu/cme/conferences
- www.cme.ucsf.edu/cme

Margaret Tempero, M.D., and Eric Small, M.D., UC San Francisco, invite ANCO members attending the *ASCO Annual Meeting*

to a cocktail reception on Sunday, June 1st, 5PM, at the *Waldorf Room, The Hilton Chicago* (3rd Floor). Please RSVP online at cancer.ucsf.edu/asco2008.

Stanford's 2nd *Annual GI Cancers* takes place August 22nd-24th at the *Mauna Lani Bay Resort* in Hawaii. Visit www.stanfordhospital.com/PDF/cme/GICancers08CME_r8aFnl.pdf for more information and to register.

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:

*Abraxis Oncology • Alexion Pharmaceutical
AMGEN • AstraZeneca
Bayer Healthcare Pharmaceuticals
biogenIDEC
Bristol-Myers Squibb Oncology
Celgene • Cephalon Oncology
Clariant Diagnostics • Eisai
Enzon Pharmaceuticals
Genentech BioOncology
Genitope Corporation • Genomic Health
Genzyme Oncology • Hospira
ImClone Systems
Lash Group Healthcare Consultants
Lilly Oncology • MGI Pharma • Millennium
Novartis Oncology
Oncology Supply/ION • Ortho Biotech
OSI Pharmaceuticals
OTN/Onmark, McKesson Specialty
Companies
Pfizer Oncology • Pharmion
Roche Oncology • Sanofi Aventis Oncology
Schering-Plough Oncology
US Oncology Physician Services
Wyeth BioPharma • Vidacare*

We especially wish to thank and welcome *ImClone Systems* and *Wyeth BioPharma* as new Corporate Members in 2008.

Bayer Healthcare Pharmaceuticals announced that a reformulation of *Leukine* (500mcg) has been approved by the *United States Food and*

Drug Administration. The new formulation no longer contains EDTA and is now available for patients and physicians. A *Dear Health Care Provider* letter will be mailed to hematologists/oncologists and is available at www.leukine.com.

Genentech BioOncology reports that *MediCal's coverage policy for Avastin* was published in the *May MediCal Update* (Part 1; Billing and Policy). Effective for dates of service on or after June 1st diagnosis of malignant neoplasm of the female breast (ICD-9-CM 174.0-9) has been added to the list of allowable diagnoses for the reimbursement of HCPCS code J9035 (injection, bevacizumab, 10mg). The following applies for reimbursement of code J9035:

- The claim must be billed with documentation that code J9035 was used for the treatment of ICD-9-CM diagnosis codes 174.0-9.
- The maximum allowable dosage for metastatic breast cancer is 10mg/kg intravenously every 14 days. If the dosage exceeds 1,000mg, providers must document that the patient's weight is greater than 100kg in the Reserved for Local Use field (Box 19) or on an attachment to the claim.

Also, bevacizumab (Avastin), in combination with paclitaxel, is indicated for the treatment of patients who have not received chemotherapy for metastatic HER2 negative breast cancer. Avastin is not indicated for patients with breast cancer that has progressed following anthracycline and taxane chemotherapy administered for metastatic disease.

Onmark's Benchmarking Your Practice webcast takes place on May 27th at 12PM and May 28th at 9AM. This webcast will discuss how to incorporate benchmarking into your practice to enhance performance and increase efficiency. Visit onmarkevents.webex.com/onmarkevents to select a date and enroll.

OSI Pharmaceuticals is supporting *Tailoring the Treatment of Non-Small Cell Lung Cancer (NSCLC): From the Surgeon to the Oncologist*, a CME-accredited meeting series that will bring faculty (one oncologist and one surgeon) to your

practice for a breakfast, lunch, or dinner presentation. To take advantage of this unique educational opportunity, please contact rpilotti@curryrockefellergroup.com.

Pharmion reports that the *American Society of Health-System Pharmacists* (ASHP) announced that Vidaza has been accepted within its drug compendium as treatment for elderly patients (>60 years of age) with acute myelogenous leukemia (AML). ASHP publishes the *American Hospital Formulary Service Drug Information* (AHFS-DI) compendium.

US Oncology Physician Services will host a webcast for ANCO members on June 24th at 12PM. Join presenter Sean Taylor to learn about the services offered by *US Oncology Physician Services* for the independent oncology practice. This presentation will feature a discussion of how an oncology-trained pharmacist works with practice staff to provide solutions for overall process improvement that include regimen analysis, charge capture/inventory roll forward, admixture services, billing and coding education/support, and cash flow management. Visit www.opspharmacist.com/anco to register; for more information, please call (866) 216-5053 or email ops@usoncology.com.

Clinical Trial News

The *Head and Neck Oncology Program* of the *Stanford Cancer Center* seeks patients for three new clinical trials:

- Lapatinib plus radiation is for potentially curable previously untreated patients with advanced non-metastatic head and neck squamous cell cancer (HNSCC) who are not candidates for standard cisplatin-based chemoradiation.
- BIBW2992 is an orally available inhibitor of EGFR. This trial is for patients with recurrent or metastatic HNSCC.
- XL880 is an orally available inhibitor of both MET and VEGF that has been shown to have anti-cancer activity in several tumor types. This trial is for patients with recurrent or metastatic HNSCC.

For details and contact information for these and additional clinical trials, please visit cancer.stanford.edu/trials/adult/Head_and_Neck_Cancer.

Publications, Services, & Surveys

ANCO and *Sullivan/Luallin Healthcare Consulting* have cooperated on *Patient Satisfaction Surveys* for the past several years. Another *Patient Satisfaction Survey* will be offered in 2008. ANCO is using its negotiating leverage to offer you expert and reliable *Patient Satisfaction Surveys* at steep discounts. ANCO will fund the set-up fee so that members may participate at discounted per physician rates. An announcement of the *Patient Satisfaction Survey* was mailed and FAXed to all ANCO member practices earlier this week. For more information, visit www.anco-online.org/pxsrvy.html.

The January (Vol. 4, Issue 3) issue of ASCO's *Journal of Oncology Practice* features articles on Medicare coding edits, charge capture, an annual meeting track, and understanding the finances of oncology practice. Visit www.jopasco.org to view these articles.

Membership Dues for 2008

Final notices of membership renewal were mailed on April 16th. If you have not yet done so, then please return your 2008 membership dues to ANCO now to ensure your inclusion in *The ANCO Directory of Members 2008*. Be sure to provide ANCO with the name(s) of office and/or nurse manager contact(s). Those not renewing their membership by June 1st will be deleted from the *Directory of Members*, and will no longer be eligible for any ANCO benefits. Contact the ANCO office if you did not receive or misplaced your membership dues renewal notice.