

# 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.

This is the final *ANCO FAX News* for 2008.

**HAPPY HOLIDAYS  
&  
NEW YEAR TO ALL!**

## 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.]*

**Several important coding changes will take effect in early 2009**, including updates to the *Current Procedural Terminology (CPT) codes, Healthcare Common Procedure Coding System (HCPCS), and ICD-9-CM codes. The CPT codes for hydration and therapeutic/diagnostic/prophylactic*

**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.

administration have been renumbered. The codes have been moved from the 90,000 series to the 96,000 series. The reassignment of the code numbers is part of an effort to group all the drug administration services/codes in one area. ASCO has published a reference sheet comparing the new 2009 hydration and therapeutic/diagnostic codes to the existing 2008 codes (available at [www.anco-online.org/hydration2009.pdf](http://www.anco-online.org/hydration2009.pdf)). These changes will be effective January 1<sup>st</sup>, 2009. In addition, CMS announced changes to the HCPCS codes effective January 1<sup>st</sup>, 2009 and available at [www.cms.hhs.gov/HCPCSReleaseCodeSets/ANHCPCS/](http://www.cms.hhs.gov/HCPCSReleaseCodeSets/ANHCPCS/). Finally, several ICD-9-CM code changes went into effect October 1<sup>st</sup> (see [www.asco.org/ASCO/Downloads/Cancer%20Policy%20and%20Clinical%20Affairs/MMA%20Regulations%20and%20Resources/2009%20Oncology%20ICD-9-CM%20Code%20Updates.pdf](http://www.asco.org/ASCO/Downloads/Cancer%20Policy%20and%20Clinical%20Affairs/MMA%20Regulations%20and%20Resources/2009%20Oncology%20ICD-9-CM%20Code%20Updates.pdf)).

**Researchers reported that after the implementation of Medicare coverage limitations for ESAs, a significantly greater proportion of anemic cancer patients who were on chemotherapy and who received ESAs needed blood transfusions and utilized more units of blood per patient than those patients who received ESAs prior to implementation of coverage limitations.** The findings from this observational study by Tanya Burton, Ph.D., and colleagues at *Abt Bio-Pharma Solutions*, and *Centocor Ortho Biotech Services*, were presented at the *50th Annual Meeting of the American Society of Hematology*. An ongoing, prospective, observational study [*Dosing and Outcomes Study of Erythropoiesis-Stimulating Therapies (DOSE) registry*] is evaluating ESA-treated anemic cancer patients receiving chemotherapy. The recent analyses were conducted using data from this study. Data from 288 Medicare patients (pre-NCD: 230, post-NCD: 58) from 41 sites included in the DOSE registry were analyzed. Data were categorized into two timeframes based on date of initial ESA administration (pre-NCD: April 2006 through April 2007; post-NCD: October 2007 through May 2008). Baseline characteristics of pre-NCD and post-NCD patients were similar for age, gender, weight and tumor type. Compared to the pre-NCD patient group, a significantly greater proportion of

Medicare patients in the post-NCD group received blood transfusions (post-NCD 32.8% vs. pre-NCD 18.3%,  $p=0.0157$ ), with greater blood utilization per patient (mean units of blood/patient: post-NCD 1.1 vs. pre-NCD 0.5,  $p=0.0089$ ). Significantly lower mean Hb levels (g/dL) were reported in the post-NCD group at all time points [Hb level (g/dL): post-NCD vs. pre-NCD: 9.6 vs. 10.6, 9.9 vs. 11.1, 10.4 vs. 11.2, 9.8 vs. 11.1 and 9.7 vs. 11.0 at baseline, Week 4, Week 8, Week 12 and Week 16, respectively]. The post-NCD ESA dosing guideline that impacts ESA utilization for anemic cancer patients receiving chemotherapy is the requirement to discontinue ESA dosing for Hb levels exceeding 10g/dL. Safety, including thrombovascular events, was not examined in this analysis. An increased relative risk of thrombovascular events has been observed in ESA-treated patients; physicians should use the lowest dose needed to avoid red blood cell transfusion.

*The United States Food & Drug Administration (FDA)* issued a document (at [www.fda.gov/Cder/drug/infopage/RHE/qa2008.htm](http://www.fda.gov/Cder/drug/infopage/RHE/qa2008.htm)) answering a series of questions related to its medication guides for ESAs. FDA developed this medication guide to provide patients with information on the risks of taking ESAs. FDA states that the medication guide should be distributed when ESAs are “dispensed” to patients. ASCO continues to seek clarification from the FDA on the extent to which this requirement applies outside of the pharmacy setting. The document also notes that the FDA is working with drug manufacturers to develop additional regulatory requirements in the form of a *Risk Evaluation and Mitigation Strategy (REMS)* for ESAs.

**A shortage of Leucovorin has been reported by the American Society of Health-System Pharmacists (ASHP) and FDA.** Specific information about the drug shortage can be found at [www.ashp.org/Import/PRACTICEANDPOLICY/PracticeResourceCenters/DrugShortages/GettingStarted/ResolvedShortages/bulletin.aspx?id=488#ref](http://www.ashp.org/Import/PRACTICEANDPOLICY/PracticeResourceCenters/DrugShortages/GettingStarted/ResolvedShortages/bulletin.aspx?id=488#ref).

**CMS's Physician Quality Reporting Initiative**

(PQRI) 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. There are several reporting options and incentive payments for physicians participating in the PQRI (see [www.cms.hhs.gov/MLN MattersArticles/downloads/MM6104.pdf](http://www.cms.hhs.gov/MLN MattersArticles/downloads/MM6104.pdf)). For complete information on PQRI, including teleconference materials, qualified registries for data submission, quick reference charts, user guides, tool kits for successful reporting, updated submission methodologies, beneficiary letters, fact sheets, and FAQs, visit [www.cms.hhs.gov/pqri](http://www.cms.hhs.gov/pqri). **ASCO's PQRI website ([www.asco.org/pqri](http://www.asco.org/pqri)) includes relevant links and a table of oncology-related measures.**

**The Medicare Improvements for Patients and Providers Act (MIPPA) authorizes a new incentive program for eligible professionals who are successful electronic prescribers, or "e-prescribers".** The incentive program, which will begin in January 2009, offers bonuses for e-prescribers, including a 2% increase in Medicare payment in 2009 and 2010, a 1% increase in 2011 and 2012, and a 0.5% increase in 2013. After 2013, the bonus program will be phased out and penalties will be assessed for physicians who have not adopted e-prescribing, including a 1% deduction of covered Medicare Part B charges in 2012, a 1.5% deduction in 2013, and a 2% deduction in 2014 and beyond. Physicians may face challenges with this new program because:

- Pharmacies are not obligated to accept the e-prescription.
- The estimated cost of adopting e-prescribing is \$3,000 per doctor.
- The DEA requires an intricate system of checks and cross-checks under e-prescribing, both human and programmed, which could require one workflow for controlled substances and another for non-controlled substances.
- Practices with an existing EMR may find that their vendor products do not have a certified e-prescribing module.

CMS will post updates to e-prescribing quality

measures, such as specifications or reporting instructions at [www.cms.hhs.gov/EPrescribing/](http://www.cms.hhs.gov/EPrescribing/). Medicare's *Practical Guide to the E-Prescribing Incentive Program* is now available at [www.palmettogba.com/palmetto/providers.nsf/DocsCat/Providers-Current%20News-Medicare%20Practical%20Guide%20to%20the%20E-Prescribing%20Incentive%20Program%20is%20now%20available%20online!%20pendocument](http://www.palmettogba.com/palmetto/providers.nsf/DocsCat/Providers-Current%20News-Medicare%20Practical%20Guide%20to%20the%20E-Prescribing%20Incentive%20Program%20is%20now%20available%20online!%20pendocument). The guide explains the e-prescribing incentive program, how eligible professionals can participate, and how to choose a qualified e-prescribing system. For additional oncology-specific information, visit ASCO's e-prescribing Web site at [www.asco.org/eprescribing](http://www.asco.org/eprescribing), which specifically addresses the following questions:

- What is e-prescribing?
- What must I do to become a successful electronic prescriber?
- What are some of the challenges physicians may face with this new program?
- What are the pros and cons of a standalone versus an integrated e-prescribing system?

ANCO members are invited to participate in an e-prescribing demonstration webcast on Monday, December 22<sup>nd</sup> at 11AM. For additional information, visit [anco-online.blogspot.com/2008/12/oncology-erx-demo.html](http://anco-online.blogspot.com/2008/12/oncology-erx-demo.html).

**The House of Representatives Ways and Means Committee recently introduced legislation that would create a system of incentives for speedy adoption of health information technology and penalties for providers who delay.** The incentive system would offer up to \$41,000 per physician to use electronic technologies for health records, prescriptions, and sharing data. Two other *Congressional* committees are working on health IT legislation.

**Electronic health records (EHRs) are powerful tools that can streamline practice management and reduce errors in patient care.** Members of ASCO's *EHR Workgroup* have provided commentary on several EHR topics via PodCast, as follows:

- An Overview of ASCO's EHR Goals and Activities
- Using the EHR to Promote Quality of Care and Patient Safety
- EHRs in Practice and EHR Vendors
- Implementation Issues and Tips
- Promoting ASCO's Clinical Guidelines in EHRs
- Technology Advances and EHR Trends

Listen to these PodCasts at [www.asco.org/ASCO/Practice+Resources/Electronic+Health+Records/EHR+Events/Electronic+Health+Records+\(EHR\)+Lab+at+the+2008+Annual+Meeting?](http://www.asco.org/ASCO/Practice+Resources/Electronic+Health+Records/EHR+Events/Electronic+Health+Records+(EHR)+Lab+at+the+2008+Annual+Meeting?cpsextcurrchannel=1)

In addition, ASCO has developed *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](mailto:support@articleworks.com) or calling (800) 804-1425. More information is available at [www.asco.org/ehrfieldguide](http://www.asco.org/ehrfieldguide). Finally, ASCO has developed a new EHR social networking site ([ehr.ascoexchange.org/](http://ehr.ascoexchange.org/)) to help oncologists and their practice staff connect and collaborate with other users of EHRs, as well as find information on EHRs and other health information technology tools.

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](http://www.anco-online.org) and [www.asco.org/mma](http://www.asco.org/mma), including:

- The January 2009 quarterly update for the *Average Sales Price* (ASP) Medicare Part B drugs pricing file.

### **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.]*

**Thousands of California physicians continue to face problems getting paid for the care they provide to Medicare patients.** The transition to NPI numbers earlier this year, followed by the switch in September from NHIC/Medicare to Palmetto/J1MAC has created a bureaucratic nightmare of red tape and rejected claims for doctors, delaying Medicare payments for months for some doctors. To help assess the full extent of the situation, CMA is asking physicians to complete a brief questionnaire about their Medicare payment problems at [www.surveymonkey.com/s.aspx?sm=BQrN5GYKE2zffe6tcd9tTQ\\_3d\\_3d](http://www.surveymonkey.com/s.aspx?sm=BQrN5GYKE2zffe6tcd9tTQ_3d_3d). The data CMA gathers will assist them in their efforts to work with CMS and Palmetto/J1MAC to resolve these problems. **CMA has compiled a list of common problems and fixes and posted it online at [www.cmanet.org/palmetto](http://www.cmanet.org/palmetto).** Physicians who are still experiencing payment problems are encouraged to review this list to see if their issues are addressed. If after doing so you still have questions or problems, please contact CMA's *Reimbursement Help Line* at (888) 401-5911 for assistance. **CMA continues to work with Palmetto/J1MAC and CMS on a global fix of the situation and has secured commitments from many Congressional offices to intervene in the situation.** And, CMA is working with the media to publicize these problems and to put pressure on CMS to make many of the global changes to fix this crisis and to avoid all of the others that are, unfortunately, becoming commonplace in matters related to payment for Medicare services. CMA *Vice President of Communication* Ned Wigglesworth has asked that you share your horror stories with him (via e-mail

to [nwigglesworth@cmanet.org](mailto:nwigglesworth@cmanet.org)) so that he can relay them to his media contacts.

### **Palmetto/J1MAC, DHCS/MediCal, & Private Payors**

[*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.]

**The December edition of the Palmetto/J1MAC Medicare Advisory is now available** at [www.palmettogba.com/Palmetto/Providers.nsf/docsCat/Jurisdiction%201%20Part%20B-Publications-Medicare%20Advisory?open](http://www.palmettogba.com/Palmetto/Providers.nsf/docsCat/Jurisdiction%201%20Part%20B-Publications-Medicare%20Advisory?open). Of specific relevance to oncology, this edition features:

- Remittance Advice Remark Code and Claim Adjustment Reason Code Update (Effective Date January 1<sup>st</sup>, 2009)
- **Compendia** as Authoritative Sources for Use in the Determination of a Medically Accepted Indication of Drugs and Biologicals Used Off-Label in an Anti-Cancer Chemotherapeutic Regimen
- **Discarded Drugs**
- Annual Update of Healthcare Common Procedure Coding System Codes Used for **Home Health Consolidated Billing Enforcement**
- Your Clearinghouse or Billing Service Can Help with your J1 EDI Issues
- **ICD-10-Clinical Modification/Procedure Coding System Fact Sheet**
- Why is a Provider ID not linked to a J1 Submitted ID
- Notice of New **Interest Rate** for Medicare Overpayments & Underpayments: 1<sup>st</sup> Update for Fiscal year 2009
- Part B LCD Updates

Palmetto/J1MAC distributed a CD-ROM with the 2009 Medicare participation enrollment form in November. Updated fee schedule information is only available on its website at [www.palmettogba.com/palmetto/providers.nsf/docsCat/Providers-Jurisdiction%201%20Part%20B-Publications-Fee](http://www.palmettogba.com/palmetto/providers.nsf/docsCat/Providers-Jurisdiction%201%20Part%20B-Publications-Fee)

[%20Schedules~2009%20J1%20Part%20B%20Fee%20Schedules?opendocument](#) for more information.

**Medicare payments for thousands of Northern California physicians are at risk due to NPI/PTAN matching problems.** Affected are physicians who work for or contract with groups in Northern California and need to submit an updated 855R form to reassign their Medicare payments to their group(s). Some physicians who have already submitted the proper paperwork are still not being paid, largely because of a backlog of reenrollment forms from Northern California physicians. If your Medicare payments have been denied or delayed, first check the CMA's list of top NPI-related error codes (available at [www.calphys.org/html/cc714.asp](http://www.calphys.org/html/cc714.asp), including instructions on how to correct the errors.) If your payment problems are not related to these common billing errors, and you believe you are among those physicians affected by the group reassignment issue, please call CMA's *Reimbursement Help Line*, (888) 401-5911. CMA may be able to help expedite the enrollment process and get your payments back on track. **Palmetto/J1MAC will request your legacy identifier information when a one-to-one match is not found for your NPI and your PTAN (or Medicare legacy number).** When a one-to-one match for your NPI/PTAN combination cannot be determined, development letters are generated. These letters require specific information to be completed and returned to Palmetto/J1MAC in order for your claims to continue processing. For information on the Palmetto/J1MAC process, please visit [www.palmettogba.com/palmetto/providers.nsf/DocsCat/Providers~Jurisdiction%201%20Part%20B-Resources-NPI-NPI%20Development%20Letters:%20Rendering%20and%20Billing%20PTANs%20Needed?opendocument](http://www.palmettogba.com/palmetto/providers.nsf/DocsCat/Providers~Jurisdiction%201%20Part%20B-Resources-NPI-NPI%20Development%20Letters:%20Rendering%20and%20Billing%20PTANs%20Needed?opendocument).

**To assist providers in obtaining the status of their enrollment applications, Palmetto/J1MAC has announced a new provider self-service tool.** The *Provider Enrollment Application Status Lookup Tool* is located at [www.Palmettogba.com/J1B/Enroll](http://www.Palmettogba.com/J1B/Enroll) (Resources/Provider Enrollment).

**Palmetto/J1MAC and CMS will consider, in limited circumstances, an advance payment for**

**Part B providers who are experiencing financial hardship due to claims that are unable to be processed within established time limits.** This applies to claims that have been submitted, but payment has not been made due to a system malfunction. This does not apply to claims that have not paid due to claims submission errors. For details, please visit [www.palmettogba.com/palmetto/j1.nsf/DocsCat/8525740200570223852574B4004E7114](http://www.palmettogba.com/palmetto/j1.nsf/DocsCat/8525740200570223852574B4004E7114).

## EDUCATION

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

### *Medicare Reimbursement for Oncology 2009*

ANCO is pleased to sponsor three talks for oncologists, oncology nurses, and oncology practice managers entitled *Medicare Reimbursement for Oncology 2009*. Roberta Buell, M.B.A., *Managing Partner, Sausalito Healthcare Partners*, and Arthur Lurvey, M.D., *Contractor Medical Director, Palmetto/J1MAC*, will present the latest information impacting Medicare's reimbursement for oncology in 2009. Buell will provide a complete update of changes for 2009—coding, PQRI, ESAs, e-prescribing, underinsured patients and what to do about them, and strategies for the future. Lurvey will address the transition from NHIC/Medicare to Palmetto/J1MAC in California. He will also be available after the presentation to help resolve specific claims issues. These programs will take place in Fresno on January 6<sup>th</sup>, in Oakland on January 7<sup>th</sup>, and Sacramento on January 8<sup>th</sup>. Support for these meetings is provided by *Abraxis Oncology, Celgene, Novartis Oncology, Onmark, a McKesson Specialty Care Solutions Company, Sanofi Aventis Oncology, Wyeth Pharmaceuticals*, and possibly others. The final list of supporters will be announced at the meeting. A meeting announcement was mailed on December 2<sup>nd</sup> and may be downloaded at [www.anco-online.org/MedicareUpdate2009.html](http://www.anco-online.org/MedicareUpdate2009.html).

### *San Antonio Breast Cancer Symposium Highlights 2008*

ANCO's *San Antonio Breast Cancer Symposium Highlights 2008* will take place on Wednesday evening, January 14<sup>th</sup>, 2009 at the *Hotel Nikko* in San Francisco. Faculty from *Stanford* (Ellie Guardino, M.D., Ph.D.), *UC Davis* (Allen Chen, M.D.), and *UC San Francisco* (Michael Alvarado, M.D.) will review the clinically most important research results presented at December's *Symposium*. This meeting will be moderated by Helen K. Chew, M.D., *UC Davis*, and accredited by *Indiana University*. A meeting announcement/registration form was mailed on December 11<sup>th</sup> and may be downloaded at [www.anco-online.org/sabcs.html](http://www.anco-online.org/sabcs.html).

### *ASH Highlights 2008*

ANCO's *ASH Highlights 2008* will take place on Tuesday evening, February 10<sup>th</sup>, 2009 at the *Hotel Nikko* in San Francisco. Faculty from *UC Davis* (Joseph M. Tuscano, M.D.) and *Stanford* (Bruno Carneiro de Medeiros, M.D., Steven E. Coutre, M.D., and Jason R. Gotlib, M.D.) will review the clinically most important research results presented at December's *ASH Annual Meeting*. This meeting will be moderated by Steven E. Coutre, M.D., *Stanford*, and accredited by *Indiana University*. A meeting announcement will be mailed to all members in late December and may be downloaded at [www.anco-online.org/ash.html](http://www.anco-online.org/ash.html).

### *Additional Education Meetings*

Other meetings of possible interest to ANCO member practices are:

January 15-17<sup>th</sup>, 2009  
*Gastrointestinal Cancers Symposium*  
 ASCO, American Gastroenterological Association  
 Institute, American Society for Therapeutic  
 Radiology and Oncology, Society of Surgical  
 Oncology  
 San Francisco

January 28<sup>th</sup>, 2009  
*Caring for Your Bones When You Have Multiple Myeloma*  
 CancerCare  
 Telephone Education Workshop

January 29<sup>th</sup>, 2009

*Update on Metastatic Breast Cancer from the 2008 San Antonio Breast Cancer Symposium*  
CancerCare

Telephone Education Workshop

January 31<sup>st</sup>, 2009, 2009

*Emerging Therapies for Blood Cancer Patients*  
Leukemia & Lymphoma Society  
San Francisco

February 11<sup>th</sup>, 2009

*Progress in the Treatment of Renal Cell Cancer*  
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.]

### *ANCO Online*

ANCO's website, [www.anco-online.org](http://www.anco-online.org), features:

- a general description and introduction to the *Association*, its activities, leadership, and membership benefits.
- advocacy information (including ANCO and ASCO Medicare resources).
- clinical and professional education meeting announcements and distributed materials.
- survey reports, publications, ListServ, and Weblog.
- clinical trials information.
- links to affiliated organizations.
- updated physician, nurse, manager, and patient resources.

### *ANCO Online ListServ & Weblog*

The ANCO *Online ListServ* is available to all ANCO physician members, nurses, practice managers, and Corporate Member representatives. It is a source for the latest ANCO news and other information impacting hematology/oncology practices. These postings are digested in the ANCO *Online Weblog* at

[anco-online.blogspot.com](http://anco-online.blogspot.com) (see below). To subscribe to the ANCO *Online ListServ*, visit [www.anco-online.org](http://www.anco-online.org) and follow the links or visit [www.anco-online.org/ListServ/mail.cgi/list/anco](http://www.anco-online.org/ListServ/mail.cgi/list/anco).

The ANCO *Online Weblog* posts and archives important news sent on the *ListServ* for hematology/oncology practices on an almost daily basis. Among the additional news topics covered at [anco-online.blogspot.com](http://anco-online.blogspot.com) are:

- ACCC Alerts
- ANCO Meeting Announcements
- ASCO e-News and Cancer Policy Today
- ASH Practice Updates
- CMA Alerts
- CMS/Medicare Website Updates
- Palmetto/JIMAC Website Updates

ANCO urges its members to bookmark [anco-online.blogspot.com](http://anco-online.blogspot.com) (or subscribe to [anco-online.blogspot.com/feeds/posts/default](http://anco-online.blogspot.com/feeds/posts/default) using your favorite news reader software; e.g., RssReader for Windows or NetNewsWire for Macintosh) and refer to it often.

## 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 meeting** will take place on January 14<sup>th</sup>, 2009. 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 2008* was mailed to ANCO physician members; nurse and office manager contacts; and, Corporate Member

representatives the week of July 7<sup>th</sup>. Additional copies are available from the ANCO office upon request. **A regularly updated online (.pdf) edition is available at [www.anco-online.org/pubs.html](http://www.anco-online.org/pubs.html).** 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 2009. **The following update(s) to the *Directory* were recently included in the online edition:**

#### ALPHABETICAL DIRECTORY OF PHYSICIAN MEMBERS

*Changed* Gigi Chen, M.D., David S. Cheng, M.D., Ted Heckman, M.D., Laurence Heifetz, M.D., Jewel Johl, M.D., Robert L. Robles, M.D., Matthew N. Sirott, M.D., Diana Superfin, M.D., Tiffany Svahn, M.D.

*Added* Babis Andreadis, M.D., Chloe Atreya, M.D., Edward Cha, M.D., Amy Jo Chien, M.D., Adil Daud, M.D., Tiffany Dea, M.D., Eric Dean, M.D., Charles Dollbaum, M.D., Anne Espinoza, M.D., Adam Giermasz, M.D., Peyman Haghghat, M.D., Gerald Hsu, M.D., Mary Ellen Kelly, M.D., Pam Kunz, M.D., Galia Levy, M.D., Bradley H. Lewis, M.D., Chainarong Limvarapuss, M.D., Judy Luce, M.D., Daniel Maslyar, M.D., Pamela Munster, M.D., Emmanuelle Passegue, M.D., Harlan Pinto, M.D., Ernest Rosenbaum, M.D., Lissa Sturdevant, M.D., Matthew Wieduwilt, M.D., Carolyn Wild, M.D.

*Deleted* Su Pin Choo, M.D., Anne Finkbeiner, M.D., Jane Gitschier, M.D., George Herzog, M.D., Juliana Karrim, M.D., Amy Ying-Ju Lin, M.D., Matthew Sorensen, M.D.

#### ALPHABETICAL DIRECTORY OF NURSE & OFFICE MANAGER CONTACTS

*Changed* Doreen Bechtold, Cathey, Bervid, R.N., Carol Blue, R.N., Li Li Cheng, Betsy Madsen, R.N., Julie McLaughlin, R.N., Lori Orr, Susan Socha, R.N.

*Added* Rose Bell, N.P., Deborah Burgoon, R.N., Beau DeFehr, Debra Green, George Herzog, R.N., Michele Knudson, R.N., Rose Loya, Sarah Martin, Dave Martinez, R.N., Denise

Miller, R.N., O.C.N., Tina Pierce, Judith Sheridan, R.N., Jan Stokes, R.N., Ashley Vigano, Danielle Yeager, N.P., Sonny Yuan

*Deleted* Beverly Davis, R.N., Lori Dresler, R.N., Judy DeJong, R.N., Jennifer Knoche, R.N., Nancy Ledoyen, R.N., Dora Moreno, Margaret J. Murphy, Denise Patrich, R.N., Barbara Smith, Inez Staggs

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

***Kaiser Permanente's* cancer trial program in Northern California has become a full-fledged member the *Southwest Oncology Group***, one of the largest cancer clinical-trial cooperative groups in the nation. *Kaiser* has participated in the SWOG cooperative for the last 17 years as an affiliate of *UC Davis*, providing its members with access to clinical trial through SWOG.

#### 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/cmecalendar.do](http://med.stanford.edu/seminars/cmecalendar.do)
- [www.ucdmc.ucdavis.edu/cme/conferences](http://www.ucdmc.ucdavis.edu/cme/conferences)
- [www.cme.ucsf.edu/cme](http://www.cme.ucsf.edu/cme)

UCSF's **8th Annual UCSF Clinical Cancer**

**Update** takes place at Lake Tahoe on January 23<sup>rd</sup>-25<sup>th</sup>, 2009. Visit [www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MSU09006](http://www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MSU09006) for more information.

UCSF's **Innovations in Prostate Cancer: What's New, What's Next** takes place at San Francisco on February 13<sup>th</sup>-14<sup>th</sup>, 2009. Visit [www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MUR09001](http://www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MUR09001) for more information.

**Stanford's 11<sup>th</sup> Annual Multidisciplinary Management of Cancers: A Case-based Approach** (formerly the **Northern California Tumor Board at Silverado**) will be presented on March 20<sup>th</sup>-22<sup>nd</sup>, 2009. For more information, to register, or to submit a case study, visit [cancer.stanford.edu/calendar/events/2009/2009Silverado.html](http://cancer.stanford.edu/calendar/events/2009/2009Silverado.html) or contact Jennifer Schafer at (650) 724-2288 or [schafer@stanford.edu](mailto:schafer@stanford.edu).

### 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 • Alaven  
Alexion Pharmaceutical • AMGEN  
AstraZeneca  
Bayer Healthcare Pharmaceuticals/  
Onyx Pharmaceuticals  
biogenIDEC  
Bristol-Myers Squibb Oncology  
Celgene • Cephalon Oncology • Eisai  
Enzon Pharmaceuticals  
Genentech BioOncology  
Genomic Health • Genzyme Oncology  
GlaxoSmithKline Oncology • Hospira  
ImClone Systems  
Lash Group Healthcare Consultants  
Lilly Oncology • Millennium  
Novartis Oncology  
Oncology Supply/ION • OneOncology  
Ortho Biotech • OSI Pharmaceuticals  
Onmark, a McKesson Specialty Care  
Solutions Company*

*Pfizer Oncology • Roche Oncology  
Sanofi Aventis Oncology  
Spectrum Pharmaceuticals  
US Oncology Physician Services  
Wyeth BioPharma • Vidacare*

We especially wish to thank and welcome *Alaven, ImClone Systems, Spectrum Pharmaceuticals, and Wyeth BioPharma* as new Corporate Members in 2008. *Clariant Diagnostics, Genitope Corporation, and Schering-Plough Oncology* did not renew their Corporate Memberships for 2008.

**Genzyme Oncology informs ANCO that the United States Food and Drug Administration has approved Mozobil** for use in combination with G-CSF to mobilize hematopoietic stem cells to the peripheral blood for collection and subsequent autologous transplantation in patients with non-Hodgkin lymphoma (NHL) and multiple myeloma.

### Publications, Services, & Surveys

**ANCO's 2008 Patient Satisfaction Survey results showed mixed results compared to 2006.** The following table shows progress in mean scores (on a 5-point scale) for all survey areas except staff performance. For each mean score, the percentile ranking in the oncology database (n=5,130) is also displayed:

Item/Mean & %-ile	<u>2008</u> <u>Mean</u>	<u>2008</u> <u>%-ile</u>	<u>2006</u> <u>Mean</u>	<u>2006</u> <u>%-ile</u>
<i>Appointment</i>	4.50	56.3	4.42	54.8
<i>Staff performance</i>	4.69	49.5	4.69	63.9
<i>Communication</i>	4.49	52.7	4.46	48.6
<i>Physician performance</i>	4.72	60.4	4.68	72.2
<i>Overall satisfaction</i>	4.73	52.4	4.65	55.3

It is noteworthy that, while the aggregate score for "overall satisfaction" increased from 4.65 to 4.73, the percentile ranking declined, because the oncology database is steadily climbing upward as more physicians recognize the importance of patient satisfaction and implement formal customer service programs to compete more effectively for referrals from satisfied patients and

referring physicians. Step-wise regression showed that survey questions involving doctors and staff have the greatest effect on “overall satisfaction” and, by extension, future patient volume. The implication for your practice is clear—raising your “people” scores will also increase patient satisfaction with all other aspects of your practice. In this context, the good news is that raising physician/staff scores is also the least expensive practice marketing strategy, because it costs nothing to hold your people accountable for customer-centered performance. So, what do you tell yourself and your staff? Here are two examples:

- Physicians receive higher scores for “listening to patients” when they respond with empathy statements.  
Patient: “I'm feeling more tired these days...”  
Physician: “I'm sorry to hear that.”
- Receptionists receive higher survey scores for “friendliness” when they greet arriving patients with a warm smile and welcome:  
“Good morning, Mr. Blake, it's good to see you again.”

As evidence, consider the experience of 16 physicians at *Beaver Medical Group*. When they raised their average mean score for Section D (“Your Visit With the Provider”) by .25, the mean score for Question A6 (“Waiting time in the reception area”) increased by .31. (We know that physician performance was the only variable, because the time interval between surveys was three weeks.) The strategic message for ANCO members is clear—congratulations are in order for the increase in scores compared with 2006, but the increasingly competitive market will not allow anyone to rest on their laurels. And to raise the stakes even higher, please consider that every major payer is pushing for making physician-level satisfaction data available to the general public within the next few years—thus putting a brighter spotlight on specialist and primary care physicians than ever before. Needless to add, the time for anticipating a tougher environment is now—before patients become even more demanding and payers adopt more intrusive reporting policies.

The November (Vol. 4, Issue 6) issue of ASCO's *Journal of Oncology Practice* features articles entitled *Continued Regulatory Actions Affecting the Use of ESAs, Chemotherapy Treatments for Metastatic Colorectal Cancer: Is Evidence-based Medicine in Practice?*, *ASCO 2008 Clinical Practice Guideline Update Summary: Use of Chemotherapy and Radiation Therapy Protectants, Informed Consent for Chemotherapy: ASCO Member Resources, A Guide to Web Site Development for the Community Oncology Practice, CPT 2009 Coding Changes for Drug Administration, and Effective Staff Management*. Visit [www.jopasco.org](http://www.jopasco.org) for more information.

### *Individual Membership Dues for 2009*

**Membership renewal notices for 2009 were mailed to all members in late November. 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 2009*.** 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 1<sup>st</sup>, 2009 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.

ANCO seeks new members. **All members of a practice should join ANCO.** Provide the ANCO office with the names and addresses of colleagues you would like invited to join ANCO.

**A larger ANCO is a stronger ANCO!**