

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 regular *ANCO FAX News* will be published on July 10th. 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 *Federal Trade Commission* (FTC) has decided to delay until August 1st the implementation of its ruling that would consider physicians who regularly bill their patients (including co-payments and coinsurance) to be creditors. If implemented, this rule would compel physicians to develop and

**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.

implement written identity theft prevention and detection programs for their practices in order to be in compliance with the FTC's *Red Flags Rule*. The *American Medical Association* has developed guidance material (available at www.ama-assn.org/ama/no-index/physician-resources/red-flags-rule.shtml) to help physicians comply with the *Rule*. For a primer on the FTC's *Red Flag Rules*, please see the article attached to this edition of the *ANCO FAX News*.

According to CMS and effective July 10th, claims for clinical trials with dates of service on or after January 1st, 2008, with either the modifier QV or the modifier Q1 shall be returned as unprocessable with the following messages if the diagnosis code V70.7 is not submitted on the claim:

- Claims Adjustment Reason Code 16: Claim/service lacks information that is needed for adjudication. As least one Remark Code must be provided (may be comprised of either the Remittance Advice Code or NCPDP Reject Reason Code.)
- Remittance Advice Remark Code M76: Missing/incomplete/invalid diagnosis or condition.

For more information, visit www.cms.hhs.gov/MLN MattersArticles/downloads/MM5790.pdf. Alternatively, visit [www.palmettogba.com/Palmetto/Providers.nsf/files/CR6431_clinicaltrialsbilling_rev.pdf/\\$File/CR6431_clinicaltrialsbilling_rev.pdf](http://www.palmettogba.com/Palmetto/Providers.nsf/files/CR6431_clinicaltrialsbilling_rev.pdf/$File/CR6431_clinicaltrialsbilling_rev.pdf) for Palmetto/J1MAC's billing instructions.

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. 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. The "Spotlight" section

on the PQRI webpage is updated frequently and alerts eligible professionals to the newest program information available on the PQRI webpage. The *American Medical Association* (AMA) has posted **PQRI participation tools** at www.ama-assn.org/ama/pub/physician-resources/clinical-practice-improvement/clinical-quality/participation-tools-individual.shtml. In addition, ASCO's PQRI website (www.asco.org/pqri) includes relevant links and a table of oncology-related measures.

The *Medicare Improvements for Patients and Providers Act* (MIPPA) authorizes an incentive program for eligible professionals who are successful electronic prescribers, or "e-prescribers". The incentive program, which began in January, 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. To be eligible for the e-prescribing bonus, the services linked to e-prescribing measures must make up at least 10% of your Medicare charges for the year. 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. CMS will post updates to e-prescribing quality measures, such as specifications or reporting instructions, at www.cms.hhs.gov/ERXIncentive/. 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!%3Fopendocument. The *Guide* explains the e-prescribing incentive program, how eligible professionals can participate, and how to choose a qualified e-prescribing system. Additional information is available at *eHealth Initiative's Clinician's Guide to Electronic Prescribing* at www.ehealthinitiative.org/erx/clinicians.msp (a how-to guide to help physicians make informed decisions about how and when to transition from paper to e-prescribing systems). For additional oncology-

specific information, visit ASCO's e-prescribing website at www.asco.org/eprescribing.

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 at [www.asco.org/ASCO/Practice+Resources/Electronic+Health+Records/EHR+Events/Electronic+Health+Records+\(EHR\)+Lab+at+the+2008+Annual+Meeting?cpsextcurrchannel=1](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 *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/ehrfieldguide. Finally, ASCO has developed a new EHR social networking site (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.

With the *American Recovery and Reinvestment Act* (ARRA) signed into law, now is the time to implement electronic health records (EHR) into your practice. ASCO is hosting its 2nd *EHR Symposium: Harnessing the EHR—From Incentives to Sustainability*, October 6-7th at the *San Francisco Marriott*. The *Symposium* will prepare you with the knowledge and tools for successful selection and implementation. Program highlights include:

- Budgeting for the EHR
- Personal Health Records
- Implementation and Project Management
- Incentives: Planning for the ARRA Stimulus Package

- EHRs as a Quality Tool
- ROI and Costs
- Physician Compliance

Registration is now open at www.asco.org/ehrsymposium.

CMA, MOASC, and State Legislative & Regulatory Issues

[*Editor's Note:* ANCO and the *Medical Oncology Association of Southern California* (MOASC) are members of the *California Medical Association's* (CMA) *Council on Legislation, House of Delegates*, and specialty delegation. ANCO and MOASC coordinate advocacy activities in California.]

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

- CMA is sponsoring AB2 which would require a health care service plan or health insurer to obtain final approval from an independent review organization prior to rescinding a health plan contract or insurance policy. This review would use a clear legal framework to determine whether the rescission is appropriate while protecting the enrollee's rights during the review process. AB2 would also improve the process at the front-end by requiring plans and insurers to complete medical underwriting prior to issuing a policy and to make applications easier to fill out accurately and completely.

Sacramento can be a dangerous place for doctors. Right now there are more than 400 bills impacting medicine winding their way through the *Capitol* on their journey to the *Governor's* desk. Many of these bills are backed by powerful lobbyists and PACs and threaten the medical profession. 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 400 bills...and more. Got payment delays? Feeling victimized by payors and overwhelmed by the process? Don't let the health plans mistreat you. **The CMA's Center for Economic Services**

has a team of reimbursement specialists available to assist CMA members experiencing payment problems with third-party payors. For membership, contact Ron Lopp at (916) 551-2042 (e-mail: rlopp@cmanet.org); for reimbursement assistance, call CMA's *Member Help Center* at (800) 786-4262.

The 2009 *Federal* economic stimulus package includes \$19B for health information technology (HIT), the vast majority of which will be directed to physicians to subsidize the purchase and usage of electronic health record (EHR) systems. Beginning in 2011, qualifying Medicare providers stand to gain up to \$44,000 under the program; qualifying MediCal providers stand to receive as much as \$64,000. CMA advises physicians to begin the process of assessing their EHR needs, with an eye on what will work best for their specialty, the size of their practice, the stage in their career, and their comfort level with technology. CMA has established a *Health Information Technology (HIT) Resource Center* on the CMA website designed to educate physicians about the HIT subsidies for physicians in the recent *Federal* stimulus package. Visit www.cmanet.org/hit/ for the latest information focusing on materials to help physicians assess their HIT needs and begin the process of choosing an EHR system that works best for their practices and qualifies them to receive the *Federal* funds. CMA will also provide materials for physicians and practices that currently use EHR systems to help them know how to qualify for the funds as well.

To help physicians negotiate and manage complex third-party payor agreements, CMA has published a contracting tool kit entitled *Taking Charge: Steps to Evaluating Relationships and Preparing for Negotiations—A Focus on Payor Contracting* that is available free to CMA members at the members-only website. Nonmembers can purchase the tool kit for \$100 in the CMA bookstore (call (800) 882-1262). This tool kit joins several other CMA tool kits (i.e., *Back to Basics: A Step-by-Step Guide to Maximizing Your Cash Flow*, *Getting Paid: Strategies to Maximize Reimbursement*) aimed at empowering physician practices vis-à-vis their relationships with private payors.

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.]

Palmetto/J1MAC reports that from April 1st through May 9th there was an error in the EDI system that may have caused claims for ESAs (J0881, J0885; modifier EA) for the treatment of anemia unrelated to dialysis submitted with a HCT and/or HGB level to process incorrectly. The system may have been erroneously rounding the levels to the nearest whole number (i.e., claims with .4 or below were rounded down and claims with .5 or higher were rounded up). If the levels were rounded to high (i.e. if the HBG was rounded to 10.0 or the HCT was rounded to 30.0) then the service may have been denied in error. Denied services brought to our attention by affected providers will be adjusted. If you feel that you have claims that have been denied inappropriately, then please contact the *Telephone Reopening Line* at (866) 669-5543 to have your claims reopened.

The June edition of the Palmetto/J1MAC *Medicare Advisory* is now available at [www.palmettogba.com/Palmetto/Providers.nsf/files/J1_June_Medicare_Advisory.pdf/\\$File/J1_June_Medicare_Advisory.pdf](http://www.palmettogba.com/Palmetto/Providers.nsf/files/J1_June_Medicare_Advisory.pdf/$File/J1_June_Medicare_Advisory.pdf). Of specific relevance to oncology, this edition features:

- Billing Routine Costs of Clinical Trials
- Update: Use of the Units Field for Drug and Biological Injections and Infusions
- Drugs & Biologicals: Maximum Allowed Units (MAUs)
- Part B LCD Updates
- Medicare Part B Medical Records: Signature Requirements, Acceptable and Unacceptable Practices
- Adding a new Specialty Code for Hospice and Palliative Care
- Requirements for Specialty Codes

DHCS/MediCal's eTAR is an easy, effective, fast and free way to submit TARs. Providers that utilize the eTAR application are generally more

successful when submitting TARs. Most DHCS/MediCal providers have been activated to use eTAR. To verify access, go to www.medi-cal.ca.gov, select the Transactions tab, and log in with your NPI and PIN. An eTAR tab with options for DHCS/MediCal TARs will be available. If you do not have access or only see options for Inquire only, please contact DHCS/MediCal at (800) 541-5555 and follow the prompts for eTAR to request access. The eTAR training team would like to extend an invitation to access the free learning tools available to all DHCS/MediCal providers. Tutorials are available online to provide step by step instructions on how to submit eTARs and attachments, update eTARs, as well as inquire on previously submitted TARs. These tutorials can be viewed at pro.medi-cal.ca.gov/wct/etar/etarms05/etarms05default.asp or on the DHCS/MediCal website under “eLearning” and “eTAR Medical Services Tutorial.” In addition, free DHCS/MediCal seminars where eTAR will be taught are scheduled for San José (July 14-16) and Santa Rosa (September 10-11). For more information about Training seminars, please visit the DHCS/MediCal website.

EDUCATION

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

Best of ASCO

Those who will wish to revisit or initially view the cutting-edge science presented at the 2009 ASCO Annual Meeting can now register and reserve housing for the upcoming *Best of ASCO* meeting in Los Angeles. This meeting will feature high-impact abstracts on scientific findings in primary disease sites, as well as practice-changing advances in cancer prevention and treatment. *Best of ASCO* takes place in Los Angeles on June 19-20th, at the *Hyatt Regency Century Plaza*. Visit www.asco.org/ASCO/Meetings/ASCO+Symposia+%26+Workshops/Best+of+ASCO+Meetings/Best+of+ASCO+Los+Angeles for more information and to register. MOASC will host a reception on Friday, June 19th at ASCO's *Best of ASCO*. Please RSVP via e-mail to neast@moasc.org by June 15th.

Taking Charge of Your Third-Party Payor Contracts

ANCO is pleased to present two workshops entitled *Taking Charge of Your Third-Party Payor Contracts* with Aileen Wetzel & Frank Navarro, Associate Directors, California Medical Association Center for Economic Services. These workshops will take place on July 8th in Sacramento and July 15th in San José. Attendees will receive a copy of CMA's contracting toolkit *Taking Charge: Steps to Evaluating Relationships and Preparing for Negotiations*. The toolkit (a \$125 value) includes CMA's legal guide to payor contracts, *Managed Care Contracts Deciphered: The Physicians' Guide to Their Rights and Obligations*. A copy of the meeting announcement/registration form is attached to this edition of the ANCO FAX News and is available online at www.anco-online.org/ANCOTakingCharge.html.

SAVE THE DATE

ASCO/ONS Highlights 2009

ANCO's *ASCO/ONS Highlights 2009* will summarize the major research and treatment advancements presented at this year's *ONS Congress* and *ASCO Annual Meeting*. The program will focus on breast, gastrointestinal, genitourinary, gynecologic, and lung cancers as well as hematological malignancies. The faculty will place these developments in context as to their immediate clinical utility. A plenary talk on immunotherapy will also be presented. *ASCO/ONS Highlights 2009* will take place on Saturday morning, August 29th, at *The Claremont Resort* in Oakland. Meeting announcements and registration forms will be disseminated in early July.

5th Annual Oncology Congress



The *5th Annual Oncology Congress* will take place September 24-26th at the *Hilton San Francisco*. This event is an interactive CME conference providing practicing oncologists with the latest

clinical data, best practices, and new technologies that are directly applicable to the practice of oncology today. The *Congress* agenda, faculty, and registration information are available at www.oncologycongress.com. ANCO members can use registration code ANCO09 to activate a special discounted registration rate of \$100.

Additional Education Meetings

Other meetings of possible interest to ANCO member practices are:

June 9th

Breast Cancer and Hispanic Women
CancerCare
Telephone Education Workshop

June 10th

Emerging Treatments for Non-Hodgkin Lymphoma
CancerCare
Telephone Education Workshop

June 11-14th

CancerGuides II: Cutting-Edge Cancer Care Professional Training Program
&
Food as Medicine: Professional Training Program
Center for Mind-Body Medicine
Washington, D.C.

June 17th

Medical Update on Lung Cancer from the 2009 American Society of Clinical Oncology (ASCO) Annual Meeting
CancerCare
Telephone Education Workshop

June 18th

Medical Update on Breast Cancer from the 2009 American Society of Clinical Oncology (ASCO) Annual Meeting
CancerCare
Telephone Education Workshop

June 19-20th

Great Debates and Updates in Breast Cancer
Imedex
San Francisco

June 23rd

The 7th Annual Cancer Survivorship Series—Living With, Through, and Beyond Cancer Part 3: Survivors, Too, Family, Friends, and Loved Ones
Managing the Fatigue of Caregiving

CancerCare

Telephone Education Workshop

June 24-25th

10th Annual Patient Congress
Patient Advocate Foundation
Washington, D.C.

June 25th

Living with Metastatic Colorectal Cancer
CancerCare
Telephone Education Workshop

June 26th

When the Diagnosis is Cancer of Unknown Primary: Guidelines for Care
CancerCare
Telephone Education Workshop

July 16th

Understanding Peripheral Neuropathy
CancerCare
Telephone Education Workshop

July 23rd

What's New in Head and Neck Cancer: Knowing Your Health Care Team
CancerCare
Telephone Education Workshop

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

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 July 16th. 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 7th, 2008. 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.** Please verify your *Directory* entry and contact the ANCO office with any corrections, additions, and/or deletions. The next *Directory* will be published in July 2009.

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.

Kaiser Permanente's cancer trial program in Northern California is 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 initiated an institutional membership in 2002. *Department(s) of Hematology and/or Oncology* of accredited, degree-granting teaching universities or research institutions are eligible for institutional membership. ANCO thanks the following **Institutional Members** for their support:

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

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

- med.stanford.edu/seminars/cmecalendar.do
- www.ucdmc.ucdavis.edu/cme/

conferences

- www.cme.ucsf.edu/cme

Stanford's 3rd Annual GI Cancers meeting takes place July 31st-August 2nd at the *Mauna Lani Bay Resort* in Hawaii. Visit www.cme.stanfordhospital.com 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 • *Alaven*
Alexion Pharmaceuticals • *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 • *Merck* • *Millennium*
Novartis Oncology
Oncology Supply/ION • *OneOncology*
Ortho Biotech • *OSI Pharmaceuticals*
Onmark,
a McKesson Specialty Care Solutions
Company
Pfizer Oncology • *Response Genetics*
Roche Oncology • *Sanofi Aventis Oncology*
Spectrum Pharmaceuticals
US Oncology Physician Services
Wyeth Pharmaceuticals • *Vidacare*

We especially wish to thank and welcome *Merck* and *Response Genetics* as new Corporate Members in 2009.

Please visit www.anco-online.org/assistance.html for Corporate Member drug reimbursement and patient assistance program information.

Bristol-Myers Squibb Oncology has informed ANCO that the FDA has approved Sprycel for the treatment of adults in all phases of chronic myeloid leukemia with resistance or intolerance to prior therapy including Gleevec.

Clinical Trial News

UC Davis seeks patients for a phase II trial of Abraxane and Alimta for stage IIIB or IV NSCLC that has progressed or recurred after treatment with platinum-based therapy. The trial is based on the hypotheses that the formulation of Abraxane will enhance drug delivery to the tumor resulting in greater cytotoxicity and an improved toxicity profile because of the altered formulation of paclitaxel, and that the combination of Abraxane and Alimta will have additive cytotoxicity based on preclinical data. This combination was well tolerated in the phase I portion of the trial completed at UC Davis. Patients may have had up to two prior chemotherapy regimens excluding Abraxane or Alimta. Patients with asymptomatic treated brain metastases may be included. Both agents are provided free of charge by the trial. Contact Corinne Turrell, *Clinical Trials Navigator*, at (916) 734-3089 for more information. UC Davis's active adult protocol list is available at ccresources.ucdmc.ucdavis.edu/csr/content/clinicaltrialspublicreport.csr?adult=1.

Publications, Resources, Services, & Surveys

ASCO's *Oncology Practice Insider* is an interactive biweekly communication specifically devoted to oncology practice management issues and for practice managers. Subscribe to the *Oncology Practice Insider* via e-mail to practice@asco.org. The latest issue features:

- Need Practical Tips for Coding and Billing?
- Treatment Plan and Treatment Summary Templates
- Strategic Planning: Why It Makes A Difference and How to Do It
- Drug Shortage Updates
- Billing and Coding Q&A

The May (Vol. 5, Issue 3) issue of ASCO's *Journal of Oncology Practice* features articles entitled *Cancer Care and Cancer Survivorship in the United States: Will We Be Able to Care for These Patients in the Future*, *Ethical Issues Related to Patient Use of Complementary Care and Alternative Medicine*, and *Progress in the Control of Chemotherapy-Induced Emesis: New Agents and New Studies*. Visit www.jopasco.org for more information. ASCO began publishing the *Journal of Oncology Practice* (JOP) in mid-2005. Although focusing on physician needs, JOP has increased its coverage of topics that are equally of interest and value to practice administrators. **ASCO is offering six (6) months of complimentary online access to JOP (at jop.ascopubs.org) to practice administrators associated with ANCO member practices.** Visit jop.ascopubs.org (use username JGONZALEZ and password J001_001).

Individual Membership Dues for 2009

Final notices of membership renewal were mailed in late April. If you have not yet done so, then please return your 2009 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 July 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.

Please Note: The ANCO Office will be closed from June 11th through June 27th while the *Executive Director* is out of the country.

Medical ID Theft Spawns New Compliance Requirements: Health Care Required to Have a Program to Police Medical ID Theft

by Eric R. Sartori, *ID Theft Risk Management Specialist*

Identity theft is the #1 crime in America. Medical identity theft, where individuals receive medical care using stolen or false identities, is widely considered to be one of the fastest growing types of ID theft. An increasing number of people are falling victim to this crime and are having their lives turned upside down, while being forced to spend hundreds of hours to clear their good name. The cost to business has most recently been estimated at nearly \$50 billion dollars per year.

In response to this growing problem, the *Federal Trade Commission* (FTC) is now requiring an *ID Theft Red Flag Program* be in place for any medical practice that does not collect complete payment at the time it provides services to a patient. Any practice that is billing insurance on behalf of its patients is considered a “creditor” by the FTC and falls under these requirements. The deadline for having a program in place is August 1st, 2009. Penalties for failing to comply include civil and monetary penalties per infraction.

The purpose of the *Red Flag* requirements is to minimize additional risk to individuals who have already had their information stolen. While having to comply with a new law may seem overburdening, practices can reduce their liability and minimize the expense of providing services where payment would go uncollected. Third party payers can also demand a refund from physicians if identity theft is discovered after the payment has been applied. Ultimately, the financial cost of this growing problem is most often borne by the practice; good policies and staff awareness can reduce that cost. Aside from the FTC requirements, a properly laid out and executed ID theft deterrence program makes good business sense.

Although the AMA and other medical associations have suggested that they should not fall under this rule, the FTC has made it clear that they would not be granting an exemption to health care providers. While some may be waiting to see how the second challenge from the AMA to the FTC will turn out, the AMA is encouraging participation due to the August 1st deadline.

Staff training is a critical element to this program. Not only will new procedures need to be adopted, but a new awareness among staff needs to be created to adequately follow policies. Most employees within the health care industry know very little about this problem and will find it difficult to identify the red flags, follow proper reporting requirements, and recognize the appropriate responses without proper training from an organization that specializes in ID theft deterrence. Proper training should also impact behavior related to how information is handled, as 61% of current data breaches are a result of administrative error.

The FTC is not treating all “creditors” equally and the red flag policies and procedures for medical offices should not have to impact everyday operations as HIPAA did. Working with a company having experience with red flag rules and ID theft deterrence can mitigate much of the work and allow practices to do what they are in business to do.

TBG Fraud Solutions has worked with hundreds of organizations in the prevention of identity theft. We are working with ANCO to offer a program to ANCO members that will assist in complying with the FTC's *Red Flag Rules* by conducting a risk assessment, developing a customized program for the practice, and providing training for staff.

Eric R. Sartori, an ID theft Risk Management Specialist with TBG-Fraud Solutions, works with organizations to prevent data breaches and identity theft and provides training. He is currently providing documentation and specialized training designed specifically for the Red Flags legislation at no charge for qualifying practices. For more information, please contact TBG-Fraud Solutions directly at (530) 333-2793.

ASSOCIATION OF
NORTHERN CALIFORNIA ONCOLOGISTS



*are pleased to sponsor two talks for oncologists, oncology nurses,
and oncology practice managers entitled*

**TAKING CHARGE OF YOUR
THIRD-PARTY PAYOR CONTRACTS**

Aileen Wetzel & Frank Navarro

Associate Directors

California Medical Association

Center for Economic Services

Thinking about signing a new contract or renegotiating your current contracts?

Having claims processing and/or payment problems with third-party payors?

CMA's *Taking Charge* workshop will discuss how to evaluate third-party contracts, how to prepare for contract negotiations, and how to identify common pitfalls in contracting. Learn how to improve contract terms and performance, including:

- Evaluate current and proposed payor contracts
- Essential clauses to leave in and/or take out
- Determine specific payor's value to your practice
- Target payors for contract termination, negotiation, or renegotiation
 - Prepare for contract negotiations
- Monitor payor compliance with payor terms and California laws and regulations
 - "Silent PPOs" and their implications

Attendees will receive a copy of CMA's contracting toolkit *Taking Charge: Steps to Evaluating Relationships and Preparing for Negotiations*. The toolkit (a \$125 value) includes CMA's legal guide to payor contracts, *Managed Care Contracts Deciphered: The Physicians' Guide to Their Rights and Obligations*.

These talks are scheduled for:

**Wednesday
July 8th, 2009**
8:30AM-12:30PM
Hyatt Regency
1209 L Street
Sacramento
(916) 443-1234

**Wednesday
July 15th, 2009**
8:30AM-12:30PM
San José Fairmont
170 South Market Street
San José
(408) 998-1900

Please call the meeting location of your choice for directions. FAX your reservation(s) to José Luis González, *ANCO Executive Director*, at (415) 472-3961 no later than July 1st, 2009. Registration/continental breakfast will be available at 8:00AM.

I/We will attend the following *Taking Charge* workshop(s; please print clearly and indicate the program date you will attend):

Name(s): _____ Tel(s): _____ Date(s): _____

