

ANCO FAX News

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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 August 14th. 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.]

ANCO and ASCO are deeply concerned with CMS's proposed Medicare Physician Fee Schedule for 2010. An initial analysis indicates that there could be reductions in overall payments to medical oncologists in the range of 6%, with steeper cuts in payments to radiation oncologists of 10% if all proposed changes are implemented.

**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.

CMS's proposed actions are a serious threat to the cancer community, and ASCO is taking aggressive steps on all of the issues outlined below:

- CMS's proposed reduction is based on a survey that grossly underrepresents practicing oncologists and that in no way reflects the true costs to practices. ASCO promptly communicated with CMS on this point and will continue to advocate that this survey provides an unbalanced perspective on the full cost of providing quality care to people with cancer.
- Payments for core chemotherapy administration services such as IV chemotherapy infusion would be cut by more than 20% if these proposals are finalized.
- CMS has proposed eliminating payments for consultation codes and instead classifying consultations as E&M visit codes without providing a full discussion of the impact of this decision on specialties like oncology.
- Oncology is one of only a few medical subspecialties that have been targeted for proposed cuts and it cannot sustain further payment reductions at a time when the number of people with cancer is increasing, practice expenses are increasing, and the oncology workforce is dwindling.

ASCO's preliminary analysis of the proposed fee schedule is available at www.asco.org/ASCOv2/Department%20Content/Cancer%20Policy%20and%20Clinical%20Affairs/Downloads/ASCO%20Fee%20Schedule%20Summary.pdf. (Additional analyses from ACCC and ASH are available at www.accc-cancer.org/public_policy/pdf/2010_physician_proposedrule.pdf and www.hematology.org/policy/news/07172009b.cfm, respectively.) As you consider the effects that these payments cuts will have on your practice and your patients, please share your specific feedback with ASCO as it will be very helpful to provide specific examples and real-life stories to *Congress* and CMS about the impact that the fee schedule cuts will have on practices and patients. Please send any comments you

would like to share to publicpolicy@asco.org. ANCO also urges all members to contact their *Congressional* representatives during the August recess to express their concern over CMS's proposed *Medicare Physician Fee Schedule* for 2010.

The *Federal Trade Commission* (FTC) has decided to delay until November 1st enforcement of its ruling that would consider physicians who regularly bill their patients (including co-payments and coinsurance) to be creditors. This rule would compel physicians to develop and implement written identity theft prevention and detection programs for their practices in order to be in compliance with the FTC's *Red Flag 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*. The *California Medical Association* (CMA) has published a toolkit to help physicians and their staffs understand the scope and requirements of the *Red Flag Rule*. The toolkit provides guidance on designing and implementing an identity theft detection and prevention program for the physician practice. CMA's *Red Flag Rule Toolkit* is free to members at the members-only website. **For a primer on the FTC's *Red Flag Rule*, please see the article at www.anco-online.org/RedFlagRule.pdf.**

S1221, a companion bill to HR1392, has been introduced in the *Senate* and would remove prompt-pay discounts extended to wholesalers from the calculation of the *Average Sales Price* (ASP) for Medicare Part B drugs. Including prompt pay discounts in the ASP calculation threatens community oncology practices by artificially lowering the reimbursement rate for chemotherapy treatments. ASCO, along with a broad coalition within the cancer community, supports this legislation. Significant support of this legislation is critical to its consideration and passage. **S717 (*21st Century Cancer ALERT Act*) would improve cancer care in the United States.** ALERT stands for Access to Life-saving Early Detection, Research and Treatment. The bill includes funding for a variety of programs and is intended to promote:

- Greater coordination of care through the use of registries.
- Increased access to research and clinical trials.
- Increased cancer prevention programs through access to early detection and other screening programs.
- Improvements in the coverage of cancer by Medicare and Medicaid.
- Increased funding for survivorship programs.
- Qualified patient navigation programs.

The bill also includes provisions to develop a national biorepository network for collecting tissue samples that will advance cancer research efforts. **S488 (Access to Cancer Clinical Trials Act)** addresses gaps in insurance coverage and economic barriers faced by cancer patients who participate in clinical trials. It would require insurance coverage in plans regulated by *Federal* and *State* law and would also set the standard for coverage in traditional insurance plans regulated by *State* law. **HR1844**

(Comprehensive Cancer Care Improvement Act of 2009) seeks to establish a new Medicare service for care planning, including a written care plan, treatment summary and survivor care plan that is communicated to survivors. **HR1927 (Assuring and Improving Cancer Treatment Education and Cancer Symptom Management Act)** would provide Medicare reimbursement for the time that registered nurses spend on educating newly diagnosed cancer patients about their disease and the effects of treatment. **HR2939 (Medicare Oncology Care Quality Improvement Act of 2009)** would establish an innovative Medicare pilot program to study the cost-effectiveness of three specific provider-led approaches to the delivery of oncology care. The legislation encourages oncology practices to utilize evidence-based guidelines, provide patient treatment education in advance of the onset of treatment, support patients throughout the course of their care, and engage in end-of-life planning and counseling of patients with poor diagnoses. All members of the cancer community should contact their

Congressional representatives to support these legislative initiatives.

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?cpsectcurrchannel=1](http://www.asco.org/ASCO/Practice+Resources/Electronic+Health+Records/EHR+Events/Electronic+Health+Records+(EHR)+Lab+at+the+2008+Annual+Meeting?cpsectcurrchannel=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 of 2009 (ARRA) signed into law, now is the time to implement electronic health records (EHR) into your practice. A CMS website (www.cms.hhs.gov/Recovery/11_HealthIT.asp) is now available where you can find information pertaining to the Medicare and Medicaid incentives for EHR adoption, including:

- a CMS fact sheet and questions/answers pertaining to the incentive programs.
- a link to the press release pertaining to the process of defining meaningful use.
- resources on health IT and privacy & security (HIPAA).

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:

- The *Medical Board's* diversion program for drug and alcohol addicted physicians will sunset soon, leaving physicians without a public program offering

treatment. The *California Medical Association* (CMA) and the *California Academy of Family Physicians* (CAFP) have co-sponsored AB526 that creates the *Public Protection and Physician Health Program* within the *State Consumer Services Agency* to offer treatment and monitoring services to physicians in need. AB526 has passed out of the *Assembly* and will be heard next in the *Senate Appropriations Committee*.

Sacramento can be a dangerous place for doctors. Many bills impacting medicine wind their way through the *Capitol* on their journey to the *Governor's* desk. And, many of these bills threaten the medical profession with the backing of powerful lobbyists and PACs. It's critical that **physicians have an advocate at work for them every day and who knows how to speak on their behalf. That advocate is the *California Medical Association* (CMA).** While physicians keep a close eye on their patients, CMA is keeping a close eye on those bills...and more. Got payment delays? Feeling victimized by 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.]

The *Medicare Modernization Act of 2003* established the *Medicare Recovery Audit Contractor* (RAC) program to identify fraud and waste in the Medicare system. Although the California RAC program will be officially rolled out on August 9th, CMS has said that physician services will not be targeted for audits until October. Audit contractors are expected to focus on companies and individuals whose billings for these Medicare services are higher than the majority of providers in their communities. Auditors cannot request more than 10 patient records from a practice in any 45-day period. The *California Medical Association* (CMA) is developing a toolkit to help physicians understand the program and, if necessary, navigate the audit process. The toolkit will be

available free to members next month.

Palmetto/J1MAC has published an article entitled *Recovery Audit Contractor (RAC) Program* and added a new RAC category under *Articles* on the Palmetto/J1MAC web site. Visit www.palmettogba.com/palmetto/providers.nsf/vMasterDID/7T6K7W3608?opendocument for more information on the RAC program.

DHCS/MediCal will cover bevacizumab for glioblastoma multiforme for dates of service on or after August 1st. Coverage criteria and coding/billing instructions were published in the MediCal Update dated July 2009 is available online at files.medi-cal.ca.gov/pubsdoco/publications/bulletins/gm/gmbull_i.asp.

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, a free DHCS/MediCal seminar where eTAR will be taught is scheduled for Santa Rosa (September 10-11). For more information about Training seminars, please visit the DHCS/MediCal website.

Did you know that the California has a quick, easy, and free way for physicians to get help with claims payment problems? The *Department of Managed Health Care's (DMHC) Provider*

Complaint Unit (PCU) has recovered more than \$16M in additional payments owed by health plans to physicians since it was created in 2005. The DMHC PCU was created as an alternative way for physicians to resolve claims payment issues without having to go to court. An online *Provider Complaint System* evaluates claim reimbursement disputes such as timely submission and payment of claims, failure to pay according to contracts, coding disputes, and enforcement of the provider bill of rights. The PCU investigates and addresses individual claims problems and also systemic unfair payment or billing patterns among health plans. The DMHC is the *State* agency that regulates all California HMOs, and *Anthem Blue Cross* and *Blue Shield* PPOs. If you are a physician and would like to report a problem regarding claims payment, please contact DMHC at (877) 525-1295 or visit www.healthhelp.ca.gov.

EDUCATION

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

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 were disseminated in early July. Download the meeting announcement and registration form at www.anco-online.org/ASCOHL2009.html.

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:

August 13th

What's New in Lung Cancer: Report from the 2009 Annual Meeting of the American Society of Clinical Oncology
CancerCare
Telephone Education Workshop

August 18th

Medical Update on Colorectal Cancer from the American Society of Clinical Oncology 2009 Annual Meeting
CancerCare
Telephone Education Workshop

August 26th

Coping with Nausea and Vomiting from Chemotherapy
CancerCare
Telephone Education Workshop

September 22nd-25th

26th National Oncology Economics Conference
Association of Community Cancer Centers
(www.accc-cancer.org/meetings/meetings_noed2009.asp)
Minneapolis

October 8-10th

Breast Cancer Symposium
American Society of Clinical Oncology

(www.asco.org/ASCOv2/Meetings/Breast+Cancer+Symposium)
San Francisco

December 2nd-8th

51st Annual Meeting

American Society of Hematology
(www.hematology.org/meetings/2009/program/index.cfm)
New Orleans

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

ANCO Online

ANCO's website, 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. To subscribe to the ANCO *Online ListServ*, visit www.anco-online.org and follow the links or visit 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. ANCO urges its members to bookmark anco-online.blogspot.com (or subscribe to 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* teleconferenced on July 22nd to discuss and/or act upon the following issues:

- California & National legislative/regulatory issues
- ANCO's *ASCO/ONS Highlights 2009*
- FY2009 YTD
- IRS mandated policies and resolutions
- ANCO's responses to economic challenges facing member practices

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

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 September 15th. 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 2009 will begin mailing to ANCO physician members; nurse and office manager contacts; and, Corporate Member representatives the week of August 3rd. 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 2010.

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

UCD's **10th Annual Advances in Oncology** takes place at the *Hyatt Regency* in Sacramento on September 12th. Visit www.cancerlearning.com/index.cfm/fuseaction/conference.showOverview/id/5/conference_id/343 for more information.

The **11th Annual UCSF/UCD Thoracic Oncology Conference** takes place in San Francisco on November 21st. Visit www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MSU10004 for more information.

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 • Agendia • 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 • ImClone Systems
Lash Group Healthcare Consultants
Lilly Oncology • Merck • Millennium
Novartis Oncology
Oncology Supply/ION • Ortho Biotech
OSI Pharmaceuticals
Onmark,
a McKesson Specialty Care Solutions Company
Pathwork Diagnostics • 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, Pathwork Diagnostics, and Response Genetics* as new Corporate Members in 2009. *Hospira* and *OneOncology* did not renew their Corporate Memberships for 2009.

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

Lilly Oncology informs ANCO that the United States Food and Drug Administration has approved Alimta for the maintenance treatment of patients with locally advanced or metastatic nonsquamous non-small cell lung cancer whose disease has not progressed after four cycles of

platinum-based first-line chemotherapy. Alimta is also indicated for initial treatment of locally advanced or metastatic nonsquamous non-small cell lung cancer in combination with cisplatin, single agent treatment of patients with locally advanced or metastatic nonsquamous non-small cell lung cancer after prior chemotherapy, and in combination with cisplatin for the treatment of patients with malignant pleural mesothelioma whose disease is unresectable or who are otherwise not candidates for curative surgery.

US Oncology Physician Services is hosting a *webcast for ANCO members entitled **Realizing Pay for Performance: New Incentives in Physician-Directed Cancer Care Management** on Wednesday, August 5th at 12:30PM. Visit <http://www.P4PWebinar.com> for more information and to register*

Publications, Resources, Services, & Surveys

The cost of cancer treatment is often identified by patients and society as one of the most pressing issues facing the cancer community. ASCO is concerned that the rising costs of health care in general, and cancer care specifically, are not sustainable. Creating a workable, realistic solution to this problem will require a major effort by all the interested parties (i.e., physicians, government, insurers, pharmaceutical companies, patients and their families, and others). ASCO recently published its *Cost of Cancer Care Guidance Statement* in the *Journal of Clinical Oncology*. **ASCO also released a new guide to help patients and doctors better communicate about the costs associated with cancer care.** The booklet, available at www.cancer.net/managingcostofcare, includes:

- A list of questions that patients can ask their doctors about health care costs, including costs associated with medication and treatment, doctor visits, and associated expenses such as transportation, other living expenses, and long-term care.
- Information on resources for patients who have employment or health insurance problems related to their cancer treatment.

- Tips for organizing bills and expenses related to the cost of cancer treatment.
- A list of financial resources available to people with cancer.
- A glossary of cancer treatment and financial terms.

ASCO will be releasing additional tools and information on cost of care issues in the weeks and months ahead. The *Journal of Oncology Practice* will feature a series of articles that further address issues related to the rising cost of cancer care. If you would like more information about ASCO's cost of care efforts, contact ASCO's *Cancer Policy & Clinical Affairs Department* at (571) 483-1670 or cancerquality@asco.org.

The **Quality Oncology Practice Initiative (QOPI)** is a practice-based quality improvement program developed by ASCO volunteers. QOPI includes a set of quality measures, a specified chart selection methodology, a secure system for data entry, automated data analysis and reporting, and a network of resources for improvement. Twice a year, staff at participating practices conduct a retrospective review of patient charts. Following every data collection period, the QOPI system generates a report for each practice. QOPI data can be used to satisfy the practice performance improvement requirement for ABIM *Maintenance of Certification*. Register for QOPI at www.asco.org/QOPI.

The July (Vol. 5, Issue 4) issue of ASCO's *Journal of Oncology Practice* features articles entitled *Survey of Provider Perspectives on Patient Assistance Programs*, *E-Prescribing: Worth the Effort?*, *Enhancing Clinical Trial Awareness and Outreach*, and *Provider Practice Models in Ambulatory Oncology Practice: Analysis of Productivity, Revenue, and Provider and Patient Satisfaction*. Visit www.jopasco.org for more information.

The July/August (Vol. 24, No. 4) issue of ACCC's *Oncology Issues* features articles entitled *Emerging Role of Pharmacists in Private Practice*, *Implementing EHRs in Community Oncology Practices*, and *Is Your Practice Getting the Most from EHR?*. Visit www.accc-cancer.org/oncology_issues/ for more information.

NCCN has updated their *Clinical Practice*

Guidelines in Oncology, as follows:

- *for Neuroendocrine Tumors* to include expanded information on octreotide use and a new algorithm on neuroendocrine tumors of unknown primary.

Visit www.nccn.org for the latest NCCN guidelines.

NCCN and Medscape are offering several new continuing education programs on www.medscape.com featuring distinguished faculty from the NCCN Member Institutions presenting information in a 30-minute, roundtable format, as follows:

- *2009 Updates to the NCCN Non-Small Cell Lung Cancer Guidelines* (www.medscape.com/viewprogram/18689)
- *Treating and Monitoring Patients With Chronic Myelogenous Leukemia* (www.medscape.com/viewprogram/17646)

These programs are approved for *AMA PRA Category 1 Credit*[™] and are also approved for nursing contact hours.

The July issue of *Oncology Business Review* features articles entitled *Can Episode-Based Payments Replace Buy and Bill?*, *Economy Forcing Oncology Practices to Adjust*, and *ERA-Based Data and Oncology Products: An Opportunity for Practices to Maximize Cash Flow*. Visit www.oncbiz.com for more information.