

ANCO FAX News

Association of Northern California Oncologists
Post Office Box 151109, San Rafael, California 94915-1109
Voice: (415) 472-3960 • FAX: (415) 472-3961
execdir@anco-online.org • www.anco-online.org

Vol. 8, No. 14

August 14th, 2009

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 September 4th. Send your comments or contributions to ANCO, P.O. Box 151109, San Rafael, CA 94915-1109; *Voice:* (415) 472-3960; *FAX:* (415) 472-3961; execdir@anco-online.org.

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.

ACCC's, ASCO's, and ASH's analyses of the proposed fee schedule is available at www.anco-online.org/mma.html.

Congress is on recess, but that does not mean ANCO/ASCO is slowing down efforts to remove cuts to cancer care in the proposed Medicare fee schedule. **Please consider taking the following actions in August to communicate how cuts to Medicare will hinder patient access to care:**

- **Contact your Members of Congress.**
Here's how:
 1. Ask your *Congressional Representatives* to sign onto the González/Rogers "Dear Colleague" letter (available at [www.asco.org/ASCOv2/Department %20Content/Cancer%20Policy%20and](http://www.asco.org/ASCOv2/Department%20Content/Cancer%20Policy%20and)

[www.asco.org/ASCOv2/Department %20Content/Cancer%20Policy%20and %20Clinical%20Affairs/Downloads/Policy%20Issues/Medicare%20and %20Quality%20Care/Gonzalez %20Rogers%20Dear%20Colleague %20Letter%20073009.pdf](http://www.asco.org/ASCOv2/Department%20Content/Cancer%20Policy%20and%20Clinical%20Affairs/Downloads/Policy%20Issues/Medicare%20and%20Quality%20Care/Gonzalez%20Rogers%20Dear%20Colleague%20Letter%20073009.pdf)) to members of the *House of Representatives*, urging their colleagues to join them in signing a letter to *Health and Human Services Secretary* Kathleen Sebelius expressing deep concern about the proposed cuts to oncology and cardiology in the Medicare fee schedule and asking CMS to abstain from using the flawed data that justify the cuts.

2. **Attend a Town Hall Meeting.** Most *Members of Congress* host town hall meetings when they are in their home districts. At these events, you can ask questions, introduce yourself, and tell your *Representative* and *Senators* about the issues that affect you and your patients. Most legislators post scheduled town hall meetings on their web sites. (*Members'* web sites can be found at www.house.gov or www.senate.gov.) ASCO has also developed tips for attending a town hall meeting (available at [www.asco.org/ASCOv2/Department %20Content/Cancer%20Policy%20and %20Clinical%20Affairs/Downloads/Grassroots/Tips %20for%20Attending%20a%20Town %20Hall%20Meeting.pdf](http://www.asco.org/ASCOv2/Department%20Content/Cancer%20Policy%20and%20Clinical%20Affairs/Downloads/Grassroots/Tips%20for%20Attending%20a%20Town%20Hall%20Meeting.pdf)) to help you prepare.

3. **Schedule an In-person Meeting.** A face-to-face meeting with your *Member of Congress* or the *Member's* staff is often the best way to share your concerns. ASCO has composed a guide (available at [www.asco.org/ASCOv2/Department %20Content/Cancer%20Policy%20and %20Clinical%20Affairs/Downloads/Grassroots/How%20to%20schedule %20a%20meeting%20in%20the %20district%20final.pdf](http://www.asco.org/ASCOv2/Department%20Content/Cancer%20Policy%20and%20Clinical%20Affairs/Downloads/Grassroots/How%20to%20schedule%20a%20meeting%20in%20the%20district%20final.pdf)) on scheduling and preparing for in-person meetings.

4. **Host a Site Visit.** Invite your *Member of Congress* to your office, where you can educate the *Member* and his/her staff about what happens in an oncology practice. ASCO's web site (at

www.asco.org/ASCOv2/Public+Policy/Advocacy+Tools/Advocacy+At+Home/Site+Visit+Information) offers guidance on how to schedule and prepare for a site visit.

Your greatest strength in communicating to your legislator is your experience as an oncologist treating people with cancer. Your *Member of Congress* needs to hear your perspective and learn first-hand from you about how continued cuts to Medicare will impede your ability to care for cancer patients.

- **Complete the *Components of Care Study* survey** (available at www.communityoncology.org/components-of-care-example/) designed to identify and quantify the clinical and operational components of cancer care delivery. The results will be used to demonstrate the complexity of cancer care delivery, as well as provide specific data on appropriate payment for services. The survey was developed by *Avalere Health* with the *Community Oncology Alliance*.

- **Share your story with ASCO.** It will be very helpful to provide specific examples and real-life stories to *Congress*, CMS, and the media about the impact that the fee schedule cuts will have on your practice and your patients. Please send any comments you would like to share about the effects cuts to Medicare are having on your practice to publicpolicy@asco.org.

For updates on Medicare and other legislative activities, ASCO's new web page, *Cancer Policy and Health Care Priorities*, (available at www.asco.org/policypriorities) provides information on action ASCO is taking to fight the fee schedule cuts and to make the voice of the oncologist heard in health care reform debates.

CMS's Office of the Inspector General (OIG) recently issued a report on services performed by non-physicians under the "incident to" rule. Basically, OIG is recommending that CMS make revisions to the "incident to" rule. The report

specifically cites a high use of non-physicians in the administration of chemotherapy. Therefore, it is very important for oncology practices to review the qualifications of non-physicians and the "incident to" rule. Read the report at www.communityoncology.org/wp-content/uploads/OIG8-09ReportonNon-MDAactivities.pdf.

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.**

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 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!?opendocument. 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 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.

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/mma.html and www.asco.org/mma, including:

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

Members may also e-mail ASCO's *Coding & Reimbursement Hotline* at practice@asco.org for up-to-date information on changes in coding for drug administration services, as well as billing and payments for drugs. Please include your ASCO member ID in your e-mail.

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.]

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 *Reimbursement Helpline* at (888) 401-5911.

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. While the California RAC program 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 or www.anco-online.org/MedicareRACs.pdf for more information on the RAC program.

The August edition of the Palmetto/J1MAC Medicare Advisory is now available at [www.palmettogba.com/Palmetto/Providers.nsf/files/J1_Medicare_Advisory_August09.pdf/\\$File/J1_Medicare_Advisory_August09.pdf](http://www.palmettogba.com/Palmetto/Providers.nsf/files/J1_Medicare_Advisory_August09.pdf/$File/J1_Medicare_Advisory_August09.pdf). Of specific relevance to oncology, this edition features:

- **Advance Payments** to Providers of Part B Services: Updated Summary of the Requirements
- July 2009 Quarterly ASP Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files

- **Billing Requirements** for Provider Information
- **CMS Claim Filing Instructions:** The 1500 Form
- **Unprocessable/Rejected Claims**
- **Billing Routine Cost of Clinical Trials**
- **Medicare Contractor Annual Update of the ICD-9-CM**
- **Part B LCD Updates**
- **Modifiers:** General Information
- **Information for Eligible Professionals Who Participated in the 2007 PQRI**
- **Coding and Reporting Principles for the PQRI and the E-Prescribing Incentive Programs**
- **Information on Redeterminations**

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. The registration deadline is August 21st and space is limited.

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. (Please note that in a recent mailing to ANCO members, the *Oncology Congress* incorrectly indicated that registration for this meeting would be complimentary.)

Additional Education Meetings

Other meetings of possible interest to ANCO member practices are:

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 11-12th

4th Annual Congress: Hematologic Malignancies
National Comprehensive Cancer Network
New York

September 12-16th

Oncology: Clinical Issues and Trends
Contemporary Forums
Washington, D.C.

September 12-16th

Mind-Body Medicine Professional Training Program

Center for Mind-Body Medicine
Washington, D.C.

September 22nd
Medical Update on Metastatic Prostate Cancer
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

September 24th
Update on the Treatment of Liver Cancer
CancerCare
Telephone Education Workshop

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.

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 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

Need vacation coverage? Mike Turbow, M.D., ANCO member, *Past President*, and **retired oncologist, is interested in doing locum tenens**. Contact Dr. Turbow at mturbowmd@mac.com or (650) 759-9861.

The ANCO Directory of Members 2009 was mailed 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.

For information on **Institutional Member clinical trials**, please visit:

- cancertrials.stanford.edu/
- ccresources.ucdmc.ucdavis.edu/csr/content/clinicaltrialspublicreport.csr
- clinical-trials.ucsf.edu:8000/trials/index.php

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 • Centocor Ortho Biotech
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 • 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.

Bristol-Myers Squibb Oncology and *Lilly Oncology* have added language to the package insert for *Erbix* stating that there is no evidence the drug works on a minority of colon cancer patients with a specific genetic mutation. The new language states that studies have not shown that *Erbix* helps patients whose tumors have a mutated gene, or biomarker, called *KRAS*. *AMGEN* announced a similar label change for *Vectibix*.

Genentech BioOncology informs ANCO that the *United States Food and Drug Administration* has approved *Avastin plus interferon* for people with metastatic renal cell carcinoma.

US Oncology Physician Services is hosting a webcast entitled *The Thriving Oncology Practice: Key Clinical and Operational Metrics* on Friday, August 21st at 11AM. Visit www.opspharmacist.com/opes for more information and to register.

Publications, Resources, Services, & Surveys

ASCO's Practical Tips for the Oncology Practice

(5th edition) is now available. *Practical Tips* is a fully-indexed and spiral-bound reference guide to Medicare coverage, coding, and billing for the oncology practice. A \$250 value, for a limited time, ANCO will purchase and ship a copy of *Practical Tips* to member practices in September if you provide the physician member's name, practice name, and address to ANCO prior to August 28th. (A FAX with this offer was sent to ANCO member practices on August 10th.)

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. Recent issues featured:

- CMS clarifies Stark "stand in the shoes" provision.
- Direct physician supervision defined.

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.

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).

The *Community Oncology Alliance's* (COA) Administrators' Network (CAN) website is available at communityoncology.info. Bobbi Buell is the CAN Web Mistress. The site

includes a variety of presentations, tools, resources, and copies of her newsletter. Registration is required to access this website.

The Journal of the National Comprehensive Cancer Network (Volume 7, Number 7) features articles entitled *Practice Patterns and Guideline Adherence of Medical Oncologists in Managing Patients with Early Breast Cancer*, *Management of Adrenocortical Carcinoma*, *Treatment of Carcinoid Tumors with Radiolabeled Biologic Molecules*, and *The Role of Interventional Radiology in the Treatment of Patients with Neuroendocrine Metastases in the Liver* Visit

www.nccn.org/JNCCN/toc/2009july.asp for more information.

NCCN has updated their *Clinical Practice Guidelines in Oncology*, as follows:

- *for Prostate Cancer Early Detection* to reflect new evidence from studies published in 2009 with respect to PSA screening.

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

NCCN is developing a library of chemotherapy order templates to improve the safe and effective use of drugs and biologics in cancer care. The information contained in the NCCN *Templates* is based on their *Clinical Practice Guidelines in Oncology* and their *Drugs & Biologics Compendium* and include chemotherapy, immunotherapy, supportive care agents, monitoring parameters, and safety instructions. Special instructions for self-administered chemotherapeutic agents are also provided. *Templates* are now available for anal, bladder, breast, cervical, colon, hepatobiliary, kidney, non-melanoma skin, non-small cell lung, ovarian, prostate, rectal, small cell lung, and testicular cancers; chronic myelogenous leukemia; and, uterine neoplasms. Access the latest updates at www.nccn.org.