

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

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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 February 20th. 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.]

ASCO and the *Oncology Nursing Society (ONS)* partnered to develop a process based on consensus to draft the first *Standards for Safe Chemotherapy Administration* (visit www.asco.org/safety for more information). The draft *Standards* will be available for comment through March 13th. A survey tool for public

**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.

comment and the *Standards* document can be accessed at research.zarca.com/k/RsTUTRsSPPsVXVTPsPsP. Your comments are extremely valuable and will be analyzed by the ASCO/ONS *Steering Committee* for inclusion in the *Standards*. The final *Standards* and an article describing their development will be submitted for publication in ASCO and ONS journals.

ASCO has learned that leucovorin manufacturers, Bedford Laboratories and Teva Pharmaceuticals, have confirmed production plans for the months of February and March.

Teva has increased production and confirmed they are working at full production capacity. The company has, however, noted that it will take several weeks to fill back orders. *Bedford* has an emergency supply available that can be accessed by contacting them at (800) 562-4797.

The Department of Health and Human Services (DHHS) recently announced plans to replace the ICD-9-CM code sets now used to report health care diagnoses and procedures with greatly expanded ICD-10 code sets, effective October 1st, 2013, two years later than originally planned. Despite this two-year delay, organized medicine remains deeply concerned that the 2013 compliance deadline proposed by DHHS will not provide adequate time for a smooth transition from ICD-9 to ICD-10. It has urged DHHS to reconsider its proposed timeline, as moving from ICD-9 to ICD-10 will be a significant change for the health care community. A transition of this magnitude will require a workable implementation process and realistic timeline for all HIPAA covered entities, and comprehensive outreach and education initiatives to support health care providers, especially small physician practices, throughout this complex move to ICD-10. Organized medicine has proposed an 8-year transition plan. Visit www.cms.hhs.gov/apps/media/press/factsheet.asp?Counter=3407&intNumPerPage=10&checkDate=&checkKey=&srchType=1&numDays=3500&srchOpt=0&srchData=&keywordType=All&chkNewsType=6&intPage=&showAll=&pYear=&year=&desc=&cboOrder=date for more information.

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. You must also use a qualified e-prescribing system that can:

- Generate a complete medication list with available data from pharmacies and benefit managers.
- Select medications and transmit prescriptions electronically (not via FAX) following applicable Federal standards, after warning the prescriber of any possible safety issues associated with the drug orders.
- Provide information on lower-cost, therapeutically appropriate alternatives.

- Provide drug plan information, such as formularies, patient eligibility, and authorization requirements.

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/EPrescribing/. Medicare's *Practical Guide to the E-Prescribing Incentive Program* is now available at www.palmettogba.com/palmetto/providers.nsf/DocsCat/Providers~Current%20News~Medicare%20Practical%20Guide%20to%20the%20E-Prescribing%20Incentive%20Program%20is%20now%20available%20online!%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). CMS has posted specifications for the e-prescribing measure at www.cms.hhs.gov/PQRI/03_EPrescribingIncentiveProgram.asp#TopOfPage. According to ASCO, however, physicians face challenges with this new program because:

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

For additional oncology-specific information, visit ASCO's e-prescribing website at www.asco.org/eprescribing, which specifically addresses the following questions:

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

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.

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

- ASCO's *Adapting to Changes in Medicare 2009 PowerPoint* presentation.
- The January 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) House of Delegates and Council on Legislation*. ANCO and MOASC coordinate advocacy activities in California.]

The *California Oncology Political Action Committee* (or CalCancerPAC), formed by ANCO and MOASC, supports candidates sensitive to the needs of hematologists/oncologists and people living with cancer in California. ANCO membership dues include a contribution to CalCancerPAC.

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.]

Upon learning of incorrect denials of the new

hydration and therapeutic, diagnostic, and prophylactic drug administration codes (963xx) from ANCO and MOASC, Palmetto/J1MAC has issued the following Alert to providers:

- New 2009 CPT Codes 96360, 96361, 96365-96368, 96372-96375, may have been denied in error for dates of service 1/1/09-1/27/09, due to the system denying services submitted with Evaluation & Management Services billed with the 25 modifier and one of the Chemo Administrations/Non-Chemotherapy Drug Infusion & Drug Injection Services. The services should have been allowed.
- Applies To Procedure Code(s); Chemo Administrations/Non-Chemotherapy Drug Infusion & Drug Injection Services): 96360, 96361, 96365, 96366, 96367, 96368, 96372, 96373, 96374, and/or 96375

billed with

E/M services (92012-92014, 99201-99205, 99212-99215, 99217-99223, 99231-99236, 99238-99239, 99241-99245, 99251-99255, 99291-99292, 99304-99307, 99308-99310, 99315-99316, 99324-99328, 99318, 99334-99337 and/or 99347-99350).

- Reason Code: 97 Payment adjusted because the benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated.
- Remark Code: N20 Service not payable with other service rendered on the same date.
- Palmetto/J1MAC Action: The E&M codes must be submitted with the 25 modifier if billed with one of the Chemo Administrations/Non-Chemotherapy Drug Infusion & Drug Injection Services.
- Provider Action: No action is required. A mass adjustment will be made to all incorrectly denied claims for dates of service 1/1/09 through 1/27/09.

Palmetto/J1MAC is organizing several webinars

on the following topics in the near future:

- CMS-1500 Form (February 10th)
- Basic Billing (February 17th & 18th)
- Appeals (February 19th)
- EDI (February 24th)

Visit the *Online Learning Center* at www.palmettogba.com/palmetto/Providers.nsf/docsCat/Providers-Jurisdiction%201%20Part%20B-Learning%20Education-Online%20Learning%20Catalog?open to learn more about and register for these webinars.

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

- January 2009 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files
- Quarterly Update to Correct Coding Initiative (CCI) Edits
- Notice of New Interest Rate for Medicare Overpayments and Underpayments: 1st Update for FY2009
- Part B LCD Updates
- Streamlining J1 Part B LCDs
- Modifier Lookup: Your Resource for Correct Claim Submission
- Part B Reconsideration Request and Redetermination Forms

The *Department of Health Care Services* (DHCS) has begun preparations to implement a four-week payment hold of *General Fund* payments to providers whose timely payments are not required by the State constitution, Federal mandate, or court decision. Until a budgetary solution is implemented to address the State's cash crisis, the *Comptroller* will begin holding certain program payments. Effective February 5th, the weekly provider checkwrite for California Children's Services (CCS), Genetically Handicapped Persons Program (GHPP), Child Health and Disability

Prevention (CHDP) Program, Children's Treatment Program (CTP), Expanded Access to Primary Care (EAPC), and Cancer Detection Program: Every Woman Counts (CDP: EWC) will be delayed for four weeks and released one week at a time until a solution is found to the cash crisis. The four-week checkwrite payment hold will remain in place until such time as the State's cash deficit is rectified. As directed, the State will then resume issuance of warrants on a weekly basis.

The DHCS *Medi-Cal Update* (Part 2, Billing and Policy) for January 2009 includes updated coverage and coding/billing requirements for doxorubicin (Doxil, J9001, 10mg) and filgrastim (J1440 or J1441). Effective for dates of service on or after February 1st:

- J9001 is covered for the treatment of AIDS-related Kaposi's sarcoma in patients where this disease has progressed in spite of prior systemic chemotherapy or in patients intolerant to such therapy; for the treatment of multiple myeloma; and, for the treatment of ovarian cancer that has progressed or recurred after platinum-based chemotherapy, and breast cancer.
- When billing J1440 or J1441 for more than 1,200mcg, providers must document in the comment field (Box 19) that the patient weighs more than 100kg.

Effective for dates of service on or after February 1st, providers may no longer bill DHCS/MediCal using a recipient's Social Security Number (SSN). Claims submitted with a recipient's SSN will be denied. All exemptions to this policy are discontinued except for Medicare crossover claims. Providers may continue to bill Medicare crossover claims using the recipient's SSN. Claims submitted with a valid nine-digit Client Index Number will continue to be accepted. However, all providers are expected to use the DHCS/MediCal identification number from the recipient's Benefits Identification Card (BIC) or paper ID card when verifying eligibility, billing DHCS/MediCal, or submitting Treatment Authorization Requests (TARs).

The *Deficit Reduction Act* (DRA) mandates that

all physician-administered drug claims require a *National Drug Code* (NDC). In order to comply with the DRA, DHCS/MediCal providers must bill for these drugs using the appropriate CPT-4, HCPCS Level II, or local HCPCS Level III codes and, in addition, must include the NDC on the claim form. Providers have been encouraged, for dates of service on or after September 1st, 2008, to include the NDC code on the claim, but claims without an NDC code have still been paid. An analysis of providers' voluntary NDC submissions (for dates of service on or after September 1st, 2008) indicates that physician-administered drug claims are being submitted without the NDC. Claims with dates of service on or after April 1st that do not meet the NDC reporting requirements to include a valid NDC with a HCPCS code will be denied. For more information on NDC reporting, including a DHCS/MediCal PowerPoint presentation and a summary of reporting requirements, please visit the NDC page on the DHCS/MediCal website at files.medical.ca.gov/pubsdoco/ndc/ndc.asp.

EDUCATION

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

ASH Highlights 2008

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

Additional Education Meetings

Other meetings of possible interest to ANCO member practices are:

February 11th
Progress in the Treatment of Renal Cell Cancer
CancerCare
Telephone Education Workshop

February 20th
Caring for Your Bones When You Have Breast Cancer
CancerCare
Telephone Education Workshop

February 26th
Medical Update on Ovarian Cancer
CancerCare
Telephone Education Workshop

February 28th
Spanish Survivorship Conference
Northern California Cancer Center
Santa Clara

March 3rd
Treatment Update on Gastrointestinal Stromal Tumors (GIST)
CancerCare
Telephone Education Workshop

March 5th
Coping with Cancer Pain: What You Need to Know
CancerCare
Telephone Education Workshop

March 7th
8th Annual Allison Taylor Holbrooks Breast Cancer Conference
Northern California Cancer Center
San Francisco

March 12th
Balancing Cancer and Careers: Living and Working with Cancer
CancerCare
Telephone Education Workshop

March 24th
Caring for Your Bones When You Have Prostate Cancer
CancerCare
Telephone Education Workshop

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

MEMBERSHIP RESOURCES & BENEFITS

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. These postings are digested in the ANCO *Online Weblog* at anco-online.blogspot.com (see below). 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. Among the additional news topics covered at anco-online.blogspot.com are:

- ACCC Alerts
- ANCO Meeting Announcements
- ASCO e-News and Cancer Policy Today
- ASH Practice Updates
- CMA Alerts

- CMS/Medicare Website Updates
- DHCS/MediCal Updates
- Palmetto/J1MAC Website Updates

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* meets regularly by teleconference and occasionally in person to discuss issues affecting the *Association*, clinical and professional education, and ways to better serve the membership. *Board* meetings are open to individual physician members. The **next regularly scheduled ANCO Board of Directors meeting** will take place on March 21st. Please call José Luis González, ANCO Executive Director, at (415) 472-3960 if you wish to participate in a future meeting.

Individual Member News

ANCO leadership would like to visit you and your practice (including nurse and office staff)! The purpose of the visit would be to assess your perception of ANCO's activities and services to the oncology community in Northern California and identify potential new activities and services. ANCO leadership would travel to your location for an approximately 60-90 minute meeting to discuss ANCO and would be happy to arrange to meet over lunch. Please contact the ANCO office if you wish to meet with ANCO's leadership and propose a date/time for the meeting.

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 June 2009. The following update(s) to the *Directory* were recently included in the online edition:

ALPHABETICAL DIRECTORY OF PHYSICIAN MEMBERS

Changed Hoa Nguyyen, M.D.

ALPHABETICAL DIRECTORY OF NURSE & OFFICE MANAGER CONTACTS

Added Terri Church, R.N.

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

UCSF's *Innovations in Prostate Cancer: What's New, What's Next* takes place at the *Omni Hotel* in San Francisco on February 13th-14th, 2009. Visit www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MUR09001 for more information.

Stanford's 11th Annual Multidisciplinary Management of Cancers: A Case-based Approach (formerly the *Northern California Tumor Board at Silverado*) will be presented on March 20th-22nd. Tumor boards and panels on dilemmas in patient management; ethics, supportive and palliative care; breast, gastrointestinal, genitourinary, head and neck, and thoracic cancers; and, lymphoma and hematological malignancies will be presented by faculty from *Stanford University, UC Davis, UC San Francisco*, and the community. For more information, to register, or to submit a case study, visit cancer.stanford.edu/calendar/events/2009/2009Silverado.html or contact Jennifer Schafer at (650) 724-2288 or schafer@stanford.edu.

UCSF's 3rd *International Symposium on Cancer Metastasis and the Lymphovascular System: Basis for Rational Therapy* takes place in at the *Intercontinental San Francisco Hotel* on May 6-9th. For more information, please visit www.cme.ucsf.edu/cme/CourseDetail.aspx?coursenumber=MSU09002.

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 • Millennium
Novartis Oncology
Oncology Supply/ION • OneOncology
Ortho Biotech • OSI Pharmaceuticals
Onmark,
a McKesson Specialty Care Solutions Company
Pfizer Oncology • Roche Oncology
Sanofi Aventis Oncology
Spectrum Pharmaceuticals
US Oncology Physician Services
Wyeth Pharmaceuticals • Vidacare

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

Eisai is supporting MedLearning's Managing Glioblastoma Multiforme and Metastatic Brain Tumors: A Comprehensive Review of Recent Guidelines and Current Treatments with Lynn S. Ashby, M.D., *Barrow Neurological Institute*, and Timothy C. Ryken, M.D., *University of Iowa*, on Thursday, February 12th at 6:30PM at *Harris's Restaurant* in San Francisco. Contact *MedLearning* at (877) 963-3532 for more information and to register.

Spectrum Pharmaceuticals informs ANCO that Fusilev has been assigned J-code J0641 (50mg).

Clinical Trial News

The **Stanford Dermatology Department and Comprehensive Cancer Center** are taking part in an industry-sponsored national study evaluating the efficacy and safety of an oral, small molecule antagonist of the Hedgehog pathway (Hh) in patients with locally advanced and unresectable basal cell carcinoma (BCC). Approximately 50 subjects will be enrolled at sites in the United States. They seek assistance in identifying patients who may be eligible for participation in the study. The inclusion criteria are:

- Men and women 18 years of age or older.
- For patients with locally advanced BCC, histologically confirmed disease that is considered to be inoperable or medical contraindication to surgery, in the opinion of a Mohs dermatologic surgeon, head and neck surgeon, or plastic surgeon.
- For patients with locally advanced BCC, radiotherapy must have been previously administered for their locally advanced BCC, unless radiotherapy is contraindicated or inappropriate (e.g., hypersensitivity to radiation due to a genetic syndrome such as Gorlin syndrome, limitations because of location of tumor, or cumulative prior radiotherapy dose). For patients whose locally advanced BCC has been irradiated, disease must have progressed after radiation.
- Patients with nevoid BCC syndrome (Gorlin's syndrome) may enroll in this study but must meet the criteria for locally advanced or metastatic disease listed above.

The exclusion criteria are:

- Pregnancy or lactation.
- Life expectancy of less than 12 weeks.
- Concurrent non-protocol-specified anti-tumor therapy (e.g., chemotherapy, other targeted therapy, radiation therapy, or photodynamic therapy).
- History of other malignancies within 3 years of Day 1, except for tumors with a negligible risk of metastasis or death, such as adequately treated squamous cell carcinoma of the skin, ductal carcinoma in situ of the breast, or carcinoma in situ of the cervix.
- Uncontrolled medical illnesses such as infection requiring treatment with intravenous antibiotics.

If you have any patients meeting the criteria and who may be interested in participating in the research study, then please contact Tony Oro, M.D., at (650) 723-7843 or

oro@cmgm.stanford.edu or Anne Chang, M.D., at (650) 721-2699 or alschang@stanford.edu

Publications, Services, & Surveys

ASCO has announced a *Provisional Clinical Opinion* (PCO) on *Testing for KRAS Gene Mutations in Patients with Metastatic Colorectal Carcinoma*. Based on systematic reviews of the relevant literature, all patients with metastatic colorectal carcinoma who are candidates for anti-EGFR antibody therapy should have their tumor tested for KRAS mutations in a CLIA-accredited laboratory. If KRAS mutation in codon 12 or 13 is detected, then patients with metastatic colorectal carcinoma should not receive anti-EGFR antibody therapy as part of their treatment. Visit www.asco.org/ASCO/News/Feature+Articles/ASCO+Releases+its+First+Provisional+Clinical+Opinion+%28PCO%29 for more information.

ACCC is analyzing the newly recognized Medicare drug compendia and is working on an updated **2009 Compendia-based Drug Bulletin** that reflects indications listed within the newly recognized compendia. Plans are to have a publication ready by mid-2009. ACCC suspended publication of its *Compendia-Based Drug Bulletin* last June.

The January/February (Vol. 24, No. 1) issue of ACCC's *Oncology Issues* features articles entitled *Oncology Code Update 2009* and *Patient Support Services & Patient Satisfaction*. Visit www.accc-cancer.org/oncology_issues/ for more information.

The *National Comprehensive Cancer Network's 14th Annual Conference: Clinical Practice Guidelines & Quality Cancer Care* takes place March 11-15th in Hollywood, Florida. Visit www.nccn.org/professionals/meetings/14thannual/default.asp for more information and to register.

NCCN is developing a library of chemotherapy order templates to improve the safe use of drugs and biologics in cancer care. The templates include chemotherapy, hormone therapy, immunotherapy, supportive care agents, monitoring parameters, and safety instructions. Special instructions for self-administered

chemotherapeutic agents are provided. Templates for bladder cancer, breast cancer, cervical cancer, chronic myelogenous leukemia, colon cancer, hepatobiliary cancers, kidney cancer, ovarian cancer, prostate cancer, small cell lung cancer, and testicular cancer are now available. These templates are a peer-reviewed statement of the consensus of the authors derived from the NCCN *Clinical Practice Guidelines in Oncology* regarding their views of currently accepted approaches to treatment and they do not constitute orders. Any clinician seeking to treat a patient using the templates is expected to use independent medical judgment in the context of individual clinical circumstances of a specific patient's care or treatment. Access the latest templates at www.nccn.org/ordertemplates/default.asp.

Individual Membership Dues for 2009

Second notices of membership renewal were mailed the week of February 2nd. 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 June 1st will be deleted from the *Directory of Members*, and will no longer be eligible for any ANCO benefits. Contact the ANCO office if you did not receive or misplaced your membership dues renewal notice.

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

A larger ANCO is a stronger ANCO!