

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. 2

January 23rd, 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 February 6th. 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.]

There is a nationwide shortage of injectable racemic leucovorin, available only as a generic drug and only from two manufacturers in the United States (i.e., *Bedford Laboratories* and *Teva Pharmaceuticals*). According to the FDA and the *American Society of Health-System Pharmacists* (ASHP), the companies have not provided

**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.

information on how long this shortage, caused by unspecified “manufacturing delays,” is expected to last. Levoleucovorin (J0641) is the levo isomeric form of racemic leucovorin, is the pharmacologically active isomer of leucovorin, and is available under the brand name Fusilev (*Spectrum Pharmaceuticals*). According to the FDA, limited supplies of levoleucovorin continue to be available (the ASHP does not list a shortage of this drug). Unlike leucovorin, levoleucovorin is not FDA-approved for use in colorectal cancer or other malignancies (with the exception of use for rescue after high-dose methotrexate therapy in osteosarcoma). However, it has been used off-label in the treatment of malignancies, as a substitute for leucovorin, though noninferiority in terms of efficacy has not been tested either for metastatic disease or adjuvant therapy. If clinicians and patients are considering the use of levoleucovorin, they should note the following:

- The dose for levoleucovorin is 50% of the usual dose of racemic leucovorin.
- Levoleucovorin is not FDA-approved for malignancy indications (except as noted above).
- The cost of levoleucovorin may be significantly higher than for leucovorin.

For the time being, you may wish to check with your private insurance carriers for coverage determinations. Per ASCO, Arthur Lurvey, M.D., *Palmetto/JIMAC Contractor Medical Director*, has announced that “Until the supply shortage for leucovorin has been corrected, we will allow the use of Fusilev (levoleucovorin) in all places where leucovorin was and is covered.” According to the ASHP, leucovorin tablets are still available. Oral leucovorin is not FDA-approved for use in treatment of malignancies (except for methotrexate rescue in osteosarcoma), although its use has been evaluated in that setting. The use of oral leucovorin may be limited by the large number of tablets needed and by the fact that oral absorption of leucovorin is saturable and highly variable. More detailed information on these shortages can be found at www.fda.gov/cder/drug/shortages/default.htm#Current and at www.ashp.org/DrugShortages/Current/. The *ICD-10-Clinical Modification/Procedure*

Coding System Fact Sheet, which provides general information about the *International Classification of Diseases, 10th Edition, Clinical Modification/Procedure Coding System (ICD-10-CM/PCS)* including benefits of adopting the new coding system, structural differences between ICD-9 CM and ICD-10-CM/PCS, and implementation planning recommendations, is now available in downloadable format from the CMS Medicare Learning Network at www.cms.hhs.gov/MLNProducts/downloads/ICD-10factsheet2008.pdf. CMS has updated the ICD-10 download files by posting the 2009 version of the following documents at www.cms.hhs.gov/ICD10/02_ICD-10-PCS.asp:

- ICD-10 General Equivalence Mappings (these refer to procedure codes)
- Reimbursement mappings and guides for the use of the Mappings
- 2009 version of ICD-10-Procedure Coding System (PCS)
- ICD-10 version of the digestive Medicare Severity Diagnosis Related Groups (MS-DRG)

The 2009 ICD-10-CM (Diagnosis codes) General Equivalence Mappings have been posted at www.cms.hhs.gov/ICD10/03_ICD_10_CM.asp. The 2009 version of ICD-10-Clinical Modifications (CM) Diagnoses are posted at www.cdc.gov/nchs/icd9.htm and www.cms.hhs.gov/ICD10/03_ICD_10_CM.asp.

CMS's Physician Quality Reporting Initiative (PQRI) provides a financial incentive for eligible professionals to participate in a voluntary quality-reporting program. Eligible professionals who successfully report a designated set of quality measures on claims may earn a lump sum bonus payment. There are several reporting options and incentive payments for physicians participating in the PQRI (see www.cms.hhs.gov/MLNMattersArticles/downloads/MM6104.pdf). For complete information on PQRI, including teleconference materials, qualified registries for data submission, quick reference charts, user guides, tool kits for successful reporting, updated submission methodologies, beneficiary letters, fact sheets, and FAQs, visit www.cms.hhs.gov/pqri. A new “Spotlight” section on the PQRI webpage is updated

frequently and was created to alert eligible professionals to the newest program information available on the PQRI webpage. **The American Medical Association (AMA) has posted 2009 PQRI data collection worksheets** at www.ama-assn.org/ama/pub/category/20358.html. In addition, **ASCO's PQRI website (www.asco.org/pqri) includes relevant links and a table of oncology-related measures.**

Detailed specifications for the 2009 PQRI measures and the 2009 PQRI measures groups been posted to the PQRI webpage on the CMS website (www.cms.hhs.gov/PQRI/15_MeasuresCodes.asp#TopOfPage (select Downloads and click on the appropriate link), as follows:

- *2009 PQRI Quality Measure Specifications Manual and Release Notes.* Contains the detailed specifications (including codes and reporting instructions) for the 153 2009 PQRI quality measures for claims or registry-based reporting and a summary of the changes from the 2008 PQRI Measure Specifications (in the form of release notes delineated by measure number).
- *2009 PQRI Implementation Guide.* Provides guidance about how to implement 2009 PQRI claims-based reporting of measures to facilitate satisfactory reporting of quality data codes by eligible professionals for the 2009 PQRI.
- *2009 PQRI Measures Group Specifications Manual and Release Notes.* Contains the detailed specifications and instructions for the seven (7) 2009 PQRI measures groups and a summary of the changes from the 2008 PQRI Measures Groups Specifications (in the form of release notes).
- *Getting Started with 2009 PQRI Reporting of Measures Groups.* Provides guidance about implementing the 2009 PQRI measures groups.

Please note that the 2009 PQRI quality measure specifications for any given quality measure may be different from specifications for the same quality measure used in 2008. Therefore,

specifications for all 2009 PQRI quality measures, whether or not included in the 2008 PQRI program, must be obtained from the *2009 PQRI Quality Measure Specifications Manual*. In addition, measures group specifications are different from the specifications for individually reported measures that form the group. Therefore, the specifications and reporting instructions for the 2009 PQRI measures groups must be obtained from the *2009 PQRI Measures Group Specifications Manual*. Reporting for the 2009 PQRI began January 1st. Please note there is no need to sign up or pre-register in order to participate.

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~Medicares%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). 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:

- 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.]

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

Palmetto/J1MAC, DHCS/MediCal, & Private Payors

[Editor's Note: ANCO communicates regularly with Palmetto/J1MAC that administers the J1MAC (Medicare) in California, and the Department of Health Care Services (DHCS) that administers DHCS/MediCal in California.]

Palmetto/J1MAC is organizing several webinars on the following topics in the near future:

- Medicare Secondary Payer (MSP; February 5th)
- 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%20A~Learning%20Education~Online%20Learning%20Catalog?open to learn more about and register for these webinars.

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). DHCS/MediCal recognizes the importance of protecting the identity and health information of recipients and strongly encourages all providers to avoid using a recipient's SSN whenever possible.

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. Providers are reminded that, 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 FAQs, please visit the NDC page on the DHCS/MediCal website at files.medi-cal.ca.gov/pubsdoco/ndc/ndc.asp. Training workshops have been scheduled in January and February to address NDC reporting. The dates, times, and locations of these workshops, and how to pre-register, can be found on the DHCS/MediCal website at files.medi-cal.ca.gov/pubsdoco/ndc/articles/ndc_9992.asp.

EDUCATION

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

San Antonio Breast Cancer Symposium Highlights 2008

ANCO's *San Antonio Breast Cancer Symposium Highlights 2008* took place on Wednesday evening, January 14th, at the *Hotel Nikko* in San Francisco. Faculty from *Stanford* (Ellie Guardino, M.D., Ph.D.), *UC Davis* (Allen Chen, M.D.), and *UC San Francisco* (Michael Alvarado, M.D.) reviewed the clinically most important research results presented at December 2008's *Symposium*. The meeting was moderated by Helen K. Chew, M.D., *UC Davis*, and accredited by *Indiana University*. The presentations are now available online at www.anco-online.org/sabcs.html.

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. Coutre, M.D., and Jason R. Gotlib, M.D.) will review the clinically most important research results presented at December's *ASH Annual Meeting*. This meeting will be moderated by Steven E. Coutre, M.D., *Stanford*, and accredited by *Indiana University*. A meeting announcement/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:

January 28th
Caring for Your Bones When You Have Multiple Myeloma
CancerCare
Telephone Education Workshop

January 29th
Update on Metastatic Breast Cancer from the 2008 San Antonio Breast Cancer Symposium

CancerCare
Telephone Education Workshop

January 31st
Emerging Therapies for Blood Cancer Patients
Leukemia & Lymphoma Society
San Francisco

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

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
- 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* met on January 14th to discuss and/or act upon the following issues:

- 2009 ANCO *Board of Directors*
- Election of *Officers* (Richard A. Bohannon, M.D., *President*; L. Wayne Keiser, M.D., *Vice President*; Bradley

Ekstrand, M.D., *Secretary*; Daniel P. Mirda, M.D., *Treasurer*)

- FY2008 results & FY2009 budget
- Advocacy issue endorsements
- 2009 meeting/teleconference schedule

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* 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

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 Thomas P. Bradley, M.D., Ph.D.,
David T. Harrison, M.D., Kendra
Hutchinson, M.D., Fred S. Marcus, M.D.,
Alice Reier, M.D., Lucy Song, M.D.

Added Yelena Gambarin, M.D., I-Yeh Gong,
M.D., Paul Kaesberg, M.D., Jonathan D.
Lopez, M.D., Manmeet Mangat, M.D., Hoa
Nguyyen, M.D., Lucio Nobile, M.D., Pam
Oster, M.D., Randeep Sangha, M.D.,
Gurvinder Shaheed, M.D., Derek Shek,
M.D., Quy Tran, M.D.

Deleted Sarah Conlon, M.D., Ian Deroock, M.D., Jeff McLeroy, M.D., David Ramirez, M.D., Nitin Rohatgi, M.D., Antoine Sayegh, M.D.

ALPHABETICAL DIRECTORY OF NURSE & OFFICE MANAGER CONTACTS

Changed Monica Fernandez, Edith Keech, Elke Mowers, R.N.

Added Annie Bradley, Vickie Cox, R.N., Pam Dally, R.N., Diana Goodenough, R.N., O.C.N., Sara Pacheco, Monica Vining

Deleted Laura Azevedo, R.N., Carolyn Hutt

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 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.

Corporate Member News

ANCO thanks the following **Corporate Members** for their generous support that enables ANCO to provide services to the hematology/oncology community in Northern California, and to provide its members and their patients with substantial benefits in the areas of advocacy, education, and information dissemination:

Abraxis Oncology • Alaven
Alexion Pharmaceutical • AMGEN
AstraZeneca
Bayer Healthcare Pharmaceuticals
Onyx Pharmaceuticals
biogenIDEC
Bristol-Myers Squibb Oncology
Celgene • Cephalon Oncology • Eisai
Enzon Pharmaceuticals

Genentech BioOncology
Genomic Health • Genzyme Oncology
GlaxoSmithKline Oncology • Hospira
ImClone Systems
Lash Group Healthcare Consultants
Lilly Oncology • Millennium
Novartis Oncology
Oncology Supply/ION • OneOncology
Ortho Biotech • OSI Pharmaceuticals
Onmark, a McKesson Specialty Care Solutions
Company
Pfizer Oncology • Roche Oncology
Sanofi Aventis Oncology
Spectrum Pharmaceuticals
US Oncology Physician Services
Wyeth BioPharma • Vidacare

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

Bristol-Myers Squibb Oncology informs ANCO that Ixempria has been assigned HCPCS code J9207.

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.

Novartis Oncology has launched a practice manager's website at www.novartisoncology.us/healthcare-professionals/OPM.jsp. It is designed to support practice managers as they meet the challenges of reimbursement, access to care, and patient education.

Onmark is continuing its quarterly CORE webcast series on February 3rd and 4th. Learn more about 2009 oncology reimbursement changes, PQRI, and e-prescribing by registering at www.onmarkservices.com/onmarksite/resources/pdf/CORE%20Q1%20Reimbursement_FINAL.pdfEnroll.

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.

The January (Vol. 5, Issue 1) issue of ASCO's *Journal of Oncology Practice* features articles entitled *ASCO Policy Statement Highlights*, *Oncologist's Role in Providing Cancer Prevention Services*, *Generational Differences Among Oncologists: Shaping the Future of Practice*, *Recent Developments in Medicare Coverage of Off-Label Cancer Therapies*, *Current Issues Regarding ASCO Guideline Implementation*, and *Personal Finance Management for New Oncologists*. Visit www.jopasco.org 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 *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.

The February issue of *The Journal of the National Comprehensive Cancer Network* (Volume 7, Number 2) features the updated NCCN *Clinical Practice Guidelines in Oncology: Breast Cancer*. Important updates for the 2009 edition include updates to chemotherapy tables, and the addition of dosing schedules, as well as new recommendations for MRI testing and revised recommendations for preoperative chemotherapy incorporating trastuzumab. Visit www.nccn.org/JNCCN/default.asp for more information.

The January issue of *Oncology Business Review* features articles entitled *Community Oncology at the Crossroads*, *The New Administration's Health Policy and What it Means to You*, and *Oncology Stakeholders Provide Perspective on the Coming Year*. Visit www.oncbiz.com for more information.

Individual Membership Dues for 2009

Membership renewal notices for 2009 were mailed to all members in late November 2008. 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.