



## FLORIDA SOCIETY OF CLINICAL ONCOLOGY FAX BLAST – July 16, 2008

### **MESSAGE FROM FLASCO PRESIDENT: Robert Cassell, MD**

Unfortunately, it is that hurricane time of year for our State! Our FLASCO Executive Committee will be reviewing a Disaster Plan for practices at the upcoming Executive Committee Retreat. Additional information on that plan will be available following the meeting.

However, in the mean time, NCI and ASCO continue to pilot test a wallet card developed to help reconnect displaced patients and doctors in the Gulf Coast States. The card lists the patient's name, diagnosis, current treatment and doctor's contact information. NCI and ASCO encourage oncologists to discuss with their patients what to do in the event of a natural disaster. Oncology practices in the Gulf States can order copies of the card by calling the NCI's Cancer Information Service (CIS) at: 1.800.422.6237.

### **LEGISLATIVE COMMITTEE: Erin Dunbar, MD, Chairman**

#### **Congress overrides veto; Medicare payment bill becomes law**

The Senate has voted 70 to 26 to override the president's veto of the Medicare Improvement Act for Patients and Providers (H.R. 6331). This action follows a successful override vote earlier by the House of Representatives. This vote to override President Bush's Veto reverses the 10.6 percent payment cut that went into effect on July 1 and halts the 5.4 percent cut scheduled for Jan 1, 2009.

In addition, Congress addressed a severe operational deficiency in the Medicare Advantage (MA) program. Currently, Medicare Advantage private fee-for-service (PFFS) plans are not required to establish traditional provider networks. This has created tremendous beneficiary confusion and provider distrust. H.R. 6331 makes significant improvements to the program by eliminating the ability of PFFS plans to "deem" physicians where there are two or more MA plans in an area beginning in 2011.

A special thanks to all of you who took the time to contact your US Representative and our two Florida US Senators. We will provide you with additional information as it becomes available.

### **CLINICAL PRACTICE COMMITTEE: Tom Gaddis, MD, Chairman**

#### **GAO Report on Imaging Services Released**

The Government Accountability Office (GAO) has issued a report entitled, Medicare Part B Imaging Services — Rapid Spending Growth and Shift to Physician Offices Indicate Need for CMS to Consider Additional Management Practices.

The GAO states, based on an analysis of claims from 2000 through 2006, that spending on Medicare Part B imaging services has more than doubled — increasing to \$14 billion. The proportion of imaging spending in physicians' offices has increased from 58% to 64% over the 6-year period. The GAO notes that physicians derive an increasing share of Medicare revenue from imaging services. The GAO concludes, based on spending patterns per patient across geography, that not all imaging utilization was necessary or appropriate.

The GAO recommends that the Centers for Medicare & Medicaid Services (CMS) adopt front-end management techniques, as employed by private payers. These techniques include prior authorization, as contrasted with the retrospective checks currently utilized by CMS. A copy of the GAO report can be found at:

<http://www.communityoncology.org/Portals/coa/Documents/GAO6-08ImagingStudy.pdf>

**FCSO UPDATES:**

**New 2008 Medicare Physician Fee Schedule Payment Rates Effective for Dates of Service July 1, 2008 through December 31, 2008**

The Medicare Improvements for Patients and Providers Act of 2008 was enacted on July 15, 2008. As a result, the mid-year 2008 Medicare Physician Fee Schedule (MPFS) rate of -10.6 percent has been replaced with a 0.5 percent update, retroactive to July 1, 2008.

Physicians, non-physician practitioners and other providers of services paid under the MPFS should begin to receive payment at the 0.5 % update rates in approximately 10 business days, or less. Medicare contractors are currently working to update their payment system with the new rates.

In the meantime, to avoid a disruption to the payment of claims for physicians, non-physician practitioners and other providers of services paid under the MPFS, Medicare contractors will continue to process the claims that have been on hold on a rolling basis (first in/first out) for payment at the -10.6% update level. After your local contractor begins to pay claims at the new 0.5% rate, to the extent possible, the contractor will begin to automatically reprocess any claims paid at the lower rates.

Under the Medicare statute, Medicare pays the lower of submitted charges or the Medicare fee schedule amount. Claims with dates of service July 1 and later billed with a submitted charge at least at the level of the January 1 – June 30, 2008, fee schedule amount will be automatically reprocessed. Any lesser amount will require providers to contact their local contractor for direction on obtaining adjustments. Non-participating physicians who submitted unassigned claims at the reduced nonparticipation amount also will need to request an adjustment.

Contractor websites are being updated with the new rates and these should be available shortly. Be aware that any published MLN Matters articles affected by the new law will be revised or recinded as appropriate. Finally, be on the alert for more information about other legislative provisions which may affect you.

**Further instructions regarding other provisions of MIPPA will be forthcoming.**

**FDA UPDATES:**

**New Type of Genetic Test Approved for Breast Cancer Patients**

FDA has approved a novel genetic test for determining whether patients with breast cancer are good candidates for treatment with the drug Herceptin (trastuzumab). The SPOT-Light HER2 CISH test kit measures the number of copies of the HER2 gene in tumor tissue. This gene regulates the growth of cancer cells.

<http://www.fda.gov/bbs/topics/NEWS/2008/NEW01857.html>

**CORPORATE MEMBERSHIP/SPONSORSHIP: (January 1 – December 31, 2008)**

FLASCO Members extends a big thanks to all of our 2008 Corporate Members/Sponsors

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**FLASCO EVENTS:**

**August 8-9, 2008** – FLASCO Executive Committee Retreat – Marriott World Center Hotel - Orlando

**November 7-8, 2008** – FLASCO Fall Meeting – Tampa Airport Marriott Hotel

**January 17-18, 2009** – Clinical Breakthroughs & Challenges in Hematologic Malignancies – Grand Floridian Resort – Lake Buena Vista

**February 6 & 7, 2009** – Highlights of ASH - Miami

**February 27 & 28, 2009** – FLASCO Spring Meeting – Marriott Sawgrass – Jacksonville

**March 20, 2009** – Statewide PA & NP Conference, Moffitt Cancer Center - Tampa

**FLASCO Contact Information:** Dorothy Green Phillips, Executive Director -3709W. Jetton Ave., Tampa, Florida 33629 - Tel: 800.444.1410, Ext. 4410 - Cell Phone: 813.294.2620 - Fax: 813.349-4410 or 813.349.4472  
Email: [Dorothy.Green@cancer.org](mailto:Dorothy.Green@cancer.org)

**OTHER EVENTS:**

September 12-13, 2008 - The Palmer House Hilton – Chicago - 2008 ASH State-of-the-Art Symposium (SAS)

September 17-20, 2008 – ACCC 25<sup>th</sup> National Oncology Economic Conference – San Francisco, California

September 19-20, 2008 - Annual ASCO/ASH/SGO Meeting of the Hematology/Oncology CAC Network

September 25-28, 2008 - Oncology Congress - the Hilton San Francisco

October 19-22, 2008 – MGMA 2008 Annual Conference – San Diego

December 6-9, 2008 – ASH Annual meeting – San Francisco

February 26-28, 2009 – ASCO - GU Symposium, Orlando World Center Marriott

March 22-24, 2009 - 2009 AOHA Assembly Conference – Los Angeles, California