

ACCC's Annual Presidents' Retreat

At ACCC's 15th Annual Presidents' Retreat, oncology state society leaders gathered in Arlington, Va., Jan. 26-27, 2007. A common theme echoed by this year's presenters was: Changes are underway. In addition to updates from ACCC Executive Director Christian G. Downs, JD, MHA, and Joseph S. Bailes, MD, co-chair of ASCO's Public Policy Committee, experts presented on a wide range of topics, including IT, electronic health records, pay for performance and quality care, and practice models.

Information Technology. Janet Marchibroda, CEO of eHealth Initiative and Foundation, provided an overview of the potential for information technology to improve the delivery of quality cancer care. "IT [has the potential to] improve quality in cancer care, to provide tremendous value to the field [of oncology], to patients, to practices, and to move forward the research agenda," Marchibroda said. Much work remains to fully realize IT's potential in the healthcare arena, she cautioned. Although the "mobilization of information" is underway, Marchibroda predicted a rocky road for the next few years as the industry works through multiple barriers to wider IT adoption. She noted that just 17 to 25 percent of physician offices keep electronic health records (EHRs), while 16 to 59 percent of hospitals have EHRs. From 4 to 21 percent of hospitals have computerized physician order entry systems.

Practice Models. A panel discussion of community-based providers highlighted the range of oncology practice models providing quality cancer care today. Panelists ranged from a small three-physician practice that serves as its community's only oncology provider to large multi-

site practices offering medical oncology care, in-house imaging services, and robust research programs that help patients access appropriate clinical trials without having to travel to large academic medical centers. Among the challenges common to all providers was implementation of electronic health records (EHRs). While the small practice had not yet moved to an EHR system, the larger practices represented on the panel had all begun EHR implementation, often facing the challenges of integrating EHR with practice management software systems. Panelists also discussed the challenges faced in

delivery of outreach services and recruiting physicians to smaller community settings.

Payer Perspective. Attendees heard from Lee N. Newcomer, MD, vice president for oncology services at UnitedHealthcare, on the delivery of quality cancer care from the private payer perspective. Newcomer's presentation, entitled "Striving for Balance: the Future of Oncology Reimbursement," described two key changes underway in the private payer arena: decisions about cost effectiveness and standardization of care. With the nation's aging population, rising healthcare costs for consumers, and escalating costs

ACCC Executive Director Christian G. Downs, JD, MHA, (on left) and Joseph S. Bailes, MD, co-chair of ASCO's Public Policy Committee, greeted attendees at the 15th Annual Oncology Presidents' Retreat.



A panel of community-based oncologists looked at practice models. From left are Thomas Marsland, MD; Richard Krumdieck, MD; W. Charles Penley, MD; and Edward L. Braud, MD.

of cancer care, oncology is heading for a “perfect storm,” Newcomer said. Communication between payers and providers is important as these changes move forward, he said.

Medicaid Trends. Marc Samuels, JD, MPH, of Hillco Partners, presented an overview on current trends in Medicaid, noting that under the DRA (Deficit Reduction Act of 2005) states have more flexibility to make changes to cost sharing. Looking to the future, Samuels noted that the federal government continues to propose ways to shift costs to the states.

MACs. Marci Cali, BA, RHIT, executive director of the Oncology State Society Network (OSSN), provided an update on Medicare contracting reform and the transition to Medicare Administrative Contractors (MACs). With the move to MACs well underway, CMS has accelerated its transition timetable by two years, aiming to complete the move to MACs by 2009. One change to the program that will benefit Medicare beneficiaries: the creation of a Medicare Beneficiary Ombudsman to assist with complaints, grievances, and requests for assistance.

Patient Support Services. Attendees also heard from Nancy Davenport-Ennis, CEO of the Patient Advocate Foundation, on the organization’s scope of services and PAF’s Co-Pay Relief program. In 2006, PAF responded to more than 6.4 million requests for information and intervened with mediation and arbitration in more than 39,780 cases, according to Davenport-Ennis.

Wrapping up the program, Tracy Foster of the Lash Group presented an overview on patient assistance programs, noting that while these programs traditionally served the uninsured, the need for help among the under-insured population is growing. Matching the patients’ needs to the right patient assistance program is key, and the type of assistance needed is driven by the patients’ insurance status. Foster noted that an increasing number of programs are providing wrap-around coverage for Part D. 📧

ACCC’s New Listserv: A Great Way to Exchange Information!

ACCC has launched its listserv: ACCCExchange. More than 200 members have already signed up. Now it’s your turn.

Our listserv will allow ACCC members to send information to all listserv members at one time and receive information from other section members in their e-mail. As a members-only electronic mailing, ACCCExchange is an added benefit of membership, allowing you to network with colleagues on a daily basis. It provides an ongoing forum for discussion on important topics such as reimbursement issues, managing your cancer center or oncology practice, new

technology purchase and implementation, and other professional concerns.

Email messages are sent to all members subscribed to the listserv. Signing up is easy. Just go to www.accc-cancer.org. Enter the Members Only section and look for the Listserv button on the right. It takes a just minute. 📧



ACCC Member Elected to APC Panel

The Association of Community Cancer Centers (ACCC) congratulates Patricia Spencer-Cisek, MS, APRN-BC, AOCN, on her



Patricia Spencer-Cisek is the clinical director of oncology services at Glens Falls Hospital in Glens Falls, N.Y.

recent appointment to serve a four-year term on the Ambulatory Payment Classification (APC) Panel beginning with its March 7-9, 2007, meeting. Ms. Spencer-Cisek has served on the ACCC Board of Trustees, and is currently chair of ACCC’s Nominating Committee and co-chair of the Patient Advocacy Committee. She is also an active member of the Oncology Nursing Society at both local and national levels.

ACCC looks forward to working with Ms. Spencer-Cisek and other APC Panel members at their upcoming meetings. 📧

ACCC’s Instant Website Poll

Is your cancer program seeing increased attempts or pressure by insurers to accept “brown-bagged” drugs?

