

ACCC's Listserv Focuses on "Hot Topics" at Community Cancer Centers

he ACCCExchange listserv is a member benefit that 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 more. Don't lose out on this networking opportunity—more than 500 of your colleagues are already exchanging critical information, and here are some examples of what they are talking about.

Blue Cross/Blue Shield Centers of Excellence. I am especially interested in any involvement that you have had with Blue Cross/Blue Shield (BCBS) survey and determination of Centers of Excellence (COE) for Rare and Complex Cancers. In North Carolina we submitted numbers back in the fall for about eight rare cancers along with evidence of resource support for these tumors. BCBS has subsequently determined a "defined" number of each to be designated a COE. I am concerned

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that the sole criteria are numbers and not outcomes. In addition, I am suspicious that the designation COE will not always indicate the extension: "for Rare and Complex Cancers." This, once again, will support the large academic centers at the expense of community centers, which in many cases care for more cancer patients, especially breast, colon, lung and prostate, than the academic centers. The patients, however, will be confused and tend to migrate to these centers.

-Richard B. Reiling, MD, FACS, Medical Director, Presbyterian Cancer Center, Charlotte, N.C.

National Marrow Donor Program New Rules. We in Idaho are concerned about the new rules from the National Marrow Donor Program

(NMDP). The NMDP has determined that the recruitment of minorities is so important that it will set requirements for minority recruitment of new donors as qualification for continuing funding by this federal program. The requirements are 250 minorities in 2008, 500 in 2009 and 1,000 in 2010—regardless of the size of your

program, location, or catchment area. As a current member, Mountain States Tumor Institute in Boise serves Idaho and parts of Utah and Oregon. We barely have 1,000 minorities living in this area. I feel sure other areas are in a similar situation. If this is a problem to your program, please respond via the listserv or write Matthew Farber directly at *mfarber@accc-cancer.org*.

— Luana Lamkin, Administrator, Mountain States Tumor Institute, Boise, Idaho

Welcome to ACCC's 2008-2009 Board of Trustees

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ACCC's Board of Trustees Passes Bylaw Changes

A t the recommendation of ACCC's Bylaws Committee, the following changes have been made to ACCC's bylaws effective April 4, 2008:

- Revision of Definitions of Classes of Active Membership
- Revision and Clarification of Regulations Governing Eligibility of Officers and Trustees
- Revision of Regulations Governing the Removal of an Officer or Trustee from Office
- Revision of Regulations for

Convening a Special Meeting and Omitted the Need for Appointed Liaisons to Render an Annual Report.

- Revision to the Definition of a Quorum of the Board of Trustees
- Revision to the Designation of Committees in Relation to the Policies and Procedures

For more information about these changes, go to ACCC's website at: www.accc-cancer.org.

Clinical Quality Dashboard. I'm comfortable sharing the clinical quality dashboard that we use at our cancer committee meetings. It's a mix of ACOS and institutional items to remain watchful over. Each year, a few items come off the list and a few new items are added. It's not too fancy but should help you get started. Our liaison in the Clinical Quality department owns the dashboard and updates it monthly.

—Nikolas Buescher, MHS, Director of Oncology, Fairview Southdale Hospital

Not yet registered with ACCC's Listserv? Log onto http://mailman. listserve.com/listmanager/listinfo/acccexchange, type in your email address and name, and pick a password. Once you are accepted into the listserv, you'll be able to exchange information by sending an email to www.acccexchange@accc-cancer.org. Email messages are sent to all members subscribed to the listserv when you click REPLY TO ALL. To reply just to the individual, click on REPLY.

Many people prefer to receive

Coming Soon!

Survivorship Section on ACCC Website

ACCC will soon unveil a new cancer survivorship section on its website (www.accc-cancer.org). Part of ACCC's 2007-2008 President's Grant and sponsored by AstraZeneca and Abraxis Oncology, the Survivorship Section will feature key components designed to serve as a resources for community cancer programs in developing or improving services for cancer survivors, including:

- ACCC's Cancer Program Guidelines 2008, updated to include a new section on cancer survivorship programs.
- Streaming media of a presentation by Julia Rowland, PhD, director of the National Cancer

Institute's Office of Cancer Survivorship. Dr. Rowland's address keynoted a special session on cancer survivorship at ACCC's 34th Annual National Meeting in April 2008.

- "Comprehensive Survivorship Services: A Practical Guide for Community Cancer Centers," a special 24-page supplement that is included in this Oncology Issues.
- Other practical tools for community cancer centers, such as the "Impact of Cancer Scale Tool" developed by Brad Zebrack, PhD, of the University of Southern California School of Social Work. ■

just one or two batched emails each day, instead of a steady stream of emails that a large listsery may generate. If you prefer to receive a daily digest, click YES on the daily digest question below when you sign up.

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ACCC's 34th Annual National Meeting— A Pictorial

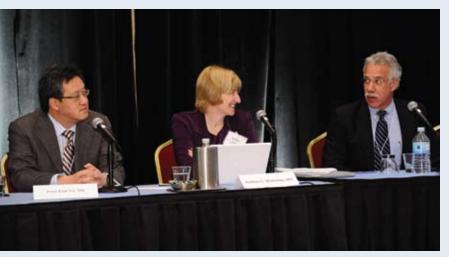
April 2-5, 2008 Baltimore, Md.



Keynote speaker Stephen B. Edge, MD, FACS, chair-elect of the American College of Surgeons Commission on Cancer, spoke on quality in cancer care, highlighting opportunities for improvement, systems to collect data, and trends toward specialization and regionalization of cancer care. He noted that multiple forces are driving the regionalization of care including patients, physicians, market forces, and payer programs targeted toward steerage of certain high-risk cancers cases to specialty centers. Dr. Edge ended his talk on an optimistic note. "There is a quality crisis. The solutions have to begin with access to care. If we ignore that elephant in the room, we are never going to fix this problem.... My glass is half full. I think we're moving forward. I think we can solve these problems."



(On left) John Philip Kuebler, MD, PhD, principal investigator of the Columbus Oncology Program and medical director for Oncology Research at Riverside Methodist Hospital in Columbus, Ohio, was presented with ACCC's David King Community Clinical Scientist Award by ACCC President Richard Reiling, MD, FACS. In his acceptance remarks, Dr. Kuebler paid tribute to all the patients he has enrolled in clinical trials over the years. "Those patients had the courage to go on clinical trials to help us solve problems in oncology and improve patient care."



Lawrence N. Shulman, MD, Dana-Farber Cancer Institute (right); Barbara L. McAneny, MD, New Mexico Hematology Oncology Consultants, Ltd. (center); and Peter Paul Yu, MD, Palo Alto Foundation (left)—all long-term veteran users of EHRs—talked about electronic health records implementation in their respective healthcare setting. Dr. McAneny summed up the experience: "This journey does not end."



Amy Bassano, acting director, Hospital and Ambulatory Policy Group, at the Centers for Medicare & Medicaid Services (CMS), presented an overview of the 2008 HOPPS and PFS final rules. She emphasized the agency's continued interest in "promoting efficiency by promoting packaging and bundling." Bassano reiterated the agency's commitment to working with stakeholders, noting that "quality initiatives are going on throughout the agency." The agency is interested in additional channels for reporting data including registry-based reporting, EHR-based reporting, and reporting on groups of measures for consecutive patients. The focus continues to be on "transforming Medicare from passive payer to active purchaser of higher quality, more efficient health care."



Moderated by Cliff Goodman, PhD, of the Lewin Group (far right), a panel of thought leaders from the field of cancer vaccine immunotherapy research presented an overview of current progress in therapeutic cancer vaccines. Panelists (from left to right) Kenneth A. Foon, MD; Soldano Ferrone, MD, PhD; and Natalie Sacks, MD, presented overviews of the mechanisms of action of leading therapeutic vaccines for a variety of cancer sites. While the panelists disagreed on just how soon an FDA-approved therapeutic vaccine might become available for use in the community setting, they all agreed that vaccine immunotherapy will one day play a role in anticancer treatment. Before that can happen, however, significant pragmatic barriers must be overcome.



Pioneering cancer researcher Judah Folkman, MD, who passed away in January 2008, was honored with ACCC's Annual Achievement Award. Accepting the award on behalf of Dr. Folkman was colleague, Steven J. Fishman, MD, (shown in center). Dr. Fishman is co-director of the multidisciplinary Vascular Anomalies Center at Children's Hospital Boston, and Stuart and Jane Weitzman Family Chair in Surgery. ACCC President Richard B. Reiling, MD, FACS (left) and ACCC Executive Director Christian G. Downs, JD, MHA, presented the award.