

## The Association of Community Cancer Centers

**FACT** More than 650 medical centers, hospitals, cancer clinics, and practices across the U.S. are ACCC members. This group treats 40 percent of all new cancer patients seen in the U.S. each year. ACCC members also include more than 390 individual members and 18 state oncology society chapters.

**FACT** Only ACCC represents the entire interdisciplinary team caring for oncology patients, including medical, radiation, and surgical oncologists, oncology nurses, cancer program administrators, oncology social workers, pharmacists, radiation therapists, and cancer registrars.

**FACT** ACCC is committed to federal and state efforts to pass legislation that ensures access to off-label uses of FDA-approved drugs and clinical trials for cancer patients, appropriate reimbursement to physicians for drugs administered to Medicare patients, and other patient advocacy issues.

**FACT** ACCC provides information about approaches for the effective management, delivery, and financing of comprehensive cancer care through its national meetings, regional symposia, and publication of oncology patient management guidelines, standards for cancer programs, critical pathways, oncology-related drugs, and *Oncology Issues*.

**FACT** Membership in ACCC will help my organization/me better serve patients and will foster my professional development.

Please send membership information:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Phone: \_\_\_\_\_

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Return to ACCC, 11600 Nebel St., Suite 201, Rockville MD 20852-2557/Fax: 301-770-1949.

## FROM THE EDITOR



# Oral Agents and the Men in Black

by Lee E. Mortenson, D.P.A.

**W**e've found the cure for cancer, but nobody can figure out how to reimburse the providers who will use it! Sounds ridiculous, doesn't it? Maybe it's an outtake from a science fiction thriller.

Yet, we're facing boogeymen who are far scarier than those on the X-Files. We're talking about Men in Black from the Health Care Financing Administration (HCFA), the Department of Justice, and our own U.S. Congress! Of course, it doesn't help that some of the folks on our side act strikingly like the Lone Gunman.

The magicians from HCFA—a name so loathsome that the Secretary of the Department of Health and Human Services has replaced it (I voted for the Health Care Quality Suppression Administration, HCQSA)—gave our team a puzzle that is still stumping the gang in management information systems at hospitals throughout the country. It's called ambulatory payment classifications (APCs), and a lot of cancer programs around the country still can't figure out how to submit a clean claim. Some aren't even trying yet, and that's not good. The APC system is so complicated that some new, complex cancer cures won't be well received because the billing will baffle everyone. Just come up with a new cancer therapy that requires a multiple service...you know, a little chemotherapy and radiation therapy overlapping...and boom, trouble.

Of course, eventually our team is going either to figure this APC system out or close its doors. So, Congress passed the Privacy Act—that should slow us down considerably. Go ahead, let some of those

hospital administrators dream about profitability and cutting overhead. We'll show them! And, don't forget HCFA's plan to lower reimbursement below average wholesale price (AWP) minus 5 percent on Jan. 1, 2002, because it doesn't have enough money in the transitional pass-through pool!

Then, of course, there are the real Men in Black, the guys from the Justice Department who have decided their next target is...(drumroll) average wholesale price. Boy, that's going to be a tough one! You can see them slamming pharmaceutical executives up against the wall and frisking them to find out what they did with the extra 10 to 20 percent. Of course, they already know the drug companies don't get the money, but the story will make great press. So what if the Justice Department accidentally shuts down chemotherapy in offices... it's busy solving crimes here!

Elsewhere in Washington, some members of Congress want to take credit for being the first to act. One of the subcommittees is investigating whether it can quickly pass legislation to use the "surplus" from AWP as a method of paying for a prescription drug benefit, preferably before the General Accounting Office or anyone else comes out with contrary evidence.

Still, the news isn't totally bad. Sure, the new wonder cure (Gleevec, from Novartis) isn't available to Medicare patients, because Medicare doesn't cover that kind of oral chemo drug...but a few members of Congress are sponsoring legislation to change that. I assume, given the trends, that once Congress passes the bill, someone in Washington will find some other way to make oral chemo drugs unavailable. ☐