California Oncology Weekly

"Where California Oncologists Go For Answers!"

A collaborative publication of the Medical Oncology Association of Southern California, Inc. and the

Association of Northern California Oncologists, Inc.

November 11, 2014



California News

- Thank you for your active efforts in defeating Proposition 45, the measure which gave far toomuch control over our health care to one politician; and defeating Proposition 46, the costly anti-MICRA (*Medical Injury Compensation Reform Act*) ballot measure.
- -Governor Edmund G. Brown Jr. won re-election to an unprecedented fourth term in office last week and promised to "reach across the aisle" in his final four years as Governor.
- -Following the approval of Proposition 2, which creates a state rainy day fund, Standard and Poor's raised California's credit

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rating from an "A" to an "A+." In a prepared statement, outgoing Treasurer Bill Lockyer said that the upgrade "rewards the state for the immense strides it has taken toward fiscal discipline and budget stability." However, California's credit rating still ranks 48th among all states, only beating News Jersey and Illinois, according to a Standard and Poor's spokesperson. "Standard and Poor's Upgrades California's Credit to A+

- *United Healthcare's Network Bulletin* (November 2014) is now available online at http://www.unitedhealthcareonline.com > Quick Links > Network Bulletin and features: Prior Authorization and Advance Notification Requirement Updates; Certain Breast Cancer Drugs Covered Without Cost-share as of September 24; and, Standard Form Required in California for Prescription Drug Prior Authorization.
- United Healthcare has issued California physicians their latest Premium Designation assessment results. Physicians within one of 27 designated specialty areas, will again be ranked by UHC on both national and specialty-specific measures for quality and various cost-efficiency benchmarks. At the request of the California Medical Association, United Healthcare is inviting physicians and practice administrators to attend a special webinar presentation about its Premium Designation program in California. The webinars will provide an overview on the background and methodologies of Premium Designation and allow physicians an opportunity to ask specific questions they may have about the program. This opportunity is unique to California and has not been offered anywhere else in the country. The webinars will take place on the following dates and time. Participants will need to register with UHC prior to attending. Click the registration link for more information. November 13, 2014, 12 p.m. November 20, 2014 , 5 p.m. United Healthcare will not be posting any notification online or via written correspondence regarding these webinars, you are encouraged to attend to discuss any questions or concerns regarding the program.

Noridian News

- Noridian/JEMAC has posted the following updates to its website (http://med.noridianmedicare.com/web/jeb): MLN Connect Provider eNews (National Provider Calls--2015 Physician Fee Schedule Final Rule: Changes to Physician Quality Reporting Programs--Registration Open; Announcements--CY2015 Policy and Payment Changes to the Medicare Physician Fee Schedule; Final Rule Changes for Open Payments; CMS is Accepting Suggestions for Potential PQRS Measures; Educational Products--

DHCS/ Medi-Cal News

- Release of the November 2014 *Medi-Cal Update* is delayed. The rescheduled posting date is Monday, November 17, 2014. Providers are encouraged to return to the Medi-Cal website on this date to access the latest *Medi-Cal Updates*, which are available by clicking the monthly bulletin tab located on the home page.
- An issue was identified that caused Medi-Cal claims for clinic-dispensed drugs using HCPCS codes J3490U5, J3490U6, S4993, S5000 and S5001 billed with modifier UD to erroneously deny with Remittance Advice Details (RAD) code 0090: The combination of procedure code and modifier is not valid on the dates of service billed. Additionally, claims may have also received the following messages erroneously: Resubmission Turnaround Document (RTD) code 406: Procedure/Service Code Not Valid For Modifier, and RAD code 036: RTD [Resubmission Turnaround Document] was either not returned or was returned uncorrected; therefore, your claim is formally denied. The issue affected claims for dates of service on or after December 30, 2013, and was corrected on October 21, 2014. Affected claims will be reprocessed and no further action is required. However, providers have the option to resubmit erroneously denied claims for HCPCS codes J3490U5, J3490U6, S4993, S5000 and S5001 for dates of service on or after December 30, 2013. Timeliness requirements will be waived until April 30, 2015. Providers participating in the 340B Drug Pricing Program should continue to use modifier UD, associated with the applicable HCPCS code and National Drug Code (NDC), to properly identify 340B drugs on the CMS-1500, UB-04, 837 Professional or 837 Institutional claim forms.
- The ICD indicator must be entered on all claims submitted with a diagnosis code. Until the implementation of ICD-10 on October 1, 2015, the ICD indicator of "9" must be included when submitting an ICD-9 diagnosis code. Claims that do not include the ICD indicator will be returned via the *Resubmission Turnaround Document* (Form 65-1). For claim-specific instructions, please refer to the following article: CMS 1500.
- January 2015 Medi-Cal Webinars can be found at this link

MOASC CALENDAR

MOASC Billing Progra (November 4, 2014)

MOASC Oncology Summit (November 14, 2014)

ANCO CALENDAR

Minimally Invasive Thorac Surgery and Thoracic Onc Symposium (Stanford Canc Institute, November 14, Stanford)

Hematological Malignanci Update (November 15, San Francisco)

Does Your Practice Measur Up? (November 19, Webcar

ASH Annual Meeting

MOASC News

- Join your colleagues, this Friday, at MOASC's final meeting of 2014. *The MOASC Oncology Summit* is a full day event for MOASC physician members. There are three advisory boards available for physicians to attend. Physicians and their staffs are invited to the concluding reception and dinner program. The keynote speaker is Dr. Lawrence Piro, who will discuss "*Physician Hospital Partnerships: What they look like, whether they work and should you consider one?*" November 14, 2014 at The Intercontinental Hotel LA Century City. For more information and to RSVP, contact the MOASC Office via phone 800-310-3553 ext. 1 or via email moasc@moasc.org.
- The MOASC Professional Education Series Oncology Billing Program was held on November 4th at the Sheraton Fairplex in Pomona. In case you missed it, below is a synopsis of the program.

This meeting was sponsored in part by the following: Merck, American Regent, Genentech, McKesson.

Speakers and topics included: Cheryl Bradley, Noridian discussed "Medicare Updates" Cheryl Bradley Handouts; Remy Turner, EDS/Medi-Cal discussed "Medi-Cal Updates" Remy Turner

<u>Handouts</u>; and Bobbi Buell, onPoint Oncology, Inc. discussed

"Oncology Billing and the Revenue Cycle" Bobbi Buell

<u>Handouts</u>. To assist with the planning of future meetings, please fill out the short survey below.

- 1. The location (Sheraton Fairplex in Pomona)
- 2. The quality of the food.
- 3. Topics and speakers were they informative and engaging?
- 4. Suggestions for improvement?
- 5. Suggestions for future topics?

Thank you for your time.



ANCO News

- ANCO is organizing a Hematological Malignancies Update on November 15 in San Francisco with Jeffrey Lee Wolf, M.D., University of California, San Francisco, and Bruno Medeiros, M.D., Stanford University. The latest research on novel treatment modalities for ALL and AML, and multiple myeloma, along with case studies for each diagnosis will be presented. The program takes place at the Hyatt Fisherman's Wharf and begins at 8:30AM with breakfast. This meeting is supported by Celgene. Space is

limited to the first 50 physician or nurse registrants only. Meeting announcements were mailed in early October. To register for the meeting, please send your name, affiliation, and e-mail address to execdir@anco-online.org (Subject: 4Q2014 Clinical Meeting) or download and FAX the registration form at www.anco-online.org/4Q2014MeetingAnnouncement.pdf.

- -ANCO will host a professional educational webcast on November 19 entitled Does Your Practice Measure Up? ANCO's Patient Satisfaction Survey Program Can Help You Find Out. During this webcast, Thomas P. Jeffrey, President, SullivanLuallinGroup, will discuss patient satisfaction as measured through surveys. In today's health care environment, measuring patient satisfaction is no longer optional; it is a requirement to stay viable. The webcast announcement was mailed in early October. To register for this webcast, please send your name, affiliation, and e-mail address to execdir@anco-online.org (Subject: 4Q2014 Professional Education Webcast) or download and FAX the ebcast registration at www.anco-online.org/4Q2014.pdf
- Four seats on the ANCO Board of Directors are up for election in 2014. ANCO seeks nominations for candidates for these seats. This year's election will take place via mail ballot in December. Candidates with the top four vote totals will serve for three years (i.e., 2015-2017, inclusive). Nominate an ANCO member (including yourself) to stand for election to the Board via e-mail/FAX to the ANCO office at execdir@anco-online.org/(415) 472-3961 no later than November 14.
- ANCO member, Primo N. Lara, Jr., M.D., *UC Davis*, is a candidate for ASCO's *Nominating Committee--Undesignated Specialty Candidates* in ASCO's forthcoming annual election. Voting is now open through November 26 with results announced in mid-December.

National News

- In a continuing effort to eliminate the Sustainable Growth Rate (SGR), several Congressional Representatives are circulating a letter to leadership asking them to take action this year to eliminate the flawed SGR used to set Medicare physician payments and enact fiscally responsible reforms to the system. For more than a decade, the SGR has resulted in unsustainable cuts to Medicare physician payments. This year represents a great opportunity to repeal the flawed SGR formula, reform health care delivery to drive quality and efficiency, and set Medicare on a more stable and predictable course for current and future generations of patients and physicians. Not only is it unlikely that the price of repeal will be this low again, but also Congress and the physician community have worked hard to develop agreed upon replacement policies for the SGR. These policies may be vulnerable as *Congress* begins a new session next year. Urge your Congressional Representative to sign onto the letter at http://cgrcengage.com/asco/app/write-a-letter? 0&engagementId=64285.

- With the election last week, starting 2015 both chambers of congress will be controlled by Republicans. Several members of the healthcare community expressed that they were optimistic that several changes to the affordable care act will be enacted by this next congress and perhaps signed by the President. The changes include actions to eliminate the gross receipts tax on medical device companies, exempting (medical text books, journal reprints and all payment associated with continuing medical education) from sunshine reporting and ending the independent payment advisory board (IPAB). Both the President and leaders in congress have expressed a desire to work together so perhaps, we will start to see significant legislation become law.

CMS News

-Starting in 2015, eligible professionals (EPs) will see a 1% decrease in Medicare reimbursements for each year they don't meet meaningful use requirements. The penalty will change by 1% point each year to a maximum of 5%. EPs have until the end of February 2015 to attest for MU2, and hospitals have until November 30, 2014. In July, CMS reported that 972 EPs and 10 hospitals attested to MU2. are keeping physicians from participating in the meaningful use program." In October, AMA released a set of suggestions to make the meaningful use program easier for providers and hospitals. The association suggested implementing a 50% threshold for incurring a penalty and a 75% threshold for earning an incentive in meaningful use stages 1 and 2. The window to apply to avoid 2015 payment adjustments for Medicare providers who are non-compliant in attaining meaningful use has been extended to November 30. For more information, please visit http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/H ardshipExtension ApplicationMessage2014.pdf

-CMS has announced that the 2012 Electronic Prescribing (eRx) Incentive Program Supplemental Incentive Payments are now available for eligible professionals who submitted data for the reporting period of January 1, 2012 through December 31, 2012 and met criteria for satisfactory reporting. 2012 eRx Supplemental Incentives are provided to those eligible professionals (EPs) and group practices that submitted an eRx Informal Review (IR) request that was approved by CMS. The incentive is 1.0% of total estimated 2012 Medicare Part B Physician Fee Schedule (PFS) allowed charges for covered professional services furnished during reporting period. Paid as lump sum to the Taxpayer Identification Number (TIN) under which the eligible professional's claims were submitted. If needed, please contact the QualityNet Help Desk for assistance. They can be reached at 1-866-288-8912 (TTY 1-877-715-6222) or via gnetsupport@hcqis.org from 7:00 a.m. to 7:00

p.m. CST Monday through Friday.

-The next CMS Physicians, Nurses & Allied Health Professionals Open Door Forum is scheduled for, tomorrow, Wednesday November 12, 2014, 12:30 PM Pacific Time (PT); Please dial-in at least 15 minutes before call start time.**This Agenda is Subject to Change**

I. Opening Remarks

- II. Announcements & Updates
 - Open Payments (Sunshine Act) update
 - December 16, 2014 MLN Connects™ National Provider Call: Certifying Patient Eligibility for the Medicare Home Health Benefit (10:30 am to 12:30 pm Pacific Time)

Web address where participants can find more information: http://www.cms.gov/Outreach-and-Education/Outreach/NPC/National-Provider-Calls-and-Events-Items/2014-12-16-Home-Health-Benefit.html?
DLPage=1&DLSort=0&DLSortDir=descending

 CY 2015 Physician Fee Schedule Final Rule: Overview of Key Provisions

Web address where participants can find this rule:

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Federal-Regulation-Notices-Items/CMS-1612-FC.html?

DLPage=1&DLSort=2&DLSortDir=descending

III. Open O&A

Open Door Participation Instructions: This call will be Conference Call Only.

To participate by phone: Dial: 1-800-837-1935 & Reference Conference ID: 44427389

Persons participating by phone do not need to RSVP. TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help. Encore: 1-855-859-2056; Conference ID: 44427389

Encore is an audio recording of this call that can be accessed by dialing 1-855-859-2056 and entering the Conference ID. This recording will be accessible beginning 2 hours after the ODF and expires after 2 business days.

Affiliate Association News

- A new ASCO Answers booklet for patients and families provides an introduction to palliative care and gives practical advice about accessing palliative care services and questions to ask. Download the new booklet at http://www.cancer.net/palliativecare.

- ASH is proud to host the premier hematology event of the year. You should register today and join your colleagues in San Francisco, CA, for the 56th ASH Annual Meeting on December 6-9. Advance registration is open for a limited time. Register today to receive discounted registration rates and to book your housing. Advance registration here ends November 5 at 8:59 p.m. (PT).

Industry News

- Lilly Oncology informs ANCO and MOASC that the United States Food and Drug Administration has approved Cyramza for use in combination with paclitaxel for the treatment of patients with advanced gastric or gastroesophageal junction (GEJ) adenocarcinoma.
- Innovatix, LLC hopes you are not experiencing any difficulty in obtaining the Flu Vaccine. There have been multiple interruptions in the supply chain this year from the manufacturers. This brief piece of information will, at least, alert you to a viable alternative distributor if needed. FFF Enterprises has a large supply of flu vaccines that are available for immediate shipping. The MyFluVaccine program makes ordering online easy and convenient, and has revolutionized the flu vaccine marketplace by offering certainty in supply and flexible delivery dates. FFF's commitment to Guaranteed Channel Integrity has resulted in 27 counterfeit-free years of safe vaccines ordered directly from the manufacturer -- and now available at special Innovatix pricing for MOASC & ANCO members! Visit myfluvaccine.com/moasc to order your flu vaccine today.
- The latest from the CMS CY 2015 Final Rule, released on the 31st of October, is Chronic Care Management https://www.spacinternational.com/pdf/4541_001.pdf. Sargas Pharmaceutical Adherence and Compliance(SPAC) International has developed software and mobile applications to keep the physicians and patients engaged from the time a script is initiated through the entire treatment period. Please visit www.spacinternational.com to learn more. Click here to view the special offer for MOASC and ANCO members who enroll before December 31, 2014.

The Medical Oncology Association of Southern California (MOASC) is a leading oncology society that advances and protects the ability of cance obtain, and the ability of the oncology physicians to provide, optimal cancer care. The Association of Northern California Oncologists (ANC association of hematologists/oncologists dedicated to promoting high professional standards of cancer care by providing a forum for the exchang data, and knowledge. The material contained in the California Oncology Weekly is intended as general information for ANCO and MOASC in Because diagnostic, treatment, contracting, coding, and billing decisions should be made on a case-by-case basis, any such information contain California Oncology Weekly may not apply in any given situation. Members are encouraged to contact their own consultants or advisors to obtain advice on matters relating to contracting, coding, and billing. The information contained in California Oncology Weekly should not be used as a such advice. This publication provides a summary of regulations affecting oncology and its business practices. Reading this newslette substitute for understanding regulations and verifying the validity of every claim. This information is time-sensitive and is subject to

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