



Make the Commitment: Provide the Best in Breast Care Through NAPBC Accreditation

By David P. Winchester, MD, FACS
Chair, National Accreditation Program for Breast Centers

**“[NAPBC] seeks
to accredit breast
centers to improve
the quality of care
and monitor
outcomes”**

Breast care has come a long way since the first freestanding multidisciplinary breast center in the United States, the Van Nuys Breast Center, opened in 1973. Now, multidisciplinary breast centers across the country accommodate millions of women who present with breast disease annually, roughly 190,000 of whom will be diagnosed with breast cancer this year. The ability of these centers – your center – to continue providing high-quality breast care hinges on a constant effort to evaluate the overall performance of teams of professionals from various disciplines working in concert to efficiently guide patients through a system of comprehensive care.

The **National Accreditation Program for Breast Centers (NAPBC)** – a consortium of professional organizations including the Association of Cancer Executives – seeks to accredit breast centers to improve the quality of care and monitor outcomes among patients with diseases of the breast. This goal is accomplished through the development of standards and a rigorous survey process to systematically and critically evaluate breast care, among other key scientific and educational objectives. To acknowledge the multidisciplinary approach required for the treatment of breast disease, the NAPBC is governed by a multidisciplinary board that includes physician leaders, nurses, administrators and other health care professionals dedicated to the diagnosis and treatment of patients with diseases of the breast.

The NAPBC recognizes that breast care is delivered in a variety of settings in the United States – large academic medical centers, teaching and nonteaching hospitals, freestanding centers and small private practices. Regardless of the setting, NAPBC accreditation is awarded to any breast center that demonstrates a multidisciplinary team

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ACE Calendar

ACE 2010 ANNUAL MEETING

FEBRUARY 13–16
SAN DIEGO, CA
WESTIN GASLAMP QUARTER

ACE 2011 ANNUAL MEETING

JANUARY 26–29
NEW ORLEANS, LA
**THE ROOSEVELT HOTEL - THE
WALDORF ASTORIA COLLECTION**

President's Message



Patrick A. Grusenmeyer, ScD, ACE President
*Senior Vice President, Cancer and Imaging Services
Christiana Care Health System*

2010 Annual Meeting

It is time to start planning your trip to the ACE 2010 Annual Meeting, to be held February 13–16, 2010 at the Westin Gaslamp Quarter in San Diego, California. The Westin Gaslamp provides fabulous accommodations in a charming city with lots to do, and warm sunny weather in the middle of February.

Even more important, Joy Soleiman, ACE President-Elect and the ACE Education committee have created an exciting program of educational sessions and a tour of the Moores Cancer Center at the University of California at San Diego.

Doug Blayney, MD, *President of the American Society of Clinical Oncology (ASCO)* will present a plenary session on Evidence Medicine Oncology Guidelines and ASCO's Quality Practice Initiative. In addition, Kenneth H. Buetow, PhD, *Associate Director for Bioinformatics and Information Technology and Director of the Center for Bioinformatics at the National Cancer Institute*, will provide an

update on information technology advances at the NCI and their availability to cancer centers.

Other sessions include: *Technology of the Future; Creating Environments to Improve Patient Satisfaction—Lessons in Evidence Based Design; Non-Physician Productivity and Models of Physician Productivity; Cancer Program Accreditation—choosing from the alternatives; Oncology Financial Reporting & Accountability—Winning with Facts; A New Cancer Survivorship Model—From Day One and Beyond; Cancer Center Affiliations: Branding Exercise or Valuable Partnerships?; and Oncology Clinical Leadership Assessments & Succession Planning.*

A one-day **Oncology 101** program on Saturday, February 13 will precede the Annual Meeting. This is a great learning opportunity for new cancer center managers or those experienced executives wanting a refresher course (*separate registration fees apply; see advance program on p. 3*).

Moreover, the ACE Annual Meeting provides a great opportunity to network with your peers and learn from their experiences. I look forward to seeing you in San Diego.

Visit <http://cancerexecutives.org/meetinginfo.html> for more information. Online registration is available at www.regonline.com/ACEmeeting2010. ■

NAPBC Accreditation

> *Continued from page 1*

approach to coordinate the best possible care and treatment options available; access to breast cancer-related information, education and support; data collection on quality indicators for all subspecialties involved in breast cancer diagnosis and treatment; ongoing monitoring and improvement of care; and information about clinical trials and new treatment options.

A center seeking NAPBC accreditation must voluntarily commit to providing the best possible care to patients with diseases of the breast. Each center must undergo a rigorous evaluation and review of its performance and compliance with the NAPBC standards. The standards categories, which were established after 15 months of deliberation by the NAPBC board, include center leadership, clinical management, research, community outreach, professional education and quality improvement. After a center completes the NAPBC application and they have been approved to continue in the process, they are granted access to complete the Survey Application Record (SAR), a web-based interactive application examining the overall center structure. In conjunction with access to the SAR, an NAPBC surveyor is assigned to the center to provide education throughout the process and perform a scheduled site visit to review the center's performance and compliance with NAPBC standards. To maintain accreditation, centers must undergo an on-site review every three years.

NAPBC accreditation provides a model for organizing and managing a breast care center to ensure multidisciplinary, integrated and comprehensive breast care services. The NAPBC has carefully incorporated all aspects of breast health care from diagnosis to treatment and beyond. Not only does the NAPBC focus on clinical treatment of patients with diseases of the breast, but its focus also includes research, community education, professional education and quality improvement, which broadens the scope of care beyond the breast center to include staff, community and the quest for research-based information that will guide treatment planning in the future.

NAPBC accreditation can set your institution apart from other breast health care organizations by demonstrating your commitment to providing the highest-quality breast care. This accreditation accomplishment translates not only to increased recognition from patients, who seek care at accredited programs that meet or exceed national benchmarks, but also to heightened appeal to job-seeking physicians and other breast health professionals, who gravitate towards reputable, accredited centers meeting evidence-based quality standards.

I encourage cancer executives at hospitals, treatment centers, individual physician practices and other facilities committed to breast health care to strive to improve the quality of care available at your institutions through NAPBC accreditation. The NAPBC is quickly gaining national recognition in patient care and has accredited 103 breast centers in 28 states since its launch in September 2008, ranging from rural hospitals to large urban treatment centers. In addition, another 100 centers are in the process of accreditation, and nearly 1,200 centers have expressed interest in seeking NAPBC accreditation.

To join our effort, please visit www.accreditedbreastcenters.org or contact the NAPBC administrative office at napbc@facs.org or 312-202-5185. ■

“NAPBC accreditation provides a model for organizing and managing a breast care center to ensure multidisciplinary, integrated and comprehensive breast care services.”

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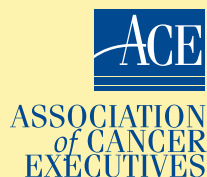


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SAN DIEGO, CA
FEBRUARY 13-16, 2010

WESTIN
GASLAMP
QUARTER



ONCOLOGY
101
FEB. 13, 2010

&

16TH ANNUAL
MEETING
FEB. 14-16, 2010

ATTEND ONE
OR BOTH!
SEPARATE
REGISTRATION
FEE REQUIRED

ADVANCE PROGRAM (SUBJECT TO CHANGE)

ONCOLOGY 101 ONE-DAY PROGRAM:
AN INTRODUCTION TO
ONCOLOGY MANAGEMENT

- 7:45AM-8:15AM **Continental Breakfast & Registration**
- 8:15AM-8:30AM **Welcome & Program Overview**
Patrick Grusenmeyer, Sc.D., FACHE, Helen F. Graham
Cancer Center, ACE President
Cat Taylor*, MBA, South Nassau's Cancer Center
John Robb*, FKP Solution Management
*Oncology 101 Co-Chair
- 8:30AM-9:00AM **The Role of the Administrator**
Cat Taylor, MBA, South Nassau's Cancer Center
- 9:00AM-9:50AM **Cancer Care 101**
Shirley Johnson, RN, MS, MBA, City of Hope, ACE
Immediate Past President
- 10:00AM-10:50AM **What is Comprehensive Cancer Care?**
Marsha Fountain, RN, MSN, The Oncology Group
- 10:50AM-11:00AM **Break**
- 11:00AM-11:50AM **The Basics of Business Planning**
Kelley Simpson, Oncology Solutions
- 12:00PM-1:15PM **Lunch**
- 1:15PM-2:00PM **Billing & Coding... The Secret Words**
Teri Guidi, MBA, FAAMA, Oncology Management
Consulting Group
- 2:10PM-3:00PM **Marketing & Branding**
William Sonn, Univ. of Colorado Hospital
Brad Fixler, Univ. of Colorado Hospital
- 3:00PM-3:10PM **Break**
- 3:10PM-4:00PM **Environment of Care**
John Robb, FKP Solution Management
- 4:00PM-4:15PM **Closing Q & A**

16TH ANNUAL MEETING

SUNDAY, February 14

- 10:00AM **Welcome & Opening Remarks**
Joy Soleiman, MPA, ACE 16th Annual Meeting Chair,
Kimmel Cancer Center at Jefferson
- 10:00AM-12:00PM **Technology of the Future**
Tony Reid, MD, PhD, Univ. of California, San Diego
Arno J Mundt, MD, Univ. of California, San Diego
Michael Bouvet, MD, Univ. of California, San Diego
- 12:15PM-1:15PM **Opening Lunch/Annual Business Meeting**
- 1:30PM-2:30PM **Creating Environments to Improve
Patient Satisfaction – Lessons in
Evidence Based Design**
Mike Putszka, AIA, Cannon Design
- 2:30PM-3:30PM **Productivity Models for Physicians and
Staff**
Elaine Towle, CMPE, Oncology Metrics
Elaine Kloos, RN, CNA-BC, MBA, Oncology Management
Consulting Group
- 3:30PM-3:45PM **Break**
- 3:45PM-4:45PM **Program Differentiation through
Clinical Excellence**
James Field, Advisory Board
- 5:00PM-7:00PM **ACE EXPO Opening Reception**

CONTINUED >

**EXHIBIT & SPONSORSHIP
OPPORTUNITIES AVAILABLE!**
CONTACT ACE HQ FOR INFORMATION.

DETAILED PROGRAM & REGISTRATION INFORMATION IS AT www.cancerexecutives.org



MONDAY, February 15

- 8:00AM-9:00AM **ACE EXPO Breakfast**
- 9:00AM-10:00AM **Cancer Program Accreditation Challenges and Opportunities:**
Incorporating National Comprehensive Cancer Network (NCCN), Commission on Cancer (COC), and National Accreditation Program for Breast Centers (NAPBC) Into Your Operations
Linda Ferris, PhD, Renown Regional Medical Center
Roseanne Iacono, Thomas Jefferson Univ. Hospital
Patricia Goldsmith, National Comprehensive Cancer Network
- 10:15AM-11:15AM **BREAKOUT SESSIONS A** (concurrent)
- A New SPIN on Strategic Planning**
Theodore Michalke, NeuStrategy, Inc.
- Oncology Financial Reporting & Accountability... Winning with Facts**
Glenn Balasky, The Mark H. Zangmeister Center
Brian McCagh, Greater Baltimore Medical Center
- 11:15AM-12:15PM **ACE EXPO Finale Break**
- 12:15PM-1:15PM **LUNCH SESSION: National Cancer Institute Information Technology Update**
Kenneth H. Buetow, PhD, National Cancer Institute
- 1:30PM-2:30PM **Evidence Medicine Oncology Guidelines and ASCO's Quality Practice Initiative**
Doug Blayney, MD, Univ. of Michigan; President, American Society of Clinical Oncology (ASCO)
- 2:45PM-3:45PM **BREAKOUT SESSIONS B** (concurrent)
- From Day One and Beyond: A New Cancer Survivorship Model**
Donna Arbogast, Donna Arbogast & Associates, LLC
- Cancer Center Affiliations: Branding Exercise or Valuable Partnerships?**
Phil Sydow, University of Tennessee
Christopher Collins, ECG Management Consultants
- 4:00PM-5:00PM **BREAKOUT SESSIONS C** (concurrent)
- Patient & Family Centered Care**
Mary Gullatte, PhD, RN, APRN, BC, AOCN, FAAMA, Emory Crawford Long Hospital
- Oncology Clinical Leadership Assessments & Succession Planning**
Moir Feingold, Crossroads Cancer Consulting
- 5:30PM-6:30PM **Reception**

TUESDAY, February 16

- 8:00AM **Moore's Cancer Center Tour**
Meet in Lobby for Shuttle Bus Departure
- 8:30AM-10:30AM **Continental Breakfast & UCSD Moore's Cancer Center Tour**
- 10:30AM **Adjourn**

2010 ACE EXPO

Industry leading products and services will be on display at special times throughout the meeting.



EXHIBITORS

- (as of 10/1/09)
- Accuray
Aptium Oncology
Association of Community Cancer Centers (ACCC)
Elekta Impac Software
FKP Architects
GE Healthcare
Heery
HONI
Journal of Multidisciplinary Cancer Care
- MedAptus
Oncology Management Consultants
PercipEnz
Pyramid Healthcare Solutions
Revenue Cycle Inc.
Siemens Medical Solutions USA, Inc.
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TomoTherapy, Inc.

ACE Member News

The Oncology Business Institute (TOBI) Opens for Membership

The Oncology Business Institute is a landmark collaboration of the **Oncology Management Consulting Group of PA** and **Oncology Metrics of TX** and is the first and only resource for productivity, staffing and financial benchmarks, education and professional networking for hospital cancer centers. TOBI brings to the table OMC Group's decades of national experience in developing, running and advising successful hospital cancer centers and Oncology Metrics' unparalleled expertise in data collection and benchmark analysis.

For the first time, hospital cancer centers have access to truly applicable information and resources designed specifically to answer their most frequent and most challenging questions about their financial and operational performance. TOBI supports hospital cancer centers in making sound operational, financial and strategic decisions to become true centers of excellence. Never before has such a wealth of knowledge and skill been harnessed with the express purpose of addressing the needs of hospital cancer center administrators.

TOBI is a membership organization dedicated to providing administrators of hospital outpatient cancer centers with the information they need to ensure maximum performance through comparative benchmarking, networking, and education. TOBI benchmarks are designed by oncology experts who understand the need for relevant data points that are current and applicable:

- Staffing for infusion, radiation, registry, clinical trials
- Resources for cancer center departments
- Productivity metrics
- Financial benchmarks
- Educational offerings based on the members' requests and driven by their data.

Professional networking is greatly enhanced because all TOBI members' performance has been measured in precisely the same way.

Finally, oncology administrators have a dedicated source that properly addresses the nuances of outpatient oncology and the differences in program size and scope.

For more information, call or email **TOBI: 215-766-2065, resources@TOBImember.com** ■



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HONI's "Industry Insiders" – Q&A with ACE Board

Oncology Budgeting: A Primer of What, How and Why

Submitted by Matt Sherer, ACE Board Member
John B. Amos Cancer Center

Ed. Note: Hematology & Oncology New & Issues (HONI) is featuring the ACE Board of Directors in a monthly "Industry Insiders" column, which we are pleased to reprint here.

"The budget helps... to guide [a cancer center] through rough and smooth times... It is the map the center should be using to guide it."

According to Merriam–Webster's dictionary, a budget is "a statement of the financial position of an administration for a definite period of time based on estimates of expenditures during the period and proposals for financing them." According to Matt, a budget is a document that shows your income and expenses for a given period, usually a specific twelve-month period. Budgets are needed in business and our personal lives. The following discussion is about a business or more specifically a hospital budget and why they are important.

- At the basic level, a budget is needed so an organization can plan its expected revenues and expenditures. The budget allows the manager to estimate the volume of procedures or visits, the cost of staffing, and the cost of supplies to name a few. This budget should also reflect previous historical information. This historical information should help formulate your budget for the following year.
- A budget for a hospital-based cancer center is very important. There are many reasons why it is so important. As a department of a hospital, the cancer center accounts for a larger portion of expenses, revenue, and profit. The budget allows the center to estimate all of these areas in order to better manage the daily operations.
- Tracking, estimating, and knowing your expenses are essential to running any business but especially in cancer care. A center must have an in-depth knowledge of all expenses charged to their center. These can be direct expenses (labor, supplies, etc.) or indirect expenses (corporate overhead, IT support, Security, etc.). By monitoring on a regular basis (at least monthly), the center can help control their expenses.
- Revenue is important as well. A center should track its gross revenue and its net revenue. The gross revenue shows how well the center is capturing its charges. A center should bill for services provided. The staff (front-desk to clinical to physicians) should know their role in the revenue cycle. If they do not, then you will miss revenue and not achieve your maximum gross charges.
- Net charges are also important because this is what you actually are getting paid for your services. It can tell you if you are capturing gross charges correctly as well. The net charges can help you determine denials and rejections. If you do not track and work these, you will be losing money as well.
- Once you have your net charges and expenses, you can then estimate your operating income. This is important because it allows you to then budget for other needs outside of your operating budget. This operating income can be used to make investments or to purchase capital items that might be needed for the center or organization.
- Without a budget, the center would be like a ship without a rudder AND a sail. The budget helps management of the center to guide it through rough and smooth times. It allows management to know what areas are performing well and what areas need attention or improvement. It is the map the center should be using to guide it.
- The budget should be used to help inform the front-line staff as to how the center is performing. It should be used as a tool to help them understand how their daily activities impact the center. They should understand the budget is the guide and they are expected to help meet or exceed those expectations. They should also play a role in establishing the budget. If the staff does not have input and buy-in, then they will likely not support it either.

...

In conclusion, a budget is vital to the survival of any cancer center. It is your compass of where you are going financially. If you do not use it or keep a constant eye on it, you will get off course. If you do not manage your budget, you cannot succeed. If you do not succeed, then you have not only failed your organization, you have failed your patients! ■

ACE would like to wish
you and your family a safe
and happy Thanksgiving

ACE Welcome New Members *Since August 27, 2009*

■ **Stephanie Chang**
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■ **Roxanne Clark**
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■ **Rosemary McAndrew**
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 F: 732-235-5260
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■ **L. Craig Rogers**
UK HealthCare Markey Cancer Center
 800 Rose Street
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 F: 859 323-2074
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■ **Debi Schoonover**
Kootenai Cancer Center at BGH
 520 N. 3rd Avenue
 Sandpoint, ID 83864
 T: 208-263-6763
 F: 208-265-2632
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ACE Committee Updates

Bylaws Committee

Jeanne M. Rogers, *Committee Chair*

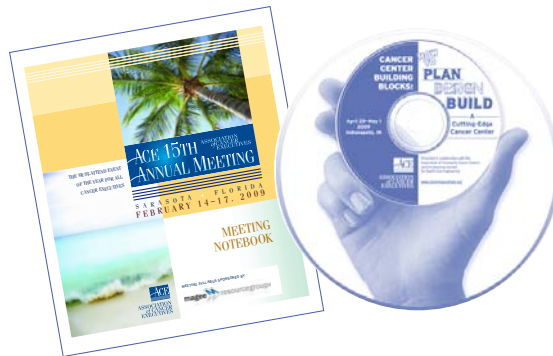
The Call for Nominations for the ACE Board of Directors was distributed to the membership electronically on Friday, October 9. Nominations for the positions of **President Elect, Secretary and three (3) Director Positions** were due back to ACE headquarters by Friday, November 6.

Ballots will be distributed electronically by December 11 and are due back by January 15, 2010. Results will be announced in San Diego at the Annual Meeting in February. Please take advantage of this opportunity to become more actively involved in ACE leadership and help guide the organization as we address the ever changing issues and challenges facing cancer executives in today's health care arena. ■

Consider serving in an ACE professional committee
For information please email info@cancerexecutives.org

Did you miss the 2009 Annual Meeting?
Catch up with the Meeting Notebook!

Want to know more about the Cancer Center Building Blocks Conference?
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YOUR INPUT IS IMPORTANT TO US!

ACE appreciates member feedback and suggestions to better serve you.

Please e-mail your questions or comments to info@cancerexecutives.org

Share Your News

Announce your organization's achievements, program changes, staff transitions and events to the entire ACE membership! Send an email with your news and press releases to: info@cancerexecutives.org



ASSOCIATION of CANCER EXECUTIVES

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16TH ANNUAL MEETING

SAN DIEGO, CALIFORNIA
WESTIN GASLAMP QUARTER



FEBRUARY 13–16, 2010

Save the Date

