

NCCN Reimbursement Resource Room

During the NCCN 18th Annual Conference, NCCN will have a dedicated section in the Exhibit Hall for clinicians to visit and learn about industry reimbursement help and services. Individual table top displays are available. Sponsors also have the opportunity to give a presentation. The NCCN Reimbursement Resource Room will have a prominent position in the front of the Exhibit Hall.

Participation in the NCCN Reimbursement Resource Room is a year-long sponsorship and includes a table top display at the NCCN Annual Conference (with all exhibitor benefits listed on page 4), a one page listing in the NCCN Annual Conference Reimbursement Resource Room Guide, website placements in NCCN *Virtual* Reimbursement Resource Rooms as well as multiple other benefits available throughout the year.

For the full list of benefits, please contact, Jennifer Tredwell at tredwell@nccn.org.

NCCN Reimbursement Resource Room Participants at the NCCN 17th Annual Conference included:

- Allos Support for Assisting Patients (ASAP)
- Amgen Assist®
- Celgene Patient Support
- CORE (Comprehensive Oncology Reimbursement Expertise)
- Dendreon ON Call
- Patient Access Network (PAN) Foundation
- Patient Assistance NOW Oncology (PANO) (Novartis Oncology)
- REACH (Resource for Expert Assistance and Care Helpline) (Bayer HealthCare Pharmaceuticals and Onyx Pharmaceuticals)
- ZytigaOne™ Support

NCCN Reimbursement Resource Room Dates

March 13 – 15, 2013



NCCN
18th
ANNUAL CONFERENCE:
Advancing the Standard of Cancer Care™

The Westin Diplomat • Hollywood, Florida

Conference Dates: March 13 – 17, 2013

Exhibit Dates: March 13 – 15, 2013

APPLICANT INFORMATION (please type or print clearly)

Organization: _____

Contact Name: _____
(Name of person who will be responsible for your exhibit and to whom all future correspondence should be sent)

Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-mail (required for registration): _____

Signature (required for space reservation): _____

PROMOTIONAL INFORMATION

Organization Name for Conference Materials

(Use upper and lower case letters exactly as your organization's name should appear on all conference materials)

Please provide a brief 100-word description of your company/product to be included in the NCCN 18th Annual Conference Reimbursement Resource Room Guide.

PAYMENT INFORMATION

Table Top: \$10,000

Presentation and Table Top: \$25,000

TOTAL Fees: \$ _____

Please send an invoice

Check Enclosed (Please make checks payable to: **National Comprehensive Cancer Network** and mail to: NCCN, 275 Commerce Drive, Suite 300, Fort Washington, PA 19034, Attn: Janice Tucker)

Credit Card: American Express Discover Card MasterCard Visa

Cardholder's Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Card Number: _____ Expiration Date: _____ Verification Number: _____

Signature: _____

NCCN may charge the credit card for the amount as indicated above.

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Instructions

1. Complete and submit this form to apply for a table top in the NCCN Reimbursement Resource Room by **FRI, JAN 18, 2013**.
2. You will receive a letter confirming receipt of your application and a registration packet with your Conference registration forms.
3. Floor plan and table numbers will be available on **FRI, JAN 25, 2013**.

NCCN adheres to the ACCME's Standards for Commercial Support, which state that arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for CME activities, and that the live educational activity must remain completely separate from the exhibits and promotional activities. NCCN appreciates adherence to this policy.

Submit completed application form or for more information, please contact:

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