

## From the President's Desk: Advocacy—Whose job is it anyway?

November 2018—Last month, we talked about how the CAP Laboratory Accreditation Program employs mentorship and perspective to move our specialty forward. I'd like to talk this month about how we apply those tools in our advocacy program.

My first mentor in organized medicine was my mother-in-law, who was the first woman president of the Louisiana State Medical Society. Her term on the board commenced when I was new in practice. My wife, Susan, was a resident, our eldest was an infant, and I was elected chauffeur for my mother-in-law's trips to the LSMS annual meetings and board meetings in New Orleans.



R. Bruce Williams, MD

Driving Susan's mom to LSMS meetings had its benefits. The payoffs included gaining lifelong mentors who were pillars in the LSMS as well as firsthand knowledge of the important needs that are met by state medical societies. Joe Saad, MD, who chairs the CAP Federal and State Affairs Committee, often says that everything comes down to relationships. I know he's right, but what I still do not know is whether my wife and mother-in-law were in cahoots and that chauffeur job was a setup.

In any event, since I was at the meetings, I figured I might as well make myself useful. I helped out wherever I could and eventually grew into someone who could be elected LSMS president.

As the LSMS president, I was required to become a spokesperson for the state society. Learning to lobby can feel uncomfortable at first, but while the butterflies are transient, the benefits are durable. Some say that advocacy is something we pay our lobbyists to do—and that's true, as far as it goes. But at the end of the day, it's really our job. And just as stepping up has its rewards, the cost of stepping back is steep. A skilled advocate knows how to present a position and respond respectfully to objections and concerns. I think we have a duty to develop those abilities.

The CAP lobbyists are the best there is. John Scott, CAP vice president for advocacy, is relentlessly future focused. The CAP Accountable Care Organization Network, founded when there were fewer than 100 ACOs in the country, is a good example. An ear-to-the-rail project if there ever was one, the ACO Network (chaired by Donald Karcher, MD, who now chairs our Council on Government and Professional Affairs) showed the value of thinking ahead. Our advocacy team put out a call to pathologists practicing in those first ACOs to figure out what this new payment

model might mean for pathology. In short order we had a white paper that provided invaluable anticipatory guidance to pathologists about what was around the bend.

Our biggest advocacy event is the annual CAP Policy Meeting, a three-day convocation of CAP members in Washington, DC, where well-known experts bring us up to speed on the issues, preparing us for Hill Day, when we meet with our congressional representatives and their staff. Because advocacy skills are dynamic, they are best learned from a mentor and cemented with practice (“see one, do one, teach one”). You might say that the CAP Policy Meeting is a lab course in lobbying. If that sounds counterintuitive, consider how Emily Volk, MD, MBA, who is vice chair of the Council on Government and Professional Affairs, describes her first Hill Day. In what amounted to a pop-up short course, Richard Hausner, MD, guided Dr. Volk through meetings in their representatives’ offices, where he made a case for our patients and our specialty that was unforgettably “articulate, passionate, and clear.”

For our most recent Hill Day in May, we had two key “asks.” First, we sought support for the Local Coverage Determination Clarification Act of 2017, which spells out essential patient protections and would increase transparency and accountability provisions in the Medicare LCD process. Second, we advocated for refinements to the clinical laboratory fee schedule rate-setting provisions that are now part of the Protecting Access to Medicare Act of 2014. There has been hopeful progress on the LCD front, and both of those issues are still alive, so stay tuned.

Better yet, stay tuned and stay engaged. I come away from every Policy Meeting reassured that legislators and their teams are capable, well intentioned, and hard working. Of course, they can’t show us those things if they aren’t there, which is why we should each contribute to PathPAC to help build relationships with federal candidates who can influence issues critical to the success of pathologists. As PathPAC chair Jared Abbott, MD, PhD, aptly puts it, our political action committee is not a charity. It is an investment option for CAP members who care about the long-term status of pathology. Only fellows of the CAP can contribute to PathPAC, which supports candidates with a nonpartisan/bipartisan strategy that focuses on congressional members in key committees of jurisdiction on issues affecting our specialty.

Please remember, too, to contribute to the campaigns of legislators in your state who support quality medical care—and especially quality pathology services.

There are many ways to advocate and each one counts. As Timothy Craig Allen, MD, JD, tells his residents, we may not believe we can lobby effectively for our specialty, but it’s our responsibility and an accessible skill. Dr. Allen agreed to become an alternate delegate to the CAP when he realized someone else could probably do the job better than he “but there was nobody there.” Today, he chairs our Council on Membership and Professional Development and advocates daily for his patients, his laboratory, and his specialty.

No doubt, 2019 will be a busy year. Please read Statline and prepare to respond when you have an opportunity to speak for your specialty.

And mark your calendars for the next CAP Policy Meeting in Washington, DC, to be held April 29–May 1, 2019. We had 135 meetings with legislators in 2018. Let’s grow that number, along with our skills, in 2019. □

Dr. Williams welcomes communication from CAP members. Write to him at [president@cap.org](mailto:president@cap.org).