From the President's Desk: Giving group practices what they need most

R. Bruce Williams, MD

February 2019—In last month's column, we talked about practice engagement as an umbrella term for laboratory medical direction and practice management that builds strong relationships within and beyond the laboratory. The CAP Practice Management Committee has been taking the lead on this, but it cuts across multiple domains; the conundrum, as always, is the complexity of what we do. Practice management tools designed for other settings cannot meet our needs because we must address economy, efficiency, effectiveness, and collegiality concerns specific to pathology. But then, affinity for complexity is how we landed here in the first place, so that plays to our strengths.



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Patrick Wilson, MD, who chairs the CAP Practice Management Committee, thinks about practice engagement in terms of three buckets: 1) day-to-day financial management—billing, coding, and such; 2) practice sustainability in a constantly changing environment; and 3) peer and personnel relationships. Most critically, he says, we need to know the revenue cycle within our practices and how the value of our contributions is measured.

Last month, we talked about tools that the Practice Management Committee provides for our members. Access to the CAP practice management assistance program, which offers tailored recommendations provided by a CAP analyst with decades of directly relevant experience, was one. The CAP value-based business toolkits, which cover everything from billing and cost management to creating an annual report, were another. The Practice Management Committee also supports the CAP Practice Managers Forum. Membership in the forum is open to any practice manager employed by a practice in which at least one physician member is a CAP fellow. The benefits include access to practice management assistance, website tools, and invaluable peer support.

Advocacy is a critical element of practice management because policymakers who don't understand the ways our specialty contributes to their constituents' well-being have no reason to protect the laws and regulations that keep the lights on. The CAP Council on Government and Professional Affairs, chaired by Donald Karcher, MD, ensures that we communicate effectively about the importance of a patient-centric, even-handed legal and regulatory environment. The CAP advocacy team works to set a healthy milieu for good practice in pathology, and it keeps us visible, meaning sustainable as well as solvent.

Our advocacy group also manages the CAP Policy Meeting, a powerful exercise in citizenship and a unique opportunity to experience a highly nuanced environment firsthand. Pathologists who attend get in-depth knowledge of the rationale underlying our proposals and positions along with training in how to educate members of Congress and their aides about who we are and what we do. This year's meeting will be held April 29-May 1 at the Marriott at Metro Center in Washington, DC. Attendance would be a fine investment in your leadership skills and the future of our specialty. Registration information is on the CAP website.

In terms of promoting practice management education, every CAP laboratory inspection is a learning experience of the first order—and every edition of the inspection checklist is a study guide. The CAP provides focused educational tools like the updated Managing Your Revenue Cycle for Success and Negotiation Strategies for Pathologists online courses. And the award-winning CAP Advanced Practical Pathology Program (AP3) in laboratory medical direction, which incorporates seven online self-assessment modules and a two-day interactive workshop (April 11–12, 2019 in Las Vegas), is an excellent use of your time.

Much of what we do is quality improvement, and much of quality improvement is collaborative, supporting our ability to be good partners across our institutions and communities. I've been asked how our practice grew to serve so many (nearly 100) institutions. The answer, I think, is that we have always tried to be good neighbors. One key to our growth has been creative solutions to variable personnel needs. We've found that if someone could stretch a bit, maybe do grossing and also manage the couriers, that was a plus. When we were reaching to cover a well-dispersed coverage area, someone suggested we hire a few semiretired pathologists who were willing to travel to distant hospitals to read frozen sections. It has worked well for all concerned. Practice management has a lot to do with staying on top of the day-to-day so that challenges are anticipated and you don't find yourself managing from a reactive posture.

Our group has an executive committee, and we do focus on the best ways to respect the skills, needs, and personal qualities of everyone in the laboratory. We try to make excellence in reporting and communication a collective pursuit. All of that contributes to our clinical strength and positive space in the greater community. But when someone asks how we grew, I have to admit that it wasn't exactly our business plan to get so big. We did put money and energy into our people, quality systems, and administrative tools, which made us an appealing partner. Growing was all about reaching out to other folks (and keeping the door open to those who knocked) and considering whether we might be stronger together than apart.

The pathologists in our practice try to see everyone as a partner. Not everyone is equally flexible, but often, when you mentor someone in a new role, they discover they're good at it. Those who take ownership in their future are always looking to improve it, and we want everyone in our laboratories to feel they are more partners than employees.

Finally, part of practice engagement is encouraging everyone on our laboratory teams to set aside time for family, friends, and interests. I represented the CAP at the Texas Medical Association meeting in January. I drove to Austin, and on the way back my wife and I spent time with our daughter and her family in Houston. The TMA meeting was outstanding, but if you ask me what we did that weekend, you know that I'll take out my cell phone to share pictures of the little ones. That's practice engagement via personal engagement—one of the ways we can push back against burnout, which is such a worry these days.

Dr. Williams welcomes communication from CAP members. Write to him at president@cap.org.