From the President's Desk: What's the state of your state pathology society?

Patrick Godbey, MD

January 2020—Recently I attended and spoke at a meeting of the Georgia Association of Pathology. That might not sound like a big deal, but it was. This was an important occasion for me and my colleagues in Georgia because our state society had been dormant for the past decade. Thanks to the efforts of five CAP fellows and the CAP itself, we are back in Georgia.



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State pathology associations are extremely important because many of the laws and regulations that dictate how pathologists are allowed to practice medicine are state laws and regulations. Such things as how pathologists obtain a license to practice, when pathologists can be sued for malpractice, and how pathologists bill for Medicaid are, in large part, decided in your state capital. Much of how you are allowed to interact with private third-party payers is determined there too. Pathologists have a louder voice in states with robust pathology societies.

While being active in the CAP is critical for all pathologists, it is also important that we are active in our state pathology societies. These societies play a central role in monitoring and responding to proposed legislation and regulations. The CAP's ability to help at the state level is greatly dependent on the condition of the state pathology society. The stronger the state society, the more effective the efforts of the two organizations will be. The CAP has ongoing strategic initiatives to improve the viability of these societies, and many of us in the CAP leadership work closely with them.

The CAP's State Pathology Working Group falls under the Council on Membership and Professional Development and is chaired by Edward P. Fody, MD. Thanks to the work of this group of pathologists, tools such as a virtual meeting platform, membership toolkits, virtual state pathology society leadership roundtables, and online advocacy education programs will be available this year. The CAP will also provide a great deal of support for your state association meetings, including providing speakers, promoting the meetings on the CAP website, sending emails to members, and providing CME credits for those who attend. Several members of the CAP staff are active in promoting state pathology societies. Megan Wick oversees programs to support state societies. If your state does not have an active pathology association, I encourage you to reach out to Megan at mwick@cap.org. I can tell you from firsthand experience that she will be a great help. CAP staff member Barry Ziman started our program to support state pathology societies in their advocacy efforts. In his time at the CAP, Barry and his team have helped put in place more than 100 state laws and administrative rulings that benefit pathologists.

State medical societies, which try to influence how these laws and regulations are written, represent the entirety of the house of medicine and don't always understand our view well enough. It is important that they see strong representation from pathologists in their state. This will have a real impact on how much our perspective is considered.

If you practice in one of the 15 or so states where the pathology association is dormant or nonexistent, there are things you can do to improve the situation. I see Georgia as a great example of how a state society can be turned around. After a decade of inactivity—and fueled by the threat of a balance billing law that would have negative consequences for pathologists and our patients—my colleagues and I pushed to re-establish the Georgia Association of Pathology. It took several of us and the CAP to revive the society. Last fall we had an annual meeting for the first time in years, and it was a great success.

I have a personal interest in state pathology organizations and have had the good fortune to attend numerous state pathology meetings. We need to promote them so that we will have even more robust state pathology associations. Each of these state societies should have a strong relationship with the CAP because it is mutually beneficial for our organizations and is even more beneficial for pathologists and our patients. Remember: If we don't have a voice at the state level, then the pathologist's point of view will not be considered adequately in state legislation and regulations that govern our practices.

I would like to thank Megan Wick, Barry Ziman, and Charles Fiegl, CAP's director for advocacy communications, for their help with this column and for all state-level advocacy efforts. In

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