# June 2023 Advocacy Recap

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Hello, and welcome to the CAP Advocacy Recap, a monthly podcast dedicated to catching you up on the top news for pathologists. I'm Alec Bose, here with your June 2023 recap. This month we'll review some of the highlights from the annual AMA meeting in Chicago. Look at why CAP is opposing the name for cytotechnologists and more. We start the day with a recap of the 2023 AMA meeting in Chicago. The CAP led a delegation of pathologists, called the Pathology Section Council at the meeting. The AMA House of Delegates ultimately declared Medicare physician payment reform is an urgent advocacy and legislative priority. The House applauded the passage of a new policy to strengthen efforts to address deficiencies in the Medicare payment system, which has seen a 26% decline in physician pay since 2001.

This includes an increase to the lobbying budget to advocate for reforms that ensure physician pay is updated annually with a percentage increase equal to the Medicare Economic Index. The AMA has already dedicated significant resources with the targeted fixing Medicare NOW Campaign where physicians and patients can engage on the issue and contact lawmakers about the importance of the issue. This was not the only issue the delegation was engaged on. The House adopted a recommendation to modify an existing screening and treatment policy for breast and cervical cancer that the CAP and the Pathology Section Council work to amend. This called for increased efforts to prevent the spread of HPV through vaccination programs for people who are incarcerated and including broader language in the current policy, which will ensure existing disparities and preventative services will not increase.

The Pathology Section Council also offered testimony on a resolution regarding blood transfusions. On behalf of the delegation, Dr. Jean E. Forsberg and Dr. Cliff Sullivan testified on the resolution calling for the discouragement of patient requests for blood products and components beyond current federal regulations or best practice guidelines. This also includes requests to exclude products from individuals who have received the COVID-19 vaccines. The Pathology Section Council delegation also engaged on a variety of other topics concerning the specialty, including the elimination of time-based deferrals of blood donations for men who have sex with men, policies to assist with the navigation of non-compete clauses and covenants, and recommendations to measure the potential costs and benefits of generative AI in the medical field. You can read our full special report on the website or the June 15th edition of your Advocacy Newsletter.

The CAP also worked with the AMA CPT Editorial Panel prior to the meeting to include 30 new digital pathology add-on codes for 2024. These will be used to report additional service requirements associated with digitizing glass microscope slides for primary diagnosis. The AMA CPT also plans on revising the digitization procedure guidelines for Category III digital pathology codes. The CAP applauds making this information public and will provide resources throughout the year to inform members about anticipated CPT changes. The CAP has continued to work with the AMA CPT Editorial Board to advocate for improved reporting of digital pathology services. As a result, newly developed codes will help pathologists, pathology practices, and laboratories providing digital pathology digitization procedures to appropriately report these services. For additional information, including code, numbers, and descriptors, be sure to check out our website.

We move on to proposals to support rural hospitals. The CAP supported the initiative to pay for resident training in these areas, noting concerns of shortages for pathology in the emergency departments of many hospitals. In a letter to the CMS, the CAP expressed support for these efforts and policies like the 2024 hospital inpatient prospective payment system, which would pay hospitals directly and indirectly for graduate medical education. In addition, the CAP called for the creation of opportunities and incentives to expand the pathology workforce. The CAP remains committed to building the medical workforce, especially as projected shortages are expected to dramatically impact the American healthcare system.

We end the day with efforts for cytotechnologists to change the name of their specialty. The Commission on Accreditation of Allied Health Programs is considering changing the name for the profession from cytotechnologists to cytologists. Despite strong opposition from the CAP, the commission is moving forward with the proposal. Among many concerns, perhaps the greatest is that the change will create confusion throughout the healthcare system. Some may mistake this profession for a physician, and in fact, the term cytologist in Europe is used to describe the practice of non-gynecological cytopathology.

In a public statement, organizations that have supported the name change cite, scope of practice expansion as a reason, quote, "as the scope of practice expands, it's important to enhance the curriculum of the cytology programs with more research, molecular diagnostics, and management training." The CAP will continue to oppose this change and will call on its membership to take action in the future.

That's all for this edition of the CAP Advocacy Recap. Thank you so much for listening. For more information on any of the stories that you heard today, please visit our website, subscribe to our newsletter, and follow us on our Twitter @CAPDCAdvocacy. Once again for CAP Advocacy communications, I'm Alec Bose, and we'll see you next month.