2020: A Year We Will Remember
The year 2020 was a year of superlatives but not necessarily, ones we wanted to witness: Unprecedented, unparalleled, record setting, unmatched, extraordinarily tragic. In December, CAP President, Dr. Patrick Godbey, editorialized 2020 as “The year that wouldn’t end”. I am not alone to be glad to wave goodbye to 2020, an annum horribilis that gave us a global pandemic, concatenated financial crises and laid bare racial and healthcare inequities.

Could 2021 possibly be worse? Well, it already is. The first confirmed case of SARS-CoV-2 disease was reported from Washington on 01-21-20. By 03-11-20, the WHO declared the disease a global pandemic. The numerical impacts have been staggering. There is no rational way to measure or understand the loss of life. By the end of March, 2021 the US has suffered over 30.6 million cases, losing over 556,000 lives, making COVID-19 the most prevalent cause of death, 50% greater than heart disease. A tragic comparison notes that the 556,000 COVID-19 deaths during the 14 months are > 45% higher than US battlefield deaths in World War II (291, 500 killed in over 4 years of combat).

Departments of Pathology and Laboratory Medicine have tackled building remarkable deliverables that we did not expect and for which we were not prepared. Besides risks to our personal health, major modifications in our personal and financial lives, work schedules, and many at-work operational variables, we have faced difficult pressures to deliver reliable accurate results in unimaginably short time frames. We have endured critically shortages of supplies, required cassettes, reagents, instruments, PPE, and labor. Changes in how we work required maintaining determined commitments while working hard and multi-tasking, additionally frazzled with “Death by PowerPoint” and “ZOOM fatigue.”

However, some positives emerged. The recognition and value of Pathology and the laboratories we direct has skyrocketed.

Crisis management has permitted Pathologists’ innovation, creativity, team-building and collaborative skills, even while lost in our cell phones and other virtual worlds. Genomics, proteomics, RNA sequencing are now part of our daily lexicon. Understanding the pathophysiology of COVID-19 disease has led to progressive successes in bringing up-to-the-minute laboratory testing to the fore that are the bases on which SARS-CoV-2 disease is diagnosed and treated. The COVID-19 genome, first published only in January 2020, has happily led to the exceptionally rapid development and trials of safe and effective COVID-19 vaccines! Specific or curative anti-coronavirus therapeutics are still missing, but numerous drugs are in development based on discoveries of the viral molecular biology. Akin to other viruses, COVID-19 mutants have also inevitably emerged, bringing into question the effectiveness of immune therapies and vaccinations.

Such persistent uncertainties add to the plague. So stay tuned, stay resilient, do your best to mitigate burnout. New problems, predictably disguised as opportunities, will likely make life in the laboratory a persistent juggling act.

Also, Pathologists are consummate educators. In all our institutions and communities, I encourage each of you to take initiatives as educators during the COVID-19 pandemic. I’d estimate most ISP members likely "trust science". But not all members of society remain informed of the "science", with a considerable fraction of individuals having COVID-19 "vaccination hesitancy". As trusted and expert messengers, Pathologists can play important voluntary roles in educating the public. Take the opportunity. What do we have to lose?

I look forward to working with all the current, past and prospective ISP members and Board members. I welcome dialogue from the membership concerning what’s on your mind on any issues in addition to advocacy topics. The College of American Pathologists has recently taken an initiative to have quarterly Zoom meetings with state Pathology society leaders. For ISP members who are also CAP Fellows, I encourage you to keep abreast of and support CAP’s national level advocacy initiatives.
ISP-Chicago Pathology Society (CPS) Legislative Update

The Annual ISP-CPS Legislative Update was held last week with more than 80 in attendance. Dr. Jonathan L. Myles, MD, FCAP, Chair of the CAP Council on Government and Professional Affairs presented CAP Update: Advancing Pathology Through Advocacy and Laboratory/Member Programs. He spoke to the many ways CAP is helping influence public policy and amplifying pathology’s voice in Washington and in Illinois. CAP has advocated to fight the Medicare Cuts to pathology with its shift to reimbursement to Primary Care. In late 2020 CAP’s Advocacy Campaign resulted in legislation to mitigate this cut, resulting in up to $85 million more for pathologists in 2021. Dr Myles said “What was once a -9% overcut to pathologists in 2021 was mitigated and reduced to -2%–3%”. Below is the impact of this action on 2021 Fees for Top-Billed Pathology Services.

Impact of Action on 2021 Fees for Top -Billed Pathology Services

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>2020 Pay</th>
<th>2021 Pay Before Congressional Action (% change from 2020)</th>
<th>2021 Pay After Congressional Action (% change from 2020)</th>
<th>2021 % Change before/after Congressional Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>88305 - 26</td>
<td>Tissue exam by pathologist</td>
<td>$39.34</td>
<td>$34.68 (-11.85%)</td>
<td>$37.66 (-4.22%)</td>
<td>8.65%</td>
</tr>
<tr>
<td>88305</td>
<td>Tissue exam by pathologist</td>
<td>$71.46</td>
<td>$66.76 (-6.58%)</td>
<td>$71.53 (0.10%)</td>
<td>7.14%</td>
</tr>
<tr>
<td>88341 - 26</td>
<td>Immunohistochemistry antibody add 1 slide</td>
<td>$29.59</td>
<td>$26.25 (-11.29%)</td>
<td>$28.61 (-3.32%)</td>
<td>8.99%</td>
</tr>
<tr>
<td>88342 - 26</td>
<td>Immunohistochemistry antibody 1st stain</td>
<td>$36.61</td>
<td>$32.41 (-11.95%)</td>
<td>$35.24 (-4.27%)</td>
<td>8.73%</td>
</tr>
<tr>
<td>88307 - 26</td>
<td>Tissue exam by pathologist</td>
<td>$86.62</td>
<td>$76.48 (-11.71%)</td>
<td>$83.39 (-3.73%)</td>
<td>9.04%</td>
</tr>
<tr>
<td>88313 - 26</td>
<td>Special stains group 2</td>
<td>$12.63</td>
<td>$11.34 (-10.21%)</td>
<td>$12.21 (-3.33%)</td>
<td>7.67%</td>
</tr>
<tr>
<td>88304 - 26</td>
<td>Tissue exam by pathologist</td>
<td>$11.91</td>
<td>$10.37 (-12.93%)</td>
<td>$11.51 (-3.36%)</td>
<td>10.99%</td>
</tr>
<tr>
<td>88312 - 26</td>
<td>Special stains group 1</td>
<td>$27.79</td>
<td>$24.63 (-11.37%)</td>
<td>$26.87 (-3.31%)</td>
<td>9.09%</td>
</tr>
<tr>
<td>88112 - 26</td>
<td>Cytopathology cell enhance tech</td>
<td>$28.87</td>
<td>$25.60 (-11.33%)</td>
<td>$27.91 (-3.33%)</td>
<td>9.02%</td>
</tr>
<tr>
<td>88311 - 26</td>
<td>Decalcify tissue</td>
<td>$12.99</td>
<td>$11.34 (-12.70%)</td>
<td>$12.56 (-3.31%)</td>
<td>10.76%</td>
</tr>
</tbody>
</table>

He further reported on CAP’s State Pathology Society initiative and its support in membership and advocacy areas. Illinois legislature is considering a bill (HB1779) to remove prior authorization for biomarker testing for advanced or metastatic stage 3 or 4 cancer. Similar legislation has been introduced in California, Massachusetts and other states.

PLEASE DONATE to the ISP ADVOCACY FUND

ISP continues to monitor legislation in Illinois, this is the season of Bills. We are supporting the HB1779 to remove prior authorization for biomarker testing for advanced or metastatic stage 3 or 4 cancer. We are standing ready to challenge CIGNAs non payment for Clinical Pathology to be initiated in May. We need your help in pursuing these goals. Three ways to donate:

1. FAX donation form with credit card information back to Pamela Cramer, Margaret Jones (Executive Director, Financial Manager ISP); 1.866.413.1088 or scan to email at pcramer@illinoispathology.org
2. PHONE 847-441-7200
3. MAIL CHECK -- with donation form to ISP, 902 Ash Street, Suite 200, Winnetka, IL 60093

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