



## 2021 APC ADVOCACY PRIORITIES

### **Practice & Management:**

1. Address COVID testing policies as they relate to academic labs, i.e. supplies, funding, payment models, such as CMS incentives for 48-hour turnaround times.
2. Support the work of CAP and ASCP on pathology services reimbursement, where aligned with APC.
3. Monitor movement on LDT regulation by the FDA and, in cooperation with AMP and other stakeholders, take action to ensure that it is not resurrected.
4. Advocate against legislation that allows the patenting of products of nature.
5. Comment to the FDA on developing guidance regarding artificial intelligence and machine learning.
6. Seek to engage the new administration to understand the value of academic labs in frontline care and rapid response (a critical part of the national laboratory network).

### **Research:**

1. Support efforts by ASIP, AAMC, AACR and FASEB to advocate for:
  - a. replenishing NIH funds that were used to pay for fixed costs during the COVID shutdown; and
  - b. increasing the NIH salary cap.
2. Advocate with AAMC and AAIM to increase the pipeline of physician-scientists.

### **Undergraduate Medical Education (medical school):**

1. Advocate through the AAMC and the AMA (LCME Co-Secretariats) on the importance of medical students' exposure to anatomic pathology and laboratory medicine throughout medical school to enable students to apply foundational concepts to clinical practice.
2. Develop programs to educate and mentor medical students about careers in pathology to broaden their understanding of the role of pathologists and develop our future workforce.
3. Increase pathology's representation on national and institutional committees that are engaged in curricular development.

### **Graduate Medical Education (residency and fellowship):**

1. Advocate for clear immigration policies that enable and encourage foreign medical graduates to seek and complete residency training in U.S. programs.
2. Support efforts by CAP, AAMC, AMA, and ABP to develop accurate data on the numbers and diversity of currently practicing pathologists.
3. Work with AAMC, CAP, HRSA and health system leaders toward increasing the number of pathology residency positions commensurate with legislated increases in CMS-funded positions.
4. Collect data on unexpected fellowship openings and resident concerns about the fellowship recruitment process to inform recommendations for systemic changes.