THE ACC LEGISLATIVE CONFERENCE AND WHAT I LEARNED: PERSPECTIVE FROM A FELLOW-IN-TRAINING

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September 2016: How I got interested: As a clinical cardiology fellow at Cedars-Sinai Medical Center in Los Angeles, my days are a potpourri of seeing sick patients in the hospital, advising risk factor modification in clinic, and performing catheterization and TEE procedures. Like most of my peers, I do not usually slow down or have the environment to question how the recent health care reform policies
will shape my ability to practice post-graduation. While I’ve heard of acronyms like MACRA (Medicare Access and CHIP Reauthorization Act), CMS (Centers for Medicare and Medicaid Services) and SGR (sustained Growth Rate), I felt uneducated and confused about the details even after reading CMS.gov. After hearing the enthusiastic reviews from 3 co-fellows-in-training (or FITs, to keep up with all the acronyms) who attended the ACC Legislative Conference in Washington D.C. last year, I decided to get proactive and check it out for myself.

What I learned: The ACC Legislative Conference takes place every September, a wonderful time of year to visit Our Nation’s Capital. Approximately 400+ ACC members, each representing their home state, gather for 3 days. The first 2 days are focused on discussing the details of how MACRA will end the previous SGR formula for determining Medicare payments for physician services via the MIPS vs. APMs pathway with a reporting start date of January 2017. The CMS Deputy Director spoke to the audience and tried to answer numerous concerns. However, given the CMS has not provided us with the details of this new scoring system it’s hard for the audience to feel comforted. The third day is spent campaigning on the Hill with our state chapter members. We lobbied at the offices of California Senators and Representatives to advocate for Congressional oversight on how CMS executes these changes and an open dialogue between CMS and ACC on what these profession-specific changes should be to avoid detracting from our patient care.

How I benefited: As a FIT member, I was enthusiastically welcomed by established ACC members since we shared an interest to advocate for our profession. This ended up being a great networking opportunity with chapter members all over California and beyond. I felt significantly more confident in providing a basic overview of MACRA and its key issues that will affect my practice as a cardiologist in the future. I also learned an important lesson: our work doesn’t stop from one meeting with one representative. Rather the relationship we have is built on repeat exposure: meaning we need to keep these campaigning efforts alive both on a state and national level by staying active FIT members.