

## LEADERSHIP PAGE



# Essentials of Advocacy



## What Is Behind the Curtain?



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Advocacy should not be confusing. Simply, it is “the act or process of supporting a cause or a proposal” (1). At the American College of Cardiology (ACC), advocacy is closely aligned with achieving the College’s overarching mission to transform cardiovascular care and improve heart health. Both big and small interactions with Congress, federal government agencies, state legislative and regulatory bodies, private insurers, and other policy-making groups can have important impacts.

It is the ACC’s belief and vision that everyone can be an advocate. Although some believe you have to be a “policy wonk” to be an advocate, or you have to be politically minded to effectively advocate for your profession and your patients, we have seen successful advocacy begin at the grass-roots level. Peeling back these assumptions about what advocacy is—and who advocates are—and engaging more members in advocacy is important. It takes advocates from all backgrounds, practice types, and experiences to truly make an impact and bring about changes and policies that benefit patients and the profession.

When it comes to what to advocate for—or what to work on changing—the College must be strategic. There is a long list of challenges and opportunities in health care, so prioritizing where the College and its members can have the greatest impact is crucial to success. Current ACC advocacy priorities are focused on: 1) creating a value-driven health care system; 2) ensuring access to care and cardiovascular practice stability; 3) promoting the use of clinical data to

improve care; 4) fostering research and innovation in cardiovascular care; 5) preventing cardiovascular disease and improving heart health; and 6) engaging members to shape health policy.

To meet these priorities, members and staff work closely together. The ACC is supported by 5 advocacy staff teams: Congressional Affairs, Medicare Payment and Coverage, State Government Relations, Payer and Care Delivery Policy, and Research and Innovation Policy. These staff teams work in concert with the Health Affairs Committee to guide and implement the strategies and tactics associated with achieving these goals. Other member groups actively engaged in advocacy include the ACC Political Action Committee, Partners in Quality Subcommittee, Coding Task Force, and Population Health Management Task Force, as well as ACC’s Board of Governors and chapters, councils, and sections.

In addition to establishing advocacy priorities, the Health Affairs Committee plays an important role in developing ACC policy positions. Policy issues come to the committee through a variety of channels. For example, ACC members can request that the Health Affairs Committee consider advocacy around a specific issue by working through their respective member section. At the state level, ACC chapters play a major role by working with ACC staff to bring local issues before the committee. Once an issue comes to the Health Affairs Committee, the College decides to engage in policy action by assessing:

- **Urgency:** Is there a time frame for action? What is the seriousness of the issue?
- **Impact:** How are patients and/or members affected?
- **Alignment:** Does this relate to the strategic plan or other ACC priorities?
- **Feasibility:** Are policymakers interested? Are there natural allies or opponents? Can the ACC make a difference in this space?
- **Resources:** Do we have the necessary expertise to be credible? How will this impact member volunteer and staff time?

Once an issue is identified, the question becomes “how do we make a difference?” The answer lies with engaging ACC members—many of whom are on the front lines providing patient care. Opportunities for advocacy are varied and can be as easy as signing a petition or flying to Washington, DC, to take part in National Lobby Day. All year long, ACC members are inviting legislators into their practices to witness firsthand how the cardiovascular care team provides patients with high-quality, cost-effective care by employing state-of-the-art technology, health care data, and professional training. They join with their local ACC chapters for lobby days at state capitols. By the hundreds, they make their way to Heart House in Washington, DC, each year to attend the ACC’s annual Legislative Conference and visit Capitol Hill to meet directly with their representative to voice the ACC’s priorities. They use the power of technology to quickly make their voices heard in real time to send letters and tweets to legislators through the Advocacy Action Alert System (2). They participate as members of the College’s Political Action Committee, which increases the political power and reach of the College and supports federal candidates who back cardiovascular-friendly legislation and policy.

Local, state, and national examples may help illustrate the different forms that advocacy can take in health care and cardiology.

1. **Local:** In Mississippi, the Recovery Audit Contractor (RAC) audited a number of practices, including that of ACC members and member leaders, and the practices were instructed to repay for multiple positron emission tomography perfusion studies. The RAC was reviewing these using the National Coverage Determination for viability studies. Despite the practice contesting the RAC’s error, the practice was not able to make headway to get the issue resolved. However, through ACC contacts, the state medical association, and ultimately the medical director of the region’s Medicare Administrative Contractor (MAC), the issue was settled. The

MAC changed its instructions for RAC audits of positron emission tomography. This will benefit all members in this region and likely in all MAC regions.

2. **State:** In Indianapolis, Indiana, the ACC Indiana Chapter held an annual legislative day, during which more than 20 members met with state lawmakers to discuss important issues facing cardiovascular practice and patients. Members prioritized prior authorization reform, Tobacco 21 legislation, and legislation improving access to nutritious food. The event ended on a high note with the unanimous passage of a prior authorization bill by the Indiana Senate.
3. **National:** On the national level, in response to the high prevalence of cardiovascular disease in South Asian communities in the United States, ACC Fellow-in-Training Sandeep Krishnan, MD, brought the South Asian Heart Health Awareness and Research Act of 2017 to the College’s Health Affairs Committee. The ACC supported the bill, which would create federal grants for research in at-risk populations. Dr. Krishnan went on to establish Hill relationships and devised a Congressional briefing focused on the issue. In Dr. Krishnan’s stead, an ACC Fellow-in-Training from the University of Washington, Jill Steiner, MD, participated in the Congressional briefing and spent her time on the floor educating lawmakers and their staff about the much greater risk of heart disease and early heart attacks before the age of 50 years among South Asians.

Some of the important issues that the ACC is tackling include:

- The implementation of the Quality Payment Program created under the Medicare and CHIP Reauthorization Act, which continues to have profound impacts on health care delivery in the United States.
- The continued shift toward a value-based health system is driving more clinicians toward participation in alternative payment models (APMs), but knowing how and when to participate in an APM can pose significant challenges. The ACC’s newly launched APM Framework is the College’s guide for members navigating the APM landscape (3).
- Reducing the burden of prior authorization on practices (4). The ACC’s Prior Authorization Reporting Tool was developed to collect members’ data on inappropriate cardiovascular testing and procedure request denials by insurers and prior authorization vendors, and it will primarily serve as a process for the ACC to monitor and identify inconsistent denials by region, payer, prior authorization vendor, and modality.

Advocacy is not for an elite group. Advocacy is for everyone, and it is fun. Begin by engaging with your local ACC chapter and grassroots state advocacy. Register to attend the College's 2018 Legislative Conference, which will be held September 30 to October 2, 2018, in Washington, DC. Host your legislator in a practice visit, meet your legislator in district, or meet with them in Washington, DC. It is critical that ACC members stay informed on issues impacting patient care and practices every day. As such, the College works diligently to provide members with engaging and dynamic educational resources.

We also encourage you to sign up for the ACC Advocate newsletter (<https://www.acc.org/my-acc/my-communication-preferences>) to get the latest ACC advocacy news as it occurs.

Take the opportunity to communicate through your chapters, sections, and leadership. Support your cause and advocate.

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## REFERENCES

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