

Effectively Communicating the Value of Clinical Laboratory Services

Schmidt Public Affairs





American
Clinical Laboratory
Association

Objectives, Strategy, Platforms

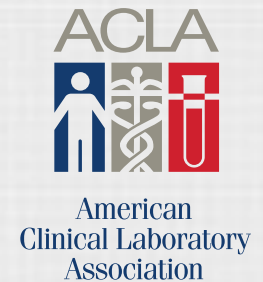
ACLA Communications Objectives



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1. Increase **visibility** of ACLA and its messages among the media
2. Establish ACLA as the **leading voice** for clinical labs among key health policy audiences.
3. Increase understanding of the **value** of lab services to patients, physicians, and the healthcare system.

ACLA Communications Strategy



- **Educate** health policy reporters through one-on-ones & frequent follow-up
- **Engage** third parties to validate the lab value story
- For issues affecting specific communities, start with trades & expand to mainstream
- Establish online **echo chamber** through website & social media

Key Platforms

- Earned Media
 - *Health Policy*
 - *Trades*
 - *Coalitions/Third Parties*
- Paid Media
- Digital
 - *Website*
 - *Social Media*



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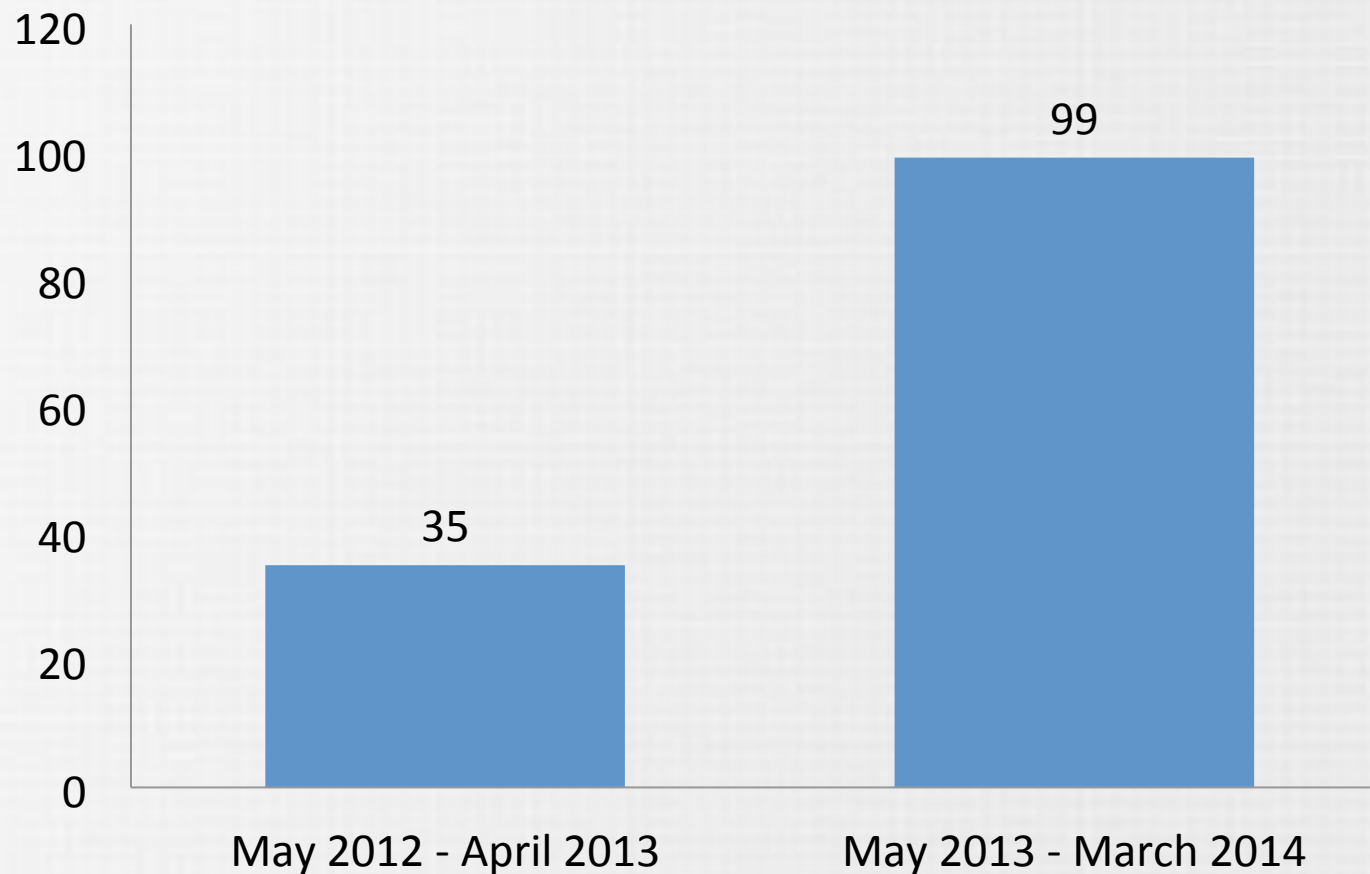
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Results

Results: *Earned Media*



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■ Articles, Op-eds & Blog Posts Mentioning ACLA

Results: *ACLA as Leading Policy Resource*



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CQ Healthbeat: Clinical Labs Voice 'Deep' Concern With Clinical Lab Fee Schedule

GenomeWeb: ACLA President Alan Mertz Discusses Citizen Petition Against FDA Regulation of LDTs

Inside Health Policy: Labs Relieved CMS Halted Plan to Slash Pay for Diagnostics

Pathology Blawg: ACLA opposes TRICARE move to stop paying labs for genetic tests

Bloomberg BNA: Lab Industry Says Change in Fee Schedule Would Cut Payments Upwards of 75 Percent

Modern Healthcare: Labs say CMS penalties still too severe on 'proficiency testing'

Results: *ACLA as Leading Policy Resource*



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FOR IMMEDIATE RELEASE
February 27, 2014

ACLA Signs Clinical Labor Oppose Addition

Clinical Labs Hit Hard

(Washington, D.C.) – In letter to U.S. Senate today, a coalition of device manufacturers urged Congress to oppose Medicare cuts to clinical laboratory providers' ability to serve the population.

"We urge lawmakers to reject reimbursement," said Alan Mertz, ACA (ACLA), one of the 42 organizations in the Coalition. "Laboratories have additional across-the-board cuts critically important diagnostic informed decisions."

Key congressional committees Growth Rate (SGR), which se beneficiaries. The coalition is board Medicare cuts to clinical

The Coalition letters point out Medicare cuts in recent years represents less than two per


FOR IMMEDIATE RELEASE
February 4, 2014

A Statement from the American Clinical Laboratory Association

WASHINGTON, DC – On behalf of the nation's leading national and regional including federal and state government Alan Mertz issued the following

The ACLA today expressed its support for the President's FY 2015 budget, which will permit patients to request medical information, including more informed decisions. HHS information for the first time.

ACLA applauds HHS and the clear, unequivocal statement of previously limited patient access

ACLA cautions patients, however, their physicians and health care test results. While laboratories encourage patients to work closely understand the meaning of what especially important for more who may have difficulty understanding

Because laboratories typically specimens from the physician's the request has a right to that protecting the confidentiality of


FOR IMMEDIATE RELEASE
March XX, 2014

ACLA and On CMS Rule Allow

CMS Estimates 23,000 Jobs

WASHINGTON, DC – In order to laboratory professionals regarding Medicare Services (CMS) that would reporting on the diagnostic industry Devil is in the Details. What Labs

"ACLA supports the patients' right thousands of labs will be responsible procedures to ensure patient privacy look forward to partnering with G2 information to clinical labs across the

Effective October 6, 2014, clinical Accountability Act (HBPAA) will more restrictive laws in some states ambiguity and confusion for health within 30 days and that results are

The webinar, scheduled for March clinical laboratory professionals have Answers will be provided by one of well as a legal expert in clinical lab

Questions expected to be addressed

- How does a lab authenticate its liability if labs provide results
- Will labs need to offer any information
- Does the rule apply to reference
- Will labs have to provide accurate
- Are there any exceptions for patients for providing the test


FOR IMMEDIATE RELEASE
March 4, 2014

ACLA on President's FY 2015 Budget: The Bad: \$7.9 Billion in Medicare Cuts to Clinical Laboratory Services Will Compromise Access to Patient Information Critical to Medical Decision-Making

The Good: Proposal to Exclude Anatomic Pathology from IOAS Exemption Controls Utilization, Reduces Medicare Costs

(Washington, DC) – The American Clinical Laboratory Association (ACLA) today pointed to both beneficial and harmful provisions in the President's FY 2015 budget: drastic funding cuts that would compromise the continued delivery of high quality clinical lab services to Medicare beneficiaries and a proposal that would preserve integrity in the lab services industry. ACLA urged congressional budget leaders to oppose provisions that would reduce reimbursement for clinical laboratory services for Medicare beneficiaries by an additional \$7.9 billion over ten years, amounting to an overall 14% funding reduction. However, ACLA is praising a provision recommending the removal of anatomic pathology (AP) from the Medicare in-office ancillary services (IOAS) exemption to the self-referral law.

The proposed budget includes reductions, on top of cuts already scheduled under current law, and disregards that the Centers for Medicare & Medicaid Services is already moving forward to update all rates within the Clinical Laboratory Fee Schedule (CLFS) based on "technological changes". Clinical laboratory testing represents less than 2 percent of all Medicare fee-for-service spending, yet it has been subjected to significant payment rate freezes and cuts over the last two decades—especially in the past three years. In addition to a two percent cut as a result of the FY 2013 short-term Medicare Sustainable Growth Rate (SGR) patch (representing 15 percent of the offset to pay for the SGR deal), and another two percent through sequestration, the Affordable Care Act contains an annual 1.75% cut to the CLFS, that is scheduled to end in 2015. The President's budget, however, would extend that cut each year beginning in 2016 and ending in 2023, compounding cuts upon cuts.

"Seventy percent of physician clinical decisions are based on laboratory results, many of which are critical to improving the quality of health care and lowering health care costs," said Mertz. "The impact of these proposed cuts will not only reduce access to lab services but severely stymie innovation, including the advancement of molecular diagnostics, which have ushered in the era of personalized medicine and revolutionized the care and treatment of many chronic and life threatening diseases, including cancer."

While ACLA strongly opposes the additional cuts to clinical laboratory services in the proposed budget, it does applaud the inclusion of a provision to close the IOAS loophole in the Stark law. A July 2013 GAO report found that self-referral for anatomic pathology services increases utilization and unnecessarily drives up Medicare spending. As a member of the Alliance for Integrity in Medicare (AIM) and supporter of the AIM recommendation to remove AP from the IOAS exemption, ACLA noted that excluding AP, in addition to advanced diagnostic imaging, radiation therapy and physical therapy, would save an estimated \$6 billion over 10 years according to the President's budget.

"The exclusion of anatomic pathology in the IOAS exemption is the right policy and one that will continue to foster integrity in the field of clinical laboratory services," said Mertz. "Untargeted and broad cuts to clinical

Contact: Rebecca Reid
410-212-3843

Results: *Issue Positioning* *Inside Beltway*



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Roll Call

Medicare 'Fixes' Are Penny-Wise, Pound-Foolish | Comment

By Alan Mertz
10/30/13

Our leaders in Washington too often have plagued the nation's Medicare

Unfortunately, many of these changes have lowered the quality of health care for Medicare beneficiaries.

Clinical laboratory services have been the target of "pay-fors" later this year.

These innovative, vital services have enabled "precision" medicine, and allow physicians to treat diseases ranging from diabetes to heart disease, the less probability of unnecessary complications that waste precious health care dollars.

Advances in clinical laboratory tests and the resulting information so that physicians can make the most appropriate course of treatment have been mere science fiction even 20 years ago.

Yet payments for clinical lab services face double-digit cuts going forward. Medicare spending annually. Yet this will impact physicians' decisions. For Medicare beneficiaries, further cuts to lab services will mean even trips — often by ambulance — to a hospital. Simply put, cutting Medicare payments will contribute to high health care costs in the future.

THE HILL

Lab testing a Medicare cost saver

By Alan Mertz
11/14

Senator Ron Wyden (D-Ore.), the new chairman of the Senate Finance Committee and a longtime proponent of improving chronic disease care, is in a position to play an important role in reforming Medicare.

Wyden has long advocated a Medicare program that would feature improved care coordination for chronic disease, which would save lives and improve the quality of life for beneficiaries, while saving Medicare resources.

Effective management and reimbursement for chronic disease care is a continuing challenge for Medicare. More than 70 percent of Medicare dollars are spent on a mere 14 percent of beneficiaries who are living with six or more chronic conditions.

This area is ripe with potential savings that, with Wyden's leadership and support, we can soon begin to capture.

A vital component of early chronic disease care that can save precious Medicare dollars is the increased utilization of diagnostic lab services.

Clinical laboratory testing plays a pivotal role in identifying chronic conditions, accurately diagnosing a particular disease and helping clinicians devise the most appropriate course of treatment to manage the disease. The value of these services cannot be overstated — in fact, 70 percent of all physician decisions today are informed by clinical lab results, yet lab services make up less than 2 percent of Medicare spending.

Chronic disease — a chronic condition diagnosed in thousands of patients every year — is a prime example of where early clinical laboratory tests and effective care coordination can greatly reduce costs and improve outcomes. Many of these patients only learn of their condition when



Results: *Issue Positioning* *Outside the Beltway*



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Miami Herald Other Views

MEDICARE

Fee changes take a toll on lab testing industry

Like 268



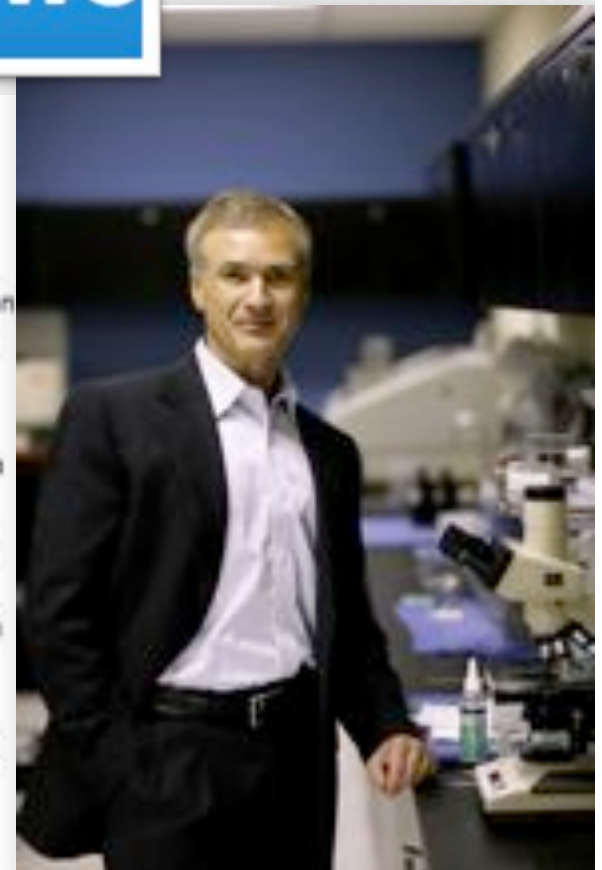
BY DOUG VANDORT
DVANDORT@MEDGENOMICS.COM

Many healthcare providers agree that Washington has rightfully gotten serious about unsustainable cost growth in healthcare and, specifically, in Medicare.

Yet when cost cutting is taken to its extreme, with proposals that would result in below-cost reimbursement for Medicare providers, policies become penny-wise and pound-foolish.

As the head of a clinical laboratory specializing in cancer testing for more than 20,000 patients in south and central Florida, recently proposed efforts to reduce payments for critical diagnostic lab testing that Medicare cancer patients rely on to receive life-saving treatment are deeply troubling.

This July the Centers for Medicare & Medicaid Services (CMS), the federal agency that manages



Results: *Coalitions/Third Parties*



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Protecting Patient Access to Personalized Medicine



Breast Cancer Patients Deserve Better: Policy Must Support Innovation

Written By : Phyllis Greenberger on October 31, 2013



October is National Breast Cancer Awareness Month. During this time, those of us in the advocacy community take stock of the millions of lives that have been affected forever by this dreadful disease. Breast cancer ranks second as a cause of death in women. Each year, about 230,000 women, and more than 2,000 men, receive a diagnosis of invasive breast cancer.

Cancer survivors, caregivers and doctors tell us that the most powerful weapons against breast cancer are early detection and the elimination of "trial and error" therapies. This is accomplished by pinpointing the most effective treatment options immediately after diagnosis.

Results: *Coalitions/Third Parties*



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Working Together to Ensure *Policy* Keeps Pace with *Innovation*

Advances in laboratory medicine have transformed clinical care and the patient experience over the past century. Every patient should have access to the best laboratory testing available, and the latest in diagnostic innovation and advancement. America's clinical labs are proud to work with the Society for Women's Health Research and other community partners to ensure healthcare policy keeps pace with innovation.



Learn more at acla.com

Case Study: *TRICARE*



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Daily  Press

ABQJOURNAL.COM

ArmyTimes

Military.com

AirForceTimes

shreveporttimes.com
A GANNETT COMPANY

SunHerald.com
BILOXI-GULFPORT AND THE MISSISSIPPI GULF COAST

SIERRA VISTA
THE HERALD

STARS  AND STRIPES.

POLITICO

DEMOCRATIC
UNDERGROUND.COM

THE NEWS TRIBUNE

THE
PATHOLOGY
BLAWG



NATIONAL
MILITARY FAMILY
ASSOCIATION

CORPS
MarineTimes

Montgomery Advertiser
A GANNETT COMPANY

THE
LEMOORE NAVY NEWS

Military
Times

NavyTimes

Case Study: **TRICARE**



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RICHARD BURR
U.S. SENATOR NORTH CAROLINA

PRESS OFFICE PRESS RELEASES

February 28, 2014 - 1:10 PM

Senators Express Concerns Over Recent Changes to TRICARE

[Share This]

WASHINGTON, D.C. — Last evening, U.S. Senators Richard Burr (R-NC), Kay Hagan (D-NC), James Inhofe (R-OK), Barbara Mikulski (D-MD), Saxby Chambliss (R-GA) and Kirsten Gillibrand (D-NY) sent the following letter to Secretary Hagel, regarding a change to TRICARE's reimbursement policy, excluding more than 100 different Molecular Pathology Laboratory (MoPath) tests and other Laboratory Developed Tests (LDTs) with no notice to beneficiaries or to health care providers.



Am Clinical Lab Assn @ACLALabs · Mar 3

.@SenatorHagan Thanks for concern re:TRICARE lab coverage policy. #Milfam shouldn't have to pay OOP for certain tests ow.ly/ubpWs

Collapse

↩ Reply ↻ Retweet ★ Favorite ... More

RETWEETS

3



Case Study: *TRICARE*



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 **NatiMilitaryFamAssoc**
@military_family



 Follow

ICYMI: #TRICARE isn't covering certain lab fees anymore: ow.ly/tNpJt

 Reply  Retweet  Favorite ... More Assign To

RETWEETS

3



2:20 PM - 22 Feb 2014

#TRICARE

#milhealth

#milfam

#BudgetBattle



Retweeted by NatiMilitaryFamAssoc



Am Clinical Lab Assn @ACLALabs · Mar 3

Thanks @SenatorBurr for concern re: TRICARE lab coverage policy. #Milfam shouldn't have to pay OOP for certain tests. ow.ly/ubpl6

Expand

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Case Study:

Potential Cuts to SNF Labs



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McKnight's
Long-Term Care News & Assisted Living

**“Pay Cuts Could Wipe Out
Labs, Hurt Nursing Homes”**



James M. Berkman
@LTCEditorsDesk

#Labs and #nursinghomes have big stakes in
#docfix solution. mcknights.com/pay-cuts-could... @ACLA labs @aculab

“The worry is Congress is looking to trim the big guys and won't even realize they'll wipe out the smaller guys.”

**-Peter Gudaitis,
President of Aculabs**

Results: *New Website*



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American Clinical Laboratory Association



Issues and
Advocacy



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Only



Associate
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What's New

[About ACLA](#)

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[Events](#)

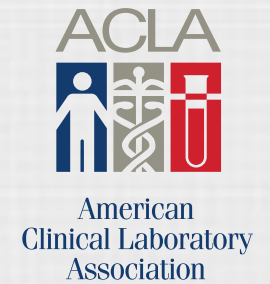
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Partners in Promoting Health

President's Message

Results: *New Website*



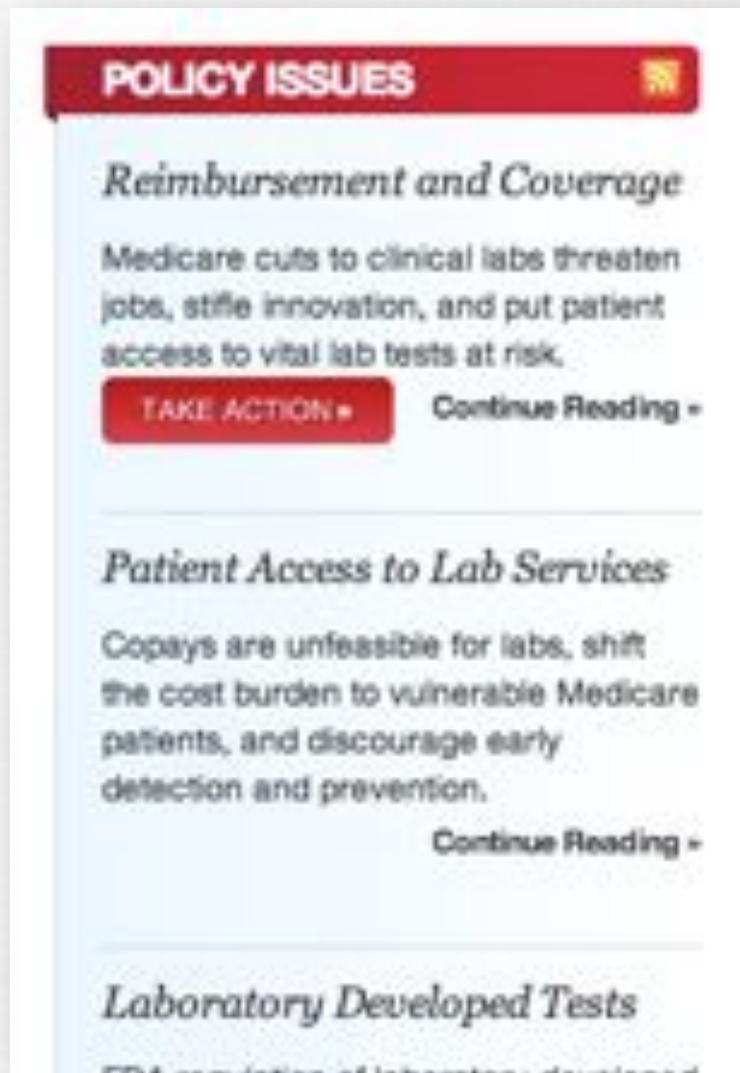
New homepage sliders!



Results: *New Website*



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Policy issues featured
on homepage

Results: *New Website*



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New “Value of Lab Testing” section

VALUE OF LAB TESTING



Life-Saving Medicine Starts Here

More Informed Medical Decisions

Clinical laboratory tests guide more than 70% of medical decisions made by healthcare providers. At a time when evidence-based laboratory medicine (EBLM) is increasingly used by healthcare professionals, the information provided by clinical lab tests is helping to diagnose, treat, and monitor patients as accurately and quickly as possible.

Lower Costs

Clinical laboratory tests save time, costs, and lives by enabling early detection and prevention of disease. More than 7 billion clinical lab tests are performed in the U.S. each year, providing critical data for a relatively small expenditure.

Results: *New Website*



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Home Member Log In Contact Us



SEARCH RESULTS FOR: TRICARE

• Posts 8 Results

"No rationale" for Tricare's refusal to cover genetic tests

<http://www.acla.com/no-rationale-for-tricare-refusal-to-cover-genetic-tests/>

A change in medical classifications last year has left clinical laboratories across the U.S. carrying a \$10 million tab for Tricare. Tricare beneficiaries have not been billed for certain physician-ordered tests they have received at clinical laboratories since Jan. 1, 2013 —

• Congressional Letter to Secretary Hagel about TRICARE

<http://www.acla.com/congressional-letter-to-secretary-hagel-about-tricare/>

• ACLA: TRICARE Decision to Deny Coverage of Molecular Diagnostic Tests Compromises Standard of Care for Military Families

<http://www.acla.com/acla-tricare-decision-to-deny-coverage-of-molecular-diagnostic-tests-compromises-standard-of-care-for-military-families/>

(Washington, D.C.) — In a statement to the House Armed Services Subcommittee on Military Personnel addressing a hearing on the Defense Health Agency (DHA), the American Clinical Laboratory Association (ACLA) today expressed strong opposition to TRICARE current policy of non-coverage for molecular

• Representative Sample of Tests No Longer Covered by TRICARE

<http://www.acla.com/tests-no-longer-covered-by-tricare/>

Note: this is not a comprehensive list. For additional reading on this issue, please see the following articles: "DHA operations chief v some relief from surprise lab fees," Stars and Stripes, Feb. 6, 2014 "Some lab fees soon will be billed

• DHA operations chief vows some relief from surprise lab fees

<http://www.acla.com/dha-operations-chief-vows-some-relief-from-surprise-lab-fees/>

Army Maj. Gen. Richard W. Thomas, newly assigned as chief medical officer and director of healthcare operations for the new Defense Health Agency (DHA), acknowledges that some Tricare patients and their civilian physicians face lab fee challenges that the DHA ne

Faster &
easier
searches

Results: *New Website*



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No more PDF-only content: Adding news items as posts will help site perform better on search engines

The screenshot shows a Google search for 'acla'. The search bar at the top contains 'acla' and a search icon. Below the search bar, there are tabs for 'Web', 'Videos', 'Images', 'Shopping', 'Maps', 'More +', and 'Search tools'. The search results show 'About 375,000 results (0.31 seconds)'. The first result is for the 'American Comparative Literature Association' with the URL 'https://www.acla.org/'. The second result is for the 'American Clinical Laboratory Association' with the URL 'www.acla.com/'. To the right of the search results is a map showing the location of the ACLA office at 1100 New York Ave NW, Washington, DC 20005. The map includes a street view and a 'See photos' button. Below the map, the text 'American Clinical Laboratory Association (ACLA)' is displayed.

Results: *New Website*



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Newsletter and social media integration

RECENT TWEETS



ACLA addresses Medicare reimbursement challenges at 2014 annual meeting:

<http://t.co/v1F42YYxC6>

2 hours ago

Welcome clinical lab advocates to **#ACLA14!** We're glad you are here in DC to learn, network, strengthen & advocate for the industry!

4 hours ago

STAY INFORMED

Sign up for email updates on news and issues affecting the clinical laboratory industry.

Your Email

SUBSCRIBE ►

Results: *Social Media*



Michael Burgess via American Clinical Laboratory Association

Yesterday I published an oped on how genomic testing will change the face of medicine. It's going to be a very exciting time to be a doctor



Genomics opens a bright new world
thehill.com

Genomic technology is already saving and improving lives of patients with leukemia, breast cancer, HIV and heart disease.

Like · Comment · 32 9 1 · November 20 at 11:21am ·

- **5,425%** - Increase in ACLA's Twitter following since May 2013
- **927,917** - Number of Facebook users who have seen ACLA's content

Using Social Media to Build Online Influence



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A number of influential media, patient groups, and third party organizations are now following ACLA on social media:



AdvaMedDx



Nate Weixel,
Reporter for
Bloomberg BNA



**National Patient
Advocate
Foundation**



**ARUP
Laboratories**



**College of
American
Pathologists**



**Genomic
Health**



**Mayo Clinic
Labs**



Judy O'Rourke,
Editor of CLP
Magazine



**Clinical and
Laboratory
Standards Institute**

Using Social Media to Expand Media Reach



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ACLA is using social media to optimize the reach and heighten the profile of its earned media pieces.

ACLA Member VanOort Op-Ed on Facebook

- 19,867 Views
- 213 Post Likes
- 7 Comments
- 241 Page Likes



Results: ***Paid Media***



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Thanks, Rep. Pascrell



For supporting
Medicare lab testing
for New Jersey seniors.

261,408 views by constituents
117 clicks to ACLA press release

Thanks, Rep. Gerlach



For supporting
Medicare lab testing
for Pennsylvania
seniors.

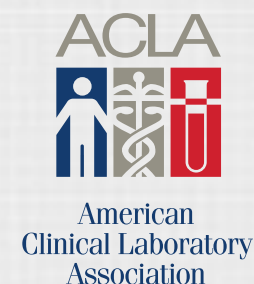
375,892 views by constituents
151 clicks to ACLA press release



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Looking Ahead

We Need Your Help



Opportunities for member engagement:

- **Media relations** - Quotes & signatories for press releases & op-eds; media interviews
- **Telling the value story** – Share your successes, innovations & developments with us
- **Social media** – Help us spread our value and advocacy messages