The President’s Page

Why Join the CSA? What CSA Membership Can Do For You!

By Linda J. Mason, M.D., CSA President

If you are reading this President’s page, most likely you already have seen the value of membership in the California Society of Anesthesiologists and are part of the membership ranks. I am sure, however, that you may be asked by nonmember colleagues, “Why join the CSA?” Thus to inform current members of what the CSA is doing for your membership dollar and to encourage your colleagues that membership in the CSA is valuable, I have chosen to dedicate this President’s Page to this topic.

The CSA is the largest component society of the ASA, currently having more than 3,600 members, approximately 10 percent of the ASA membership. The more members we have, the more delegate positions we fill in the ASA House of Delegates. This allows us to represent you better when discussions are occurring at the national level about issues such as medical liability reform, scope of practice, Medicare reimbursement, and adequate reimbursement for teaching hospitals. These issues may have special ramifications for California anesthesiologists; therefore, by having appropriate representation, consideration for our concerns is more likely to occur. The ASA Director and Alternate Director from California plus the Executive Director of the CSA keep close contact with leaders at the national level, giving our input and keeping our members informed of the issues and outcomes via this Bulletin.

But the CSA is working not only at the national level but also at the state level because state issues are just as important. Those that have become apparent in the last year are adequate compensation for anesthesiologists caring for patients under the California Workers’ Compensation Program, Medi-Cal reimbursement, balance billing concerns, and the scope of practice issues that surface in various pieces of legislation. Our lobbyists, Bill Barnaby Senior and Junior, have their fingers on the pulse of Sacramento, keeping us informed of impending “problem legislation” and giving us suggestions on how to deal with these situations. Their long-term relationship with members of the legislature and state regulatory agencies have made them a very valuable asset to the CSA. Legislative and regulatory advocacy are at the top of our priorities.

In addition we have a fine legal team consisting of David Willett and Phillip Goldberg who are actively involved with legal advocacy for the Society. Members may have access through the CSA office to our legal counsel for their general

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questions. Another member benefit is access to our peer review process for members, groups and anesthesiology departments that request an outside review of their practices. This can be facilitated by a call to Barbara Baldwin at the CSA office who will put the member in touch with the Peer Review Committee chairman.

One of the missions of the CSA is education. The Educational Programs Division organizes three top-notch educational programs per year with nationally renowned faculty at special member prices. One of our recent meetings, in October 2004, offered 12 hours of continuing medical education credit in pain management which satisfied the California AB 487 requirement for maintenance of medical licensure in California. Also, free continuing medical education credits that will also satisfy this requirement for pain management and end-of-life care are available in the Bulletin and on our web site.

The quarterly Bulletin that you are reading now is currently edited by Stephen Jackson, M.D. Dr. Jackson, his associate editors, contributors and staff do an admirable job keeping members informed of state and national issues as well as human interest articles that remind us of the rewards of being a member of this specialty.

The CSA central office is at your service to answer practice-related questions and is working on more information and resources for members on issues related to non-clinical aspects of practice (for instance, billing, contracts, and medical staff privileges).

One of the practice guidelines developed by the CSA is the policy on pediatric anesthesia (www.csahq.org) which states that an institution should develop and maintain a written policy defining the perioperative care of pediatric patients that may be appropriately provided in the facility. It addresses not only criteria for privileging, but also regular and special clinical privileges in the care of the pediatric patient. Our statement has been a model for the Society of Pediatric Anesthesia’s policy statement on provision of pediatric anesthesia care (www.pedsanesthesia.org).

Also take a look at our updated web site that has even more information of interest to anesthesiologists and links to related sites. We also are planning programs that will include information for residents to prepare them for the working world.

So what do you get for being a member of the CSA? I hope you will see it is quite a lot. The CSA can accomplish things that you cannot do by yourself as an anes-
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thesiologist. These include speaking with authority on behalf of thousands of anesthesiologists, coordinating with the California Medical Association, advocating with regulators and the government for fair and reasonable reimbursement, advocating for sensible regulations that do not impede our ability to practice anesthesiology safely and efficiently, developing independent and reliable data on the economics of practice in California and participating in the ongoing national discussion on potential reform of billing practices.

I hope that you will give this article to your non-member colleagues and encourage them to join the CSA. I also encourage you to become involved as a delegate or alternate delegate from your district. In addition, contributions to our state GAS PAC and the national ASAPAC help us accomplish our goals at the state and national levels. The CSA is the one organized voice for anesthesiologists in California, and there is strength in numbers. Working together, we can make a difference for the better care of our patients and increased satisfaction for those of us practicing the specialty of anesthesiology in California.

CSA Pain Management and End-of-Life Care
Continuing Medical Educational Program

Module 5 of the CSA CME Program in Pain Management and End-of-Life Care is now available on page 63.

A total of 12 modules will be presented and will provide 1 CME credit per module. The Bulletin publishes one module in each quarterly issue through the October-December 2006 issue.

The entire series satisfies the CME requirement set by the California Legislature. It is free to CSA members.

Modules 1-5 are available at www.csahq.org.