The American Society for Clinical Pathology (ASCP) establishes the following issues as its 2023-2024 Patient-Centered Policy Priorities (PCPPs). These priorities were developed and approved by the Commission on Science, Technology, and Policy. The priorities represent areas where ASCP will be proactive and develop special efforts/programs to advance a patient-centered agenda. These priorities will be advanced throughout the organization and provide guidance in the areas of science, technology, policy, and practice.

1. **Cultivate the Pathology and Laboratory Medicine Workforce**
   a. Workforce Trends and Adequate Supply: Collect, analyze, and disseminate data to reveal trends and identify gaps (e.g., wage & vacancy initiatives and collaboration with pathologists and laboratory professional organizations)
   b. Visibility of Laboratory/Pathology Careers: Support promotional and outreach activities to increase the visibility of careers in pathology and laboratory medicine (e.g., Career Ambassadors, Patient Champions, Leading Laboratories Recognition Program, etc.)
   c. Education and Funding Opportunities: Advocate for and promote educational and funding opportunities to improve the competency and supply of qualified laboratory professionals and pathologists (e.g., student loan forgiveness, Graduate Medical Education, etc.)
   d. Diversity, Equity, and Inclusion in the Laboratory: Increase diversity, equity, and inclusion in the laboratory workforce with an emphasis on recruiting more personnel from underrepresented communities and fostering retention in the laboratory field
   e. Professional Recognition, Scope of Practice, and Clinical Empowerment: Represent pathologists and laboratory professionals as an integral part of the healthcare team; expand and leverage their scope of practice; enhance and reward their role within patient diagnostics and treatment decisions (e.g., Leading Laboratories Recognition Program)
   f. Forensic Pathology Workforce: Advocate for the forensic pathology workforce including by conducting research and producing publications (e.g., support workforce development policies, assess impact of opioid epidemic)

2. **Advocate for Appropriate Laboratory Oversight and Laboratory Personnel Standards**
   a. Laboratory Oversight: Promote gold-standard laboratory certification, accreditation, and practice parameters (e.g., cytology workload)
   b. Laboratory Personnel Standards: Ensure appropriate personnel training and certification requirements (e.g., CLIA personnel standards)

3. **Stimulate the Advancement of Quality Pathology and Laboratory Medicine Practice**
   a. Provider Participation Guidance: Aid members in navigating and meaningfully participating in quality reporting programs (e.g., Quality Payment Program, etc.)
   b. Expanded Scope of Quality Measurement: Inform an expanded scope of quality measurement by aiding in the development of more robust quality measures reflective of the full scope of pathologists’ quality improvement efforts (e.g., Maintenance of Certification, Ongoing Professional Practice Evaluation and Focused Professional Practice Evaluation Program, Proficiency Testing, National Pathology Quality Registry, etc.)
   c. Expanded Scope of Quality Benchmarking: Enable quality benchmarking across the patient’s entire care continuum via the development and advancement of accessible quality data, coupled with applied learning and quality tools (COI modules) to drive improvement
4. **Ensure Patient Safety while Expanding Patient Access**
   a. Laboratory Developed Tests (LDTs): Support appropriate LDT oversight that will protect the public’s health but not deter innovation
   b. Patient Access to Test Results: Facilitate communication among patients, laboratories, pathologists, and clinicians from test order through receipt of results
   c. Medical Error Identification and Reduction: Promote policies and initiatives that support precise and reliable test results and reporting (National Quality Forum/ National Academies of Sciences, Engineering, and Medicine Improving Diagnostic Quality and Safety Initiative)

5. **Invest in the Future of Laboratory Medicine**
   a. Genetic Testing and Patents: Support laws and policies prohibiting patents involving laws of nature (e.g., post-Myriad advocacy)
   b. Personalized Medicine: Promote laboratory testing to identify, develop, and guide patient-specific treatment regimens
   c. Paradigm of Practice: Educate and train the current and emerging workforce on the evolving practice patterns that occur in pathology and laboratory medicine as a result of significant advancements in science and technology

6. **Promote Prevention and Efficiency While Protecting Patients**
   a. Appropriate Test Utilization: Advance the *Choosing Wisely* program and pursue activities that position pathologists and laboratory professionals to be leaders in this arena (e.g., ASCP *Choosing Wisely* Toolkit, *Choosing Wisely* Champions, and ASCP Systematic Review of Pathology-Related Recommendations)
   b. Prevention: Promote appropriate preventive health screening tests
   c. Protecting Patients from Inappropriate Billing Practices: Promote patient protections from self-referral and other potentially abusive billing practices for anatomic pathology services by advocating for appropriate federal and state reforms prohibiting self-referral, markups, and fee splitting arrangements (e.g., Stark Self-Referral Law, federal Anti-Markup Rule, etc.)
   d. Clinical Guidelines: Develop evidence-based clinical guidelines and algorithms to dictate appropriate testing (e.g., colorectal screening, etc.)

7. **Incentivize High Quality, Efficient Patient Care via Payment System Reform**
   a. Accurate and Adequate Physician Fee Schedule (PFS) Reimbursement: Secure adequate physician reimbursement that aligns with appropriate clinical practice patterns, fully reflects service-specific cost inputs, and maintains patient access to laboratory services (e.g., Network Adequacy Statement)
   b. Accurate and Appropriate Clinical Laboratory Fee Schedule (CLFS) Reimbursement: Promote accurate and appropriate payment and coding for clinical laboratory services (e.g., revaluation of the CLFS per PAMA)
   c. Meaningful and Effective Health Care Delivery and Payment System Reform: Aid the Medicare payment system’s transition from pay-for-service to pay-for-value by proactively informing the development of MIPS and Alternative Payment Models (APMs) (e.g., bundled payment arrangements, Patient-Centered Medical Homes, Accountable Care Organizations, etc.) that incentivize quality improvement efforts within the pathology and laboratory community
8. Leverage Health Information Technology to Benefit Patients
   a. Pathology and Laboratory Medicine Informatics: Recognize diagnostic data as the foundation of medical decision-making, promote pathology informatics as the key driver of quality and efficient care delivery, and enable robust informatics support to generate key data, convert it into a useful format, transform it into actionable knowledge, and transmit it to relevant entities along the patient’s care continuum (e.g., recognition of subspecialty, etc.)
   b. Electronic Health Records (EHRs): Advocate for the development of uniform EHR certification standards and feasible implementation timelines; promote secure, timely, and affordable interoperability between EHRs and Laboratory Information Systems (LIS) in support of efficient care coordination/ effective care management
   c. Electronic Quality Reporting Mechanisms: Explore multi-purpose reporting mechanisms capable of:
      (1) Streamlining reporting requirements for multiple programs
      (2) Interfacing with public and private entities for the receipt of quality and payment data
      (3) Generating meaningful data tailored to specific programs/initiatives
      (4) Transmitting accurate, comprehensive, and secure data to varied public and private entities

9. Develop Global Health Solutions to Improve Public Health
   a. Improve laboratory infrastructure and expand access to laboratory services
   b. Promote quality and appropriate laboratory practice
   c. Tailor solutions to address varied local practice needs (e.g., anatomic, clinical, cytology, etc.); cultivate workforce to assure program sustainability (e.g., build skills of current lab professionals and ensure appropriate laboratory training for the next generation); educate on the importance of prevention (e.g., non-communicable disease)

10. Support Emergency Preparedness and Response
    a. Pandemic Preparedness Planning and Support: Promote appropriate development and maintenance of pandemic preparedness plans for emerging and existing pathogens and their variants, recognizing the importance of laboratory testing to identifying and diagnosing pandemic disease and the importance of laboratory data to contract tracing and mitigation effort; ensure such plans appropriately respond to the need for increase test capacity, adequate testing supply chains, and a robust laboratory personnel workforce; engage in educational outreach promoting the importance of preparedness and prevention (e.g. COVID-19, Ebola, PEPFAR)
    b. Bioterrorism, Chemical Terrorism, and Medical Disasters: Ensure laboratory preparedness and appropriate protocols; develop certification and training programs with measurable curriculum targeting tangible results (e.g., Defense Threat Reduction Agency and Cooperative Biological Engagement Program)
    c. Natural Disasters: Ensure laboratory preparedness and appropriate protocols; promote and provide disaster relief