2024-2025 ASCP Patient-Centered Public Policy Priorities

The American Society for Clinical Pathology (ASCP) establishes the following issues as its 2024-2025 Patient-Centered Policy Priorities. 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, government entities, and academic healthcare workforce centers)

   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, MPHLWC, ASCA, 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 pathology and laboratory workforce with an emphasis on recruiting more people from underrepresented communities and fostering retention in pathology and laboratory medicine

   e) Professional Recognition, Scope of Practice, and Clinical Empowerment: Represent pathologists and laboratory professionals as an integral part of the healthcare team; support
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)

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 (CQI Certificate Program) 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 other treating providers 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 resulting from significant advancements in science and technology

6) Promote Prevention and Efficiency While Protecting Patients

a) Appropriate Test Utilization: Advance the Effective Test Utilization Best Practices program and pursue activities that position pathologists and laboratory professionals to be leaders in this arena (e.g., ASCP Effective Test Utilization 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, recommendations, 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, AI, 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) Invest in a Robust Global Laboratory Workforce to Promote Health Equity

a) Strengthen laboratory infrastructure to expand access to testing for patient diagnosis and public health surveillance

1) Optimize laboratory technology platforms to improve efficiency and quality, especially during public health emergencies
(2) Continue investing in laboratory systems by reauthorizing PEPFAR and funding global health security initiatives
(3) Reduce silos from donor-funded aid programs and implement cross-cutting interventions to improve patient care across all laboratory sections (e.g. microbiology, molecular biology, histology, cytology, clinical chemistry, hematology, etc.)

b) Cultivate sustainable communities of practice to promote laboratory quality
   (1) Upskill and train existing laboratory professionals with continuing education on emerging technologies and new diagnostic methods
   (2) Invest in the next generation of laboratory leaders by improving pre-service education and training programs
   (3) Promote professionalization of laboratory careers through visibility and certification initiatives

c) Advocate for equitable access to diagnostic care for all patients
   (1) Address the ongoing burden of neglected diseases of poverty, as well as the growing threat of cancer and other non-communicable disease in Low- and Middle-Income Countries (LMICs), by investing in contextually appropriate sustainable laboratory capacity-building programs.

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 efforts; ensure such plans appropriately respond to the need for increased 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