

Principles for Healthcare Reform

The American Society for Clinical Pathology (ASCP) recognizes that the goal of providing patients with quality healthcare services and healthy outcomes is dependent on patients' ability to pay for and access these healthcare services. For most individuals, this is not possible without access to affordable coverage. As Congress considers legislation to repeal and replace the Affordable Care Act (ACA), the ASCP strongly encourages policymakers to work toward certain key principles, many of which are ingrained in ASCP's 2017-2018 Patient-Centered Policy Priorities.

- **Promote access to healthcare.** All Americans deserve access to affordable and robust insurance coverage that provides patients with access to full continuum of care including laboratory and diagnostic services. [See ASCP's 2017-2018 Patient-Centered Policy Priorities, #4]
- **Preserve access to critical patient protections.** ASCP strongly supports maintaining the ACA's provisions ensuring critical patient protections, such as banning discrimination based on preexisting conditions, eliminating annual and lifetime benefit limits, and allowing children to remain on their parent's insurance plan through age 25. [See ASCP's 2017-2018 Patient-Centered Policy Priorities, #4]
- **Ensure quality and incentivize the transition to better coordinated, value-based care.** ASCP supports incentivizing improvements in quality, efficiency, care coordination and the patient experience. Patients will benefit by encouraging adoption of appropriate test utilization practices and other initiatives to recognize the contributions of the pathology team. We also support rigorous oversight of clinical laboratory operations through the Clinical Laboratory Improvement Amendments of 1988 to ensure quality laboratory testing. [See ASCP's 2017-2018 Patient-Centered Policy Priorities, #2, #3, #4, #8, #9]
- **Reduce regulatory burden on providers.** While ASCP supports the goals of programs intended to improve quality and value, these programs should be revamped to minimize compliance burden and incorporate the flexibility needed to enable universal participation by all physician specialties, such as pathologists. [See ASCP's 2017-2018 Patient-Centered Policy Priorities, #2, #3, #8]
- **Ensure network adequacy.** Insurers have been creating increasingly narrow insurance networks that limit choice and unknowingly expose patients to out-of-network healthcare costs, particularly within hospital settings. Reforms should require insurers to increase network size and improve transparency so patients are supported by a robust network of providers and health care delivery systems. [See ASCP's Policy Statement on Network Adequacy (in development)]
- **Preserve safety net programs serving vulnerable patients.** ASCP believes that reforms to ensure patient access to affordable and adequate coverage should preserve patient access to programs such as Medicare, Medicaid, and the Children's Health Insurance Programs. [See ASCP's 2017-2018 Patient-Centered Policy Priorities, #4, #5 #6]
- **Develop and maintain a robust healthcare workforce.** To ensure patients have access to medically necessary services, there needs to be a robust healthcare workforce. Policymakers should increase funding for and improve access of workforce development programs to provide support to all key members of the medical team, including pathologists and laboratory medicine professionals. [See ASCP's 2017-2018 Patient-Centered Policy Priorities, #1, #5]
- **Supports rational and fair payment and coverage policies.** To ensure an adequate healthcare delivery infrastructure, ASCP believes that payment rates and coverage policies for healthcare services should be developed in a rational, transparent, and fair manner that ensures robust and meaningful input from providers. [See ASCP's 2017-2018 Patient-Centered Policy Priorities, #7]
- **Support a strong public health infrastructure and vibrant medical research.** ASCP urges policymakers to provide strong funding for domestic and international public health programs at the Centers for Disease Control and Prevention, U.S. State Department, and other federal agencies to address such activities as disease prevention and treatment, surveillance, and tracking programs. We also strongly support medical and scientific research programs, such as those at the National Institutes of Health, to develop novel ways to treat, prevent, and diagnose disease and other health conditions, such as personalized medicine. [See ASCP's 2017-2018 Patient-Centered Policy Priorities, #6, #10, #11]