Frequently Asked Questions: CAP Revised Position on State Legislation Requiring Licensure of Clinical Laboratory Personnel

1. **What is CAP’s new position on state legislation on licensure of clinical laboratory personnel?** The CAP has revised its position on state legislation requiring licensure for clinical laboratory personnel, and developed model criteria that will guide its decisions on whether to support or oppose medical licensure legislation introduced in the states. It is expected to help support the efforts of clinical laboratory personnel who seek to be licensed, and at the same time ensure that the legislative language in every licensure bill will address the CAP’s key concerns.

2. **How different is CAP’s new position from its prior position?** For the past several years, the CAP, in partnership with State Pathology Societies, has opposed licensure bills introduced in the states because CAP members had concerns about specific details in the bills being advocated. The CAP model criteria address the legitimate concerns our members have expressed. Now, if a bill incorporates the model criteria in the legislative language, the CAP will raise no objection to it.

3. **What were the concerns CAP members expressed about licensure?** The CAP members felt the legislative language in many of the bills would exacerbate workforce shortages by eliminating on the job training as a pathway to employment, create conflict within the laboratory over scope of work between physicians and non-physicians, and create an overly complex and regimented personnel classification scheme that would potentially undermine the authority of the laboratory director to select the most appropriate staffing for their laboratory.

4. **What are the “model criteria” and how will they be used?** The model criteria address each of the critical concerns raised by our members: it clarifies the scope of work issues; it specifically ensures the control of the laboratory director over all personnel; it provides for a simpler personnel classification scheme; it provides for greater on the job training; and it denies state clinical laboratory boards the authority to transcend the contemplated qualification standards. The CAP will utilize the model criteria to determine whether it will support or oppose licensure bills that are proposed in the states.

5. **Why did the CAP decide to change its position?** The CAP recognizes the critical role that all members of the clinical laboratory team play in delivering quality laboratory medicine and patient care, and felt it was time to reaffirm its support for its clinical laboratory partners who desire to raise the standards of their profession through state licensure. The CAP also wishes to resolve this divisive issue so the laboratory community can work together more constructively to address the challenges facing laboratory medicine, including most urgently the need for unified advocacy to address the laboratory workforce shortage.

6. **Will the CAP now support licensure bills introduced in the states?** The CAP will not oppose any bill that is consistent with our model approach. However, ultimately it
is the State Pathology Society that will determine pathology’s position on the legislation in each respective state.

7. **Who licenses Medical Technologists and Technicians?** Each state has jurisdiction over the licensure of clinical laboratory personnel in their state. In most cases, a State Licensure Board is appointed to oversee the program.


9. **When will this policy take effect?** This position was approved by the CAP Board of Governors in November 2008, and is now in effect.

10. **Will the CAP support the licensure alternative in states where the CAP language is introduced?** The CAP will not oppose any bill that is consistent with our model approach; however, ultimately, it’s the State Pathology Society that will determine pathology’s position on the legislation in each respective state.

11. **Will the CAP continue to oppose licensure bills that do not have the CAP language?** Yes, we will, provided the State Pathology Society is also in opposition and requests our assistance.

12. **Does the CAP believe its position on licensure has been fundamentally wrong in the past?** No. We’ve been consistent in pointing out the deficiencies we see with these bills. Today we are going beyond pointing out deficiencies and proposing ways to correct those deficiencies.

13. **Is the CAP encouraging states to independently act to elevate their standards?** No. However, in states that consider licensure, we believe it is better if pathologists put forward a constructive proposal rather than just opposing licensure.

14. **Why did the CAP not include cytotechnologists, histotechnologists and pathologist assistants in its licensure proposal?** These groups of professionals have not sought licensure. Both the histotechnologists and cytotechnologists have, for the most part, been allies of the CAP, in opposition to licensure legislation in the states. A few years ago, the AAPA and the CAP negotiated a scope of work agreement that clearly delineates the roles and responsibilities of PAs in the laboratory in relation to the pathologist.

15. **What impact will licensure have on the personnel shortage?** No one knows for sure. The CAP has expressed concern that overly stringent licensure requirements will exacerbate the already critical shortage of qualified laboratory personnel. However, proponents of licensure have voiced concern that laboratories will fail to attract high quality professionals if the requirements for employment are not stringent enough. The CAP’s position is designed to address both concerns by establishing qualification requirements that can be met either through college-level course completion and testing, or through on-the-job training. Ultimately, licensure may have little to do with the personnel shortage issue, so we shouldn’t let it distract us from working together to find a solution.
16. **Why is on-the-job training so important?** Accepting on-the-job training in meeting licensure requirements is critical because some laboratory personnel perform such highly specialized services, most education programs can’t afford to cover them. In order to ensure they are carried out without disruption due to workforce training issues, on-the-job training is vital.