

**BOARD OF HEALTH PROFESSIONS
REGULATORY RESEARCH COMMITTEE
PUBLIC HEARING ON EMERGING PROFESSIONS
Medical Laboratory Scientists / Medical Laboratory Technicians
July 16, 2010**

TIME AND PLACE: The public hearing was called to order at 10:00 a.m. at the Department of Health Professions. The purpose for the hearing was to receive public comment pursuant to its study into the need to regulate the emerging profession: Medical Laboratory Scientists (MLS) / Medical Laboratory Technicians (MLT).

PRESIDING CHAIR: Damien Howell, P.T., D.P.T., O.C.S

MEMBERS PRESENT: David Boehm

STAFF PRESENT: Elizabeth A. Carter, Ph.D., Executive Director, Board of Health Professions
Laura Chapman, Operations Manager
Sherri Johnson, Researcher
Gabrielle Brost, Researcher
Arne Owns, Deputy Director
Dianne Reynolds-Cane, Director

OTHERS PRESENT: Kathy Sudduth, Assoc. of Genetic Technologists
Randy Vandevander, Augusta Health
Karen Gordon, President, VSCLS, NVCC
Teresa Nadder, VSCLS, NVCC
Neysa Simmers, Augusta Health (retired)
Elissa Passiment, Exec. VP ASCLS
Roxanne Mercer, VCU Health System
Emy Morris, VCU Health System
Bill Koyien, VCU
Lisa Durish, VDH
Chevonne Logan, VDH-CLIA
Gary Mosman, Riverside Tappahannock Hospital
Paul Speidell
Bonnie Belkin
Dorala Trivette
Lynn Onesty
Katherine Pountue
Rebecca Perdue
Ronald Sauer
Rachel Strother
Paula Mosman
Frankie Harris-Lyne

COURT REPORTER: Wanda Blanks, Farnsworth & Taylor Reporting, LLC

PRESENTATION:

Sherri Johnson, researcher for HB601(2010) provided background information regarding the need to regulate Clinical Laboratory Scientists and Clinical Laboratory Technicians. The presentation is attached.

PUBLIC COMMENT:

Kathryn Sudduth, CG (ASCP)^{CM}, DLM^{CM}
Ms. Sudduth is a MLS with over 40 years experience in Cytogenetics. She strongly supports the concept of certification and continuing education. She would like HB601(2010) amended to include cytogenetic technologists.

Randy Vandevander, Laboratory Administrative Director, August Health, Speaking on behalf of the Virginia Society of Clinical Laboratory Science (VSCLS)

Mr. Vandevander stated that cause of harm is difficult to quantitate in terms of actual cases, but that the risk of harm is present. He supports regulation of MLS and MLTs.

Karen Gordon, President VSCLS, NVCC

Ms. Gordon is in support of HB601(2010). She feels that cause of harm is evident and that education is paramount.

Teresa Nadder, Ph.D., MLS(ASLP)^{CM}, Chair and Associate Professor, Dept. of CLS, VCU

Dr. Nadder stated that often there is the concern that regulation could have a negative impact on personnel available to fill positions. Evidence has not shown this to be the case in Virginia. Dr. Nadder agrees that regulation of medical laboratory professions at the state level will provide more accurate and reliable mechanisms to identify, collect data on, and provide access to Virginia's laboratory workforce. Ms. Nadder is in support of HB601(2010).

Neysa Simmers, MLS, M.Ed., MBA

Retired Healthcare Administration

Ms. Simmers is in support of HB601(2010) and feels that MLT's and MLS's need to be properly educated and trained to protect the public.

Elissa Passiment, Exec.VP of ASCLS

Ms. Passiment stated that federal regulations are a baseline and not standard state to state. Medical practices have changed greatly yet federal regulations have not evolved. She is in agreement that there is the issue of potential patient harm and the need to regulate laboratory professionals beyond the current requirements.

Roxanne Mercer , Assoc. Lab Profession, VCU Health System

Ms. Mercer stated that VCU supports HB601(2010) and that education and training are essential.

Emy Morris, VCU Health system

Ms. Morris stated that education can not be stressed enough in the training and continuing education for MLT's and MLS'. She supports HB601(2010). Ms. Morris read a letter from Shelby Wilber, MT(ASCP) who also supports HB601(2010).

Bill Koyien, VCU Health System, VCU Lab

Mr. Koyien agrees with HB601(2010).

Gary Mosman, Riverside Tappahannock Hospital-Lab Director

Mr. Mosman stated that time constraints, lack of education and point of care issues are all reasons that he supports HB601(2010).

Paul Speidell, VP, Virginia Hospital & Healthcare Association

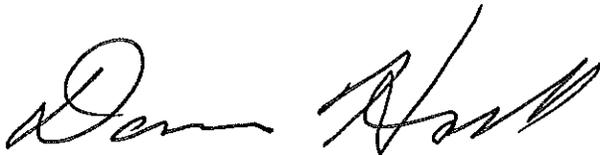
Mr. Speidell stated that it is important that regulation, if any, does not exceed that necessary to protect the public and ensure safe and high quality health care.

Paula Mosman, Retired MLT

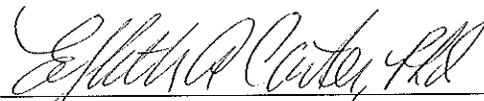
Mrs. Mosman stated that education and knowledge of equipment are essential. She agrees with HB601(2010).

ADJOURNMENT:

The public hearing adjourned at 2:38 p.m.



Damien Howell, P.T.
Chair



Elizabeth A. Carter, Ph.D. Executive Director
Board of Health Professions

Study of the Need to Regulate Medical Laboratory Scientists and Medical Laboratory Technicians

Presentation of the draft report
July 16, 2010

Medical Laboratory Scientists

a.k.a.

Medical Laboratory Technologists

Clinical Laboratory Scientists

Clinical Laboratory Technologists

Medical Laboratory Technicians

a.k.a.

Medical Technicians

Clinical Laboratory Technicians

Income (national median) (BLS, 2008)

MLS: \$53,500

MLT: \$35,800

Projected growth in these professions (BLS, 2008)

MLS: +12%

MLT: +16%

Education and Training

MLS: Bachelor's degree

MLT: Associate's degree, certificate/diploma

Accrediting agencies for MLS/MLT programs

NAACLS

CAAHEP

ABHES

In Virginia,

NAACLS 7 MLS programs and 4 MLT
programs

CAAHEP 0 MLS programs and 1 MLT program

ABHES none

**Current National Totals and Expected Growth
from 2008 - 2018** (BLS, 2008)

Professional level	Number	Estimated change
MLS	172,400	+12%
MLT	155,600	+16%
Medical Assistant	483,600	+34%

Certification/Regulation

- Voluntary certification
- State licensure and laws
- Federal Regulation of Laboratories
- Laboratory Accreditation

Voluntary certification

Certification for MLS/MLT granted by:

AAB American Association of Bioanalysts
AMT American Medical Technologists
ASCP-BOC American Society for Clinical Pathology-
Board of Certification

~~ASCLS American Society for Clinical Laboratory Science~~
~~NCA National Credentialing Agency for Laboratory Personnel~~

State licensure

States/Territory that currently require licensure
for MLS and MLT personnel

- California
- Florida
- Georgia
- Hawaii
- Louisiana
- Montana
- Nevada
- New York
- North Dakota
- Rhode Island
- Tennessee
- West Virginia
- Puerto Rico

Average licensure fees

Annual/initial fees: MLS = \$90, MLT = \$77

Renewal fees: MLS = \$50, MLT = \$45

Federal Regulation of Laboratories

Clinical Laboratory Improvement Amendments
(CLIA)

Test Complexity

- waived complexity,
- moderate complexity*
- high complexity.

[*Moderate complexity also includes a subcategory of provider-performed microscopy (PPM)].

Types of CLIA Laboratories in Virginia

Certificate Type	Percent of Labs
Waiver	59%
PPM	21%
Accredited	9%
Compliance	9%
Registration	1%

CLIA: Test Complexity and Minimum Personnel Requirements

Waived

None

Moderate Complexity

HS diploma or (equivalent) and documented training for the testing performed

High Complexity

Associate's degree (including 24 semester hours in science) and completion of either:

- (1) accredited or approved clinical laboratory training program
- (2) three months laboratory training in the specialty(ies) in which the individual performs high complexity testing

Laboratory Accreditation

CMS Approved Accrediting Organizations

- AABB
- American Osteopathic Association
- American Society for Histocompatibility and Immunogenetics
- College of American Pathologists
- COLA
- Joint Commission

(CMS/CLIA/Accreditation Organizations, n.d.)

Literature Review

Laboratory error and its relationship to testing phase

- Pre-analytic
- Analytic
- Post-analytic

Increasing:

- The number of and variety of tests
- The sophistication of laboratory technology and equipment
- The number of laboratory facilities
- The demand for increased use of testing

Decreasing:

- Accredited programs to educate and train MLS and MLT

In the past 25 years (1983-2008), the number of NAACLS accredited MLS/MLT programs has decreased over 65%, which continues to result in approximately 50% fewer graduates (NAACLS, 2009).