Several years ago, *Laboratory Medicine* published a series of articles forecasting changes to health care as we knew it then. At the time, laboratorians in some areas (e.g., Minneapolis, Los Angeles) may have sensed the importance of those manuscripts, while those in areas less impacted by changes in the health care marketplace at the time probably did not. The Editors, however, felt the issues were important enough to be brought to the attention of the entire laboratory community.

Next month we enter the last year of the century, and *Laboratory Medicine* continues the discussion of changes in health care practice, this time to a laboratory community keenly aware of change. Not all laboratory areas are automated yet, but we see automation in areas that were considered the domain of trained laboratory professionals, including transfusion medicine, microbiology, and even cytochemistry. No longer is it necessary for a medical technologist to serve as the bench-level staff member in even a modestly sized automated laboratory.

The changes are not yet complete. Do they mean the end of medical technology? Probably not. Also, some real opportunities are coming along with the change. But the opportunities will require laboratory professionals, technologists and pathologists, to change. In this issue's article on laboratory economics, Franklin Elevitch, MD, suggests that we have the skills necessary to be leaders in the new environment. We certainly have the basics. Transitioning from a bench technologist or a purely surgical pathologist requires adapting existing skills and perhaps acquiring new skills. Some areas include information management, communication, the ability to train others in the principles and practice of laboratory medicine, and the knowledge to respond to the ever-increasing regulations and requirements, including the Medicare compliance requirements, the topic of the feature article in this issue.

The reason all of us entered a profession in health care was to help improve patients' quality of life through laboratory practice. Despite the pressures change brings, the core of what we do and why we do it remains unchanged.

And the good news is that the prediction we made during our last series now rings true in areas where managed care is well entrenched. Providers are reaching the point where reducing price further would compromise quality of care. As that point is reached, providers are beginning to compete on quality, not price. Trained, certified medical technologists and board-certified pathologists hold the key to the future when it comes to delivering quality care. Spend this last year of the century sharpening your skills to make sure you will be invited to pass through the door that key will open.

Happy New Year from the Editorial Board of *Laboratory Medicine*!

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Reference