

Please see below re medical assistants.

From: Maida Townsend
Sent: Monday, January 15, 2018 8:59 AM
To: Hannah Rabin
Subject: Re: Written testimony re: H. 496

Hannah: Thank you very much for your input. I am forwarding this to the full committee and our committee assistant who will put it on our committee web document page. Best, Maida (Maida F. Townsend, Chair, House Government Operations)

From: Hannah Rabin <hannahrabin@richmondfamilymedicine.org>
Sent: Monday, January 15, 2018 8:11:34 AM
To: Maida Townsend
Subject: Written testimony re: H. 496

January 15, 2018

Dear Representative Townsend and Members of the House Operations Committee:

Thank you for the opportunity to present written testimony regarding my concerns about H. 496. I am a family doctor and founding partner of a small medical practice, Richmond Family Medicine. We have a clinical staff of three physicians, three nurse practitioners, two registered nurses, one licensed practical nurse and three medical assistants. We work closely as a team to provide primary care to 6,000 patients. In our experience, the team approach is critical. Each physician and nurse practitioner is paired with a nurse or medical assistant to care for a panel of patients. In our office medical assistants room patients, check vital signs, take brief histories from patients, perform point-of-care testing, gather test results and medical records from other offices and the hospital and initiate documentation in the electronic medical record, perform immunizations and perform telephone triage (gathering information from a patient on the phone relaying that information to the clinician and then conveying the recommendations to the patient). The registered nurses are responsible for training the medical assistants using a standardized protocol that we have developed specific to our practice. This training protocol includes a written checklist of tasks and skills to teach and expectations regarding communication with patients and with clinical staff. The medical assistants demonstrate proficiency with these tasks and continue to be closely supervised. We recognize that the ultimate responsibility for the care of patients rests with the physicians and nurse practitioners, but without carefully trained nurses and medical assistants, we could not carry out the care of our patients. We have had no incidents of patient harm related to our medical assistants.

In Vermont there are not enough nurses available to hire to carry out the duties that are required in all of the medical clinics and hospitals. Additionally hiring only nurses to carry out these functions would be cost-prohibitive in a practice such as ours. As an independent practice, we do not have the financial means to compete for nurse salaries with UVM Medical Center. We hire people to fill the medical assistant positions who are quick learners, good communicators, and who demonstrate a level of responsibility and compassion to carry out the functions we require. Most are graduates of four-year colleges and will likely seek future educational opportunities in the medical field. One of our former medical assistants is now enrolled in training to become a physician assistant and one attended a four year registered nurse program and is now in a doctorate program to become a nurse practitioner.

I doubt that a general medical assistant training and certification program would provide specifically useful skills for a practice such as ours, and the time involved and the cost of such a certification program would narrow the field of prospective applicants for these jobs. I worry that regulations regarding the functions of medical assistants in medical practices would hinder the flexibility that different practices require to carry out patient care. Currently, we have a system that works well, and I am concerned that additional requirements for certification or regulation of the use of medical assistants would add an unnecessary burden to medical practices.

Please let me know if you have questions or would like to visit our practice to meet our team.

Respectfully,

Hannah Rabin, MD
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