

Licensure for VT Medical Assistants

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For House Committee of Government Operations, VT General Assembly

Current Problem in Need of Legislative Remedy

Interpretation of ambiguous statutes regarding supervision of unlicensed medical assistants challenges our care delivery system, and is at odds with national and state norms

Medical Assistants in Vermont

There is no VT law governing unlicensed Medical Assistants (MA's), and no licensure for MA's

MA's serve a critical role in providing primary care in rural or otherwise underserved settings, improving access to primary care for the most vulnerable Vermonters

Physicians use broad discretion in assigning tasks to MA's depending on our individualized needs, and our observation of MA's competency and skill

Workforce shortages: Rural practices in underserved areas are less successful than hospitals and nursing homes in attracting and retaining LPN's and RN's. MA's provide needed relief in the face of these shortages. Many tasks can be delegated to MA's, freeing our limited nursing staff for more critical tasks, and providing our patients more timely care

Medical assistantship can be a bridge for promising Vermont students who have talent, but lack social or financial support to pursue traditional paths to healthcare careers. These individuals may go on to be the first generation in their family to go to college or obtain professional degrees in nursing or medicine. We need to sponsor and support them!

MA's are trained and examined on a wide breadth of knowledge and skill:

CCV Course http://catalog.ccv.edu/preview_program.php?catoid=3&poid=87

AAMA Certification Exam material <http://www.aama-ntl.org/cma-aama-exam/study/content-outline>

MA's are compensated less than their licensed counterparts:

VT Salaries (VT Dept. Labor, Indeed.com)

RN \$59,000-65,750

LPN \$41,430-43,620

MA \$33,580 (average)

Current VT Statute:

26 V.S.A. 1311(1) defines "practice of medicine" to include "offering or undertaking to prescribe, order, give, or administer any drug or medication for the use of any other person;"

Medical Board director expressed to us the opinion that no Physician or Physician Assistant in VT should order an MA to give injections or immunizations and has suggested we open ourselves to allegation of unprofessional conduct if we do so. (Most FQHC directors are unaware of this.)

The objection arises over the term “unlicensed” and the Medical Board suggests that “unless Vermont law is amended to provide for recognition of medical assistants and regulation of them as a type of health care professional, I could not suggest to any physician or nurse that they should delegate duties that fall under the above definition to anyone who is not licensed or certified by the State” Exec Dir VT Board of Medical Practice, 7/16/2014, reiterated Nov 2017

AAMA, national certification body for MA’s describes their duties as including “preparing and administering medications as directed by a Physician, authorizing prescription refills as directed, removing sutures, and changing dressings” (among others)

MA Job descriptions from FQHC’s in VT similarly include: Performing immunizations and injections as ordered by providers, relaying prescription information to pharmacies as ordered, follow standing orders, triage walk-in patients (among others)

FQHCs are nonprofit agencies providing medical, dental, and mental health care to ~60% of Vermonters. Medical Assistants are critical to our provision of care. Under current law we do not have adequate licensed staff to meet our patients’ needs. (Consider that *every person* age 6 months and older is recommended to receive influenza vaccination *every year* in the fall! All persons 65 and older are advised to catch up on addition of a new pneumonia vaccine. All persons 60 and older will need to catch up on new Shingles subunit vaccine soon.)

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Drawbacks: expense to the State, expense to MA’s

Benefits: increase stature of those who are well-trained and providing quality care, decrease chance of untrained or poorly trained individuals detracting from the professional reputation of medical assistants, and protect care providers from being at odds with Medical Practice Board

I respectfully ask your committee and the General Assembly to craft and pass a bill that

1. Recognizes medical assistants as health care professionals,
2. Preserves broad discretion for health care providers to utilize them to the best of their training, talent, and expertise,
3. Does not impose prohibitively expensive burdens that might bar lower income aspirational candidates from obtaining careers as licensed medical assistants