States That Require Medical Assistants to Meet Education and Testing Requirements

Donald A. Balasa, JD, MBA AAMA CEO and Legal Counsel



he U.S. Department of Education's issuance of its final rule "Financial Value Transparency and Gainful Employment" (see "A Department of Education Proposed Rule Could Impact Career and Technical (Including Allied Health) Education" in the September/ October 2023 issue of CMA Today) has prompted renewed interest in the scope of practice of medical assistants under state law. The following article summarizes the laws of states that require medical assistants to meet education and/or testing requirements for the performance of certain duties. More detailed descriptions of state medical assisting laws can be found on the AAMA website on the "State Scope of Practice Laws" webpage.

California

The following are excerpts from the website of the Medical Board of California:

Prior to a medical assistant performing technical supportive services, a medical assistant shall receive training, as necessary, in the judgment of the supervising physician, podiatrist, or instructor to ensure the medical assistant is competent in performing that service.

Medical assistants shall be trained [in a formal academic setting or] by a licensed physician, podiatrist, registered nurse, licensed vocational nurse, a physician assistant, or a *qualified medical assistant* [emphasis added].

...

For medical assistants to administer medications by intramuscular, subcutaneous, and intradermal injections, to perform skin tests, or to perform venipuncture or skin puncture for the purposes of withdrawing blood, a medical assistant shall complete the minimum training prescribed in the regulations.

Training shall be for the duration required by the medical assistant to demonstrate competence to the supervising physician, podiatrist, or instructor. Where applicable, training shall include no less than:

- 10 clock hours of training in administering injections and performing skin tests;
- 10 hours of training in venipuncture and skin puncture for the purpose of withdrawing blood;
- at least 10 of each intramuscular, subcutaneous, and intradermal injections and 10 skin tests, and/or at least 10 venipuncture and 10 skin punctures;
- 10 hours of training in administering medication by inhalation; and
- training in the above shall include instruction and demonstration in:
 - pertinent anatomy and physiology appropriate to the procedures;
 - choice of equipment;
 - proper technique including sterile technique;
 - hazards and complications;
 - patient care following treatment or tests;
 - emergency procedures; and
 - California law and regulations for medical assistants

In every instance, prior to administration of medicine by a medical assistant, a licensed physician or podiatrist, or another [appropriately] licensed person shall verify the correct medication and dosage. The supervising physician or podiatrist must authorize any technical supportive services performed by the medical assistant and that supervising physician or podiatrist must be physically present in the treatment

facility when procedures are administered, except as provided in section 2069(a) of the Business and Professions Code.

. . .

Medical assistants are not required to be licensed or certified by the State of California. ... If medical assistants will be training other medical assistants [outside of a formal academic setting], they must be certified by one of the [Medical Board of California]-approved certifying organizations listed on the Board's Medical Assistants page.²

Connecticut

Connecticut law allows medical assistants who (1) have met specified education requirements and (2) are certified in medical assisting by a recognized certification body to administer vaccines in a nonhospital setting under the authority, control, and supervision of a physician, nurse practitioner, or physician assistant.

Delaware

Delaware law authorizes advanced practice registered nurses (APRNs)—including nurse practitioners—to assign medication administration to a medical assistant if the medical assistant (1) has successfully completed a medical assistant training program and (2) possesses current national medical assistant certification.

The APRN must be present in the building when the medical assistant is administering medications and will assume liability for the actions of the medical assistant.

Massachusetts

Massachusetts law is as follows:

A PCP [primary care provider] may delegate the administration of immunizations

to a certified medical assistant who:

- (1) has graduated from a post-secondary medical assisting education program accredited by the [Commission on Accreditation of Allied Health Education Programs (CAAHEP)], the Accrediting Bureau of Health Education Schools, or another certificate program that the commissioner of public health may approve;
- (2) is employed in the clinical practice of a licensed primary care provider³

Nebraska

Nebraska law requires medical assistants regardless of their education and credentialing—to register with the state Department of Health and Human Services as medication aides to be delegated certain types of administration of medication. Medical assistants who work in medical practices and clinics need to pass a competency assessment that is administered by a licensed provider or a licensed health care professional.

New Jersey

New Jersey law permits medical assistants who have met specified education requirements and hold a current medical assisting credential to be delegated (1) venipuncture and (2) the administration of certain types of injections under the authority of a physician who is on the premises and immediately available.

North Dakota

North Dakota nursing law requires medical assistants to meet education and certification requirements and to register with the Board of Nursing as a Medication Assistant III to be delegated certain types of administration of medication.

South Carolina

South Carolina law permits medical assistants who (1) have completed specific education requirements and (2) hold a current, recognized medical assisting certification to be delegated certain nonbasic tasks by physicians, nurse practitioners, and physician assistants who are on the premises and immediately available. These tasks include certain types of administration of medication. There is a grace period extending to July 2024 for medical assistants working as of July 2022 to become certified and, therefore, be legally eligible to be delegated nonbasic tasks.

South Dakota

Note the following excerpt from the May 11, 2022, policy statement of the South Dakota Board of Nursing:

Guidelines

A registered nurse may assign nursing tasks and supervise a medical assistant provided:

- The medical assistant is certified with the American Association of Medical Assistants (AAMA) or American Medical Technologists (AMT);
- Assigned nursing tasks are consistent with Commission on Accreditation of Allied Health Education Programs (CAAHEP) standards, with the exclusion of IV therapy;
- The medical assistant has demonstrated competency to perform the assigned nursing tasks;
- The supervising registered nurse is readily available either in person or via electronic communication.4

Tennessee

The following are excerpts from the Tennessee law:

- (1) "Ambulatory outpatient hospital clinic" means a clinic or physician office that is owned and operated by a hospital licensed under this title and that provides treatment to patients who are not admitted as inpatients to the hospital;
- (2) "Certified medical assistant" means personnel with training to function in an assistive role to a licensed physician or licensed nurse in the provision of patient care activities in a facility used as an ambulatory outpatient hospital clinic as delegated by the physician or licensed nurse;5

A "certified medical assistant" must be certified in medical assisting by a body recognized (in the 2021 Tennessee statute).

(A) A certified medical assistant may administer approved, standardized dosage vaccines to the patients of an ambulatory outpatient hospital clinic that uses certified medical assistants pursuant to this section. A certified medical assistant shall administer other medications only pursuant to delegation by a licensed nurse or physician.

(k) This section does not apply to personnel employed by a physician performing duties in settings other than in an ambulatory outpatient hospital clinic.5

Washington

Washington law has established four categories of medical assistants, with different requirements for each category. (These requirements are in the process of being modified by the Washington State Department of Health pursuant to legislation enacted in February 2022.) Medical assistants who perform clinical tasks are required by law to register with the Washington State Department of Health in one of the four categories. ****

Questions about this article may be emailed to AAMA CEO and Legal Counsel Donald A. Balasa, JD, MBA, at DBalasa@aama-ntl.org.

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