

SENATE BILL REPORT

SB 6237

As of January 19, 2012

Title: An act relating to creating a career pathway for medical assistants.

Brief Description: Creating a career pathway for medical assistants.

Sponsors: Senators Keiser, Conway, Kline, Frockt and Becker.

Brief History:

Committee Activity: Health & Long-Term Care: 1/18/12.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Kathleen Buchli (786-7488)

Background: Health Care Assistants. A certified health care assistant is authorized to provide assistance to certain licensed health care practitioners, such as physicians, nurses, and naturopaths. A licensed health care practitioner may delegate certain functions to the health care assistant such as administering skin tests, injections, and performing blood withdrawals. Each health care assistant is certified by the facility in which they are employed, or by the practitioner who delegates functions to the health care assistant, pursuant to standards adopted by the Department of Health (DOH) in rule. The facility or practitioner must submit a roster of certified health care assistants to the DOH. Health care assistants are divided into seven different categories based on differing educational, training, and experiential requirements. The different tasks each category of health care assistant may perform are as follows (all health care assistants may administer vaccines):

- Category A: venous and capillary invasive procedures for blood withdrawal;
- Category B: arterial invasive procedures for blood withdrawal;
- Category C: intradermal, subcutaneous, and intramuscular injections for diagnostic agents and the administration of skin tests;
- Category D: intravenous injections for diagnostic agents;
- Category E: intradermal, subcutaneous, and intramuscular injections and the administration of skin tests;
- Category F: intravenous injections for therapeutic agents; and
- Category G: hemodialysis.

Medical Assistants. Medical assistants are personnel who provide administrative or clinical tasks under the supervision of other health care practitioners. Although a variety of national

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organizations certify medical assistants, they are currently not a credentialed health profession in Washington. In 2011 the DOH completed a sunrise review of a proposal to credential medical assistants. In its report, the DOH supported credentialing medical assistants, but also made recommendations regarding clarifying the current health care assistant credential. The DOH recommended that existing health care assistant categories be blended with a medical assistant certification. Categories C and E would be replaced with a certified medical assistant credential. Categories A and B would be replaced with a certified phlebotomist credential. Category G would be replaced with a certified hemodialysis technician credential. The DOH also recommended removal of the requirement that a credential holder obtain a new credential every time he or she leaves a facility or delegator.

Summary of Bill: The designation of health care assistant is changed to medical assistant. Beginning July 1, 2014, medical assistants must be certified in order to practice as a medical assistant. The DOH must adopt minimum requirements for entry into the medical assistant profession and establish a career ladder so that medical assistants can, through experience and education, increase their skills and the procedures in which they are permitted to assist. Once certified, medical assistants may only practice in the category of medical assistant for which they are certified, but they may receive training under the supervision of a health care professional in another category of medical assistant. Certified medical assistants must be at least 18 years of age or older, have satisfactorily completed a medical assistant program approved by the secretary, and demonstrate evidence of completing the education and training requirements for the category of medical assistant for which they are seeking certification.

The secretary of DOH (secretary) may adopt rules providing for the transition of health care assistants to medical assistants and ensure that health care assistants practicing before July 1, 2014, will be certified in the appropriate medical assistant category for that person's education and experience. The secretary must also adopt rules necessary to administer the program including establishing necessary forms, issuing or denying certificates, keeping records, hiring necessary staff, conducting hearings on appeals of denials of certification, and investigating violations. Medical assistants are subject to the Uniform Disciplinary Act. The certificates of medical assistants are not tied to the facility in which the medical assistant works and, instead, follows the medical assistant.

Appropriation: None.

Fiscal Note: Requested on January 16, 2012.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: OTHER: The current seven categories of medical assistants are unwieldy and confusing to clinics and practices. We are working on the House version of this bill and it is close to being ready. We support the regulation of medical assistants and we need to look at consolidating categories of the assistants. The bill should provide more parameters around the scope of practice of medical assistants. The 2011

sunrise review is not fully integrated into the language of the bill. The amount of supervision and delegation needs to be specified. We are in support of a career ladder.

Persons Testifying: OTHER: Carl Nelson, WA State Medical Assn.; Ellie Menzies, Service Employees International Union #1199; Sofia Aragon, WA State Nurses Assn.