Connecticut State Medical Society testimony on House Bill 6254 An Act Concerning The Administration Of Medications By Medical Assistants At Federally Qualified Health Centers

Presented to the Public Health Committee
March 7, 2017

Senator Gerratana, Senator Bond-Somers, Representative Steinberg and members of the Public Health Committee, on behalf of the physicians and physicians in training of the Connecticut State Medical Society (CSMS) and the organizations listed below, thank you for the opportunity to provide this testimony on Bill 6254 An Act Concerning The Administration Of Medications By Medical Assistants At Federally Qualified Health Centers.

CSMS recently provided testimony to this committee on House Bill 6025 An Act Allowing Medial Assistants To Administer Medication Under Supervision. That testimony is attached for your review. In our testimony, CSMS and several specialty organizations provided support for a change in statute to allow physicians ability to delegate the administration of certain forms of medications such as vaccines to medical assistants who are appropriately trained and have been credentialed by a national accreditation organization. In these situations, physicians would be required to provide direct supervision.

While we support this ability to be afforded to physicians practicing in Federally Qualified Health Centers, we strongly believe that such delegation authority should be provided only to physicians and not all health care providers authorized to prescribe medication. In addition, HB 6254 would allow any medical assistant who has completed on twenty-four hours of classroom training and not less than 8 hours of clinical training in the administration of medication to provide these delegated services. We do not believe this is appropriate training. Our position remains that medical assistants afforded this ability be appropriately trained and credentialed by a nationally accredited organization.

Furthermore, we believe that any legislation regarding changes to the medical assistant’s statute be consistent across practice settings as well as consistent in allowing only licensed physicians to provide such delegation. For that reason, we welcome the opportunity to work with committee members to ensure that one, properly crafted bill appropriately providing the delegation of certain medications to medical assistants move forward in committee.
Connecticut State Medical Society in support

House Bill 6025 An Act Allowing Medial Assistants To Administer Medication Under Supervision
Presented to the Public Health Committee
February 22, 2017

Senator Gerratana, Senator Bond-Somers, Representative Steinberg and members of the Public Health Committee, on behalf of the physicians and physicians in training of the Connecticut State Medical Society (CSMS) and the organizations listed below, thank you for the opportunity to provide this testimony in support House Bill 6025 An Act Allowing Medial Assistants To Administer Medication Under Supervision

The ability for certain, credentialed medical assistants to administer vaccines and other medications, was undertaken as part of a comprehensive process to review potential changes to scopes of practice established under Public Act 11-209. In 2012, CSMS actively participated in the process, along with representatives from several organizations with an interest in the issue. A final report on the process was submitted to this committee on February 1, 2013. We believe the final report offered information supporting a careful expansion of the role of the medical assistants in physician offices.

CSMS supports the ability to delegate the administration of certain forms of medication to medical assistants who are appropriately trained and have been credentialed by a nationally accredited organization. That said, while we support the intent of HB 6025, legislation should establish limitations and conditions under which such delegation can occur, and not change the level of supervision required for medical assistants. Currently, direct supervision of medical assistants is required in which the physician is present at the site in which the services are being provided.

At a time when we are collectively working to identify ways to increase access to quality healthcare to a rapidly increasing population of people seeking services, appropriate increased functions of medical assistants would afford physician practices the ability to provide services to a greater number of patients. More services could be provided in a shorter time period while maintaining the same high standards for care quality.

We welcome the opportunity to work with members of the committee to appropriately develop the language that should be contained in HB 6025.