

# Public Health Committee JOINT FAVORABLE REPORT

**Bill No.:** SB-213

**Title:** AN ACT ALLOWING MEDICAL ASSISTANTS TO ADMINISTER VACCINES.

**Vote Date:** 3/18/2022

**Vote Action:** Joint Favorable Substitute

**PH Date:** 3/7/2022

**File No.:** 217

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## **SPONSORS OF BILL:**

The Public Health Committee

## **REASONS FOR BILL:**

The COVID pandemic has placed significant stress and strain on primary care physicians, especially pediatricians, as they balance the need to see COVID patients while also serving the needs of their patients through regular wellness visits which require the administration of vaccines as recommended by the CDC. The recent shortage in nurses has exacerbated the situation. This bill would allow medical assistants (MAs) to administer vaccines in any setting other than a hospital. After having completed required certification and training, the MAs may administer vaccines only under the supervision and responsibility of a physician, Advanced Practice Registered Nurse (APRN) or Physician Assistant (PA.) The physician, APRN or PA must consent to oversee the MAs. In addition, the bill requires that the Department of Public Health (DPH) to obtain a list of state residents certified as medical assistants.

## **RESPONSE FROM ADMINISTRATION/AGENCY:**

**Representative Nicole Klarides-Ditria, CGA:** In her testimony, Rep. Klarides-Ditria highlights the challenges facing physicians as their roles have expanded during the pandemic. This, as they continue to fully serve the needs of their patients. The nursing shortage has only added to the strain on these physicians. She also shares that Connecticut is only one of only two states that does not permit MAs to administer vaccines. She urges the committee to pass this bill.

## **NATURE AND SOURCES OF SUPPORT:**

**The Connecticut State Medical Society (CSMS):** CSMS strongly supports this bill and has been before the General Assembly several times to ask for this expansion. The COVID

pandemic has highlighted the need to alleviate the stress placed on medical practices as they continue to administer vaccines and boosters against COVID- 19 throughout 2022 and beyond. It is vital that physicians be allowed to delegate the administration of vaccines to properly trained and supervised MAs to reach as many patients as possible. CSMS noted that during the pandemic, emergency federal regulations allowed pharmacy assistants with far less training than MAs to administer vaccines. The development of new health care delivery models will expand as well as preserve the public health.

**Fairfield County Medical Association:** The Association is in strong support of this legislation. This past year, Connecticut allowed pharmacy technicians to administer vaccines. These technicians receive only 1.5 hours of online training. MAs receive no less than 8 hours of training in a clinical setting to perform the same task. This procedure is safe, and the bill contains the safeguard that it would need to be performed under the direct order and supervision of a physician, PA or ARPN. Both hospitals and small medical practices are having difficulty recruiting and retaining nurses. It is far more difficult for a small medical practice to compete with hospitals that can offer more attractive compensation packages. Allowing MAs to administer vaccines will help smaller medical practices operate more efficiently. The Association points out that the Connecticut Department of Public Health Scope Review Committee indicated favorable support on this issue.

**Mary Blankson, Chief Nursing Officer, Community Health Center, Inc.:**

Ms. Blankson highlighted the unprecedented challenges in combatting COVID-19. Connecticut has allowed the advancement of other scopes of practice to the top of their training even prior to the pandemic. We should not limit the ability of MAs to administer vaccines when they have had the proper training, certification and supervision to perform this task She fully supports this bill.

**Meredith Renda, MD, Pediatrician:** In her testimony, Dr. Renda explained that pediatricians are often the first place a parent turns to with questions about their child. Over the past two years her practice has experienced a significant increase in testing and vaccinations regarding COVID-19 in addition to keeping up with typical well-child visits and caring for sick patients. The nursing shortage has also impacted the ability to provide the best care. Allowing MAs to administer vaccines would be a step in the right direction to remedy this situation.

**The CT ENT Society, CT Society of Eye Physicians, CT Dermatology and the CT Urology Society:** The Society supports the intent of the bill but requests that the Committee consider additional language. The pandemic has seen us making quick changes as the challenges regarding this situation continue to evolve. To be prepared for these changes, the Society believes that a physician should be able to delegate tasks to trained assistants under their supervision. The Society would recommend language that states "the ability to delegate tasks by physicians includes, but is not limited to, the administration of vaccines."

**Additional Sources of Support Include:**

- Matthew Abel, MD, Pediatrician
- Jamie Alon, MD, Pediatric Associates of Western CT
- Pushpa Mani, MD, Pediatrician at Childcare Associates, Danbury, CT
- Frank Fanella, MD, Candlewood Valley Pediatrics
- Jennifer Gruen, MD
- Amith Kamath, MD

- Kathryn Quinn, MD
- Marcy Dillon, MD
- Steven Wolfson, MD
- Sara Le Master, Community Health Center Association of CT

## **NATURE AND SOURCES OF OPPOSITION:**

### **Vanessa Pomarico, EdD, APRN, Lead Clinician for Diversity and Inclusion:**

Ms. Pomarico believes the current curriculum for MAs is not rigorous enough for her to support allowing MAs to administer vaccines. There is the potential for too many adverse reactions to occur such as infection, sepsis and death. As an educator, she encourages additional training as in a phlebotomy course. MAs need to understand the process behind vaccination as well as the possible ramifications of one being administered incorrectly. Ms. Pomarico opposes this bill.

**John Brady, Executive Vice President, AFT CT:** AFT CT opposes this bill in its current form, but with modifications would be acceptable. Training to become a certified MA varies from training in a medical office to obtaining an Associate Degree. The AFT CT recommends in addition to what is in this bill, that the state DPH develop and monitor a certification course that would equal the classroom and clinical hours received through an Associate Degree program. The second concern is oversight. MA certifications are not issued by the state and cannot be revoked by the state. Such certifications come from one of four associations, each with different training requirements. This is not the same as state certification and there is no mechanism to revoke or limit that association's certification. Thus, no way to revoke an MAs certification.

**Mary Consoli, RN, BSN:** Ms. Consoli shared that the administration of vaccines is not a simple task. It requires skills which are not in the scope of practice for MAs. MAs lack the depth of knowledge related to the patient's diagnosis, treatment and potential allergic reactions. She also questioned the phrase "other than a hospital setting" as being too vague and ambiguous. She objects to the meaning of medical assistant as written in Section 1 of the bill lines 1-13. There is no consistent certification for a medical assistant. She believes that the DPH, not a school or an association, should certify an MA. We need standards of practice and restrictions. For these reasons, she opposes the bill.

**Kimberly Sandor, MSN,RN, Executive Director, CT Nurses Association:** After a review of MA certification programs, discussions with CT Associates Degree MA, reviewing the functions of MAs in other states, and talking with APRN's, the Association offered the following recommendations to ensure employers receive minimally trained individuals to administer vaccines safely. The Association recommends limiting the age to receive a vaccine from an MA to an individual 18 years of age or older. Also, there is no language that defines the role of the Registered Nurse to the MA. The Association proposes clarification of training requirements due to the various pathways to become an MA. Finally, we recommend a requirement that an MA identify themselves as an MA to the patient.

**Reported by: Kathleen Panazza**

**Date: 3/31/22**