

**SPECIAL REPORT**

# MIEC Claims Alert

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## **Medical Assistants:** An update on the scope and limits of training

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*According to the Bureau of Labor Statistics and the American Association of Medical Assistants (AAMA), between the years of 2012 – 2022, the occupation of medical assistant (MA) will grow twice as fast as other occupations in the country. While many physicians, clinics, and medical groups employ MAs to perform legally permissible technical support services, few states have laws governing their practice. California law has clear guidelines on what medical assistants can and cannot do as part of their scope of practice. A “medical assistant” is defined by law as a person who is unlicensed, who performs basic administrative, clerical or technical support services for a licensed physician and surgeon, a podiatrist, a group of physicians, a community clinic, or a healthcare services plan; who is at least 18 years old, and has received the minimum hours of training required by law in infection control, and for the technical supportive services assigned. Medical assis-*

*tants are not physician assistants or nurses, and may not diagnose, treat, prescribe for, operate upon or perform any invasive procedure upon patients under any circumstances.*

*This Special Report Claims Alert reviews the role of an MA in a medical office practice. The laws that govern medical assistants are: California Business & Professions (B&P) Code Sections 1206.5, 2052, 2069, 2070 and 2544; and California Code of Regulations, Title 16, Division 13, Chapter 3, Article 2, Section 1366, et.seq. Additional information about MAs or their training and supervision may be obtained from: **Division of Allied Health Professions, Medical Board of California, 1426 Howe Avenue, Suite 100, Sacramento, CA 95825, (916) 263-2344, or from the Board’s website: [www.mbc.ca.gov](http://www.mbc.ca.gov). You may also obtain a copy of CMA’s On-Call Document # 3003, Medical Assistants by contacting MIEC’s Loss Prevention Department.***

**Special Report Claims Alert**

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## Training and certification requirements for medical assistants

**What training is required:** All medical assistants in California must receive training in the Center for Disease Control Guidelines for Infection Control in Hospital Personnel, and must demonstrate to the satisfaction of the training supervising physician, podiatrist or formal instructor an understanding of the purposes and techniques of infection control. Physicians may obtain a copy of the guideline from the CDC's website: <http://www.cdc.gov/hicpac/pubs.html>

Before performing technical support services [defined below], a medical assistant must receive such training that, "in the judgment of the supervising physician, podiatrist or instructor," is "necessary to assure the medical assistant's competence in performing that service at the appropriate standard of care." This training, and the required additional training for performing services involving skin puncture as described below, may be administered either by the supervising health care providers, or by qualified instructors, as provided below.

Before administering medications by intramuscular, subcutaneous or intradermal injection, performing skin tests or venipuncture for withdraw-

ing blood, or administering medication by inhalation, a medical assistant must have completed the training necessary to demonstrate proficiency to the supervising physician, podiatrist or instructor. The following are the required minimum hours, but if more training is necessary to demonstrate proficiency, additional training must be provided.

- Ten (10) clock hours of training in administering injections and performing skin tests, and/or
- Ten (10) clock hours of training in venipuncture and skin puncture for the purpose of withdrawing blood, and
- Satisfactory performance by the trainee of at least ten (10) each of intramuscular, subcutaneous, and intradermal injections and ten (10) skin tests, and/or at least ten (10) venipunctures and ten (10) skin punctures.
- For those only administering medication by inhalation, ten (10) clock hours of training in administering medication by inhalation.
- The above training must include instruction and demonstration of competency 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 test;
- ◇ Emergency procedures; and
- ◇ California law and regulations for medical assistants.

**Who may provide the training:** All MA training may be provided either by a health care provider or an approved institution. If by a health care provider, the training may be administered under the instruction of a licensed physician or podiatrist, or under a registered nurse (RN), licensed practical or vocational nurse (LPN or LVN), physician assistant (PA) or a "qualified medical assistant" acting under the direction of a physician or podiatrist. Even if the actual training is delegated by the physician or podiatrist, the physician or podiatrist remains responsible for determining both the content of the training and the proficiency of the medical assistant. However, only a licensed physician or respiratory care practitioner may train a MA to administer medication by inhalation. [A "qualified medical assistant" for purposes of training MAs must meet certain legal qualifications specified in 16 C.C.R. §1366.3(c).]

Training may also take place in certain secondary, postsecondary, or adult education programs in private or public schools, institutes or colleges as described in 16 C.C.R. §1366.3(a) (2). Several institutions offer medical assistant certification recognized by the Medical Board of California (MBC): the American Association of Medical Assistants (AAMA), the California Certifying Board for Medical Assistants (CMAA), American Medical Technologists (AMT), and Multiskilled Medical Certification Institute, Inc. (MMCI). **See Figure 1.** Certification by the AAMA and CMAA must be renewed every five (5) years. Copies of the laws, regulations and current information regarding certifying agencies may be obtained by contacting the Medical Board of California, Medical Assistant Section, at (916) 263-2393, or by reviewing the Medical Board's website information on Medical Assistants, at [http://mbc.ca.gov/Licensees/Physicians\\_and\\_Surgeons/Medical\\_Assistants](http://mbc.ca.gov/Licensees/Physicians_and_Surgeons/Medical_Assistants).

The MA must obtain a certificate from the instructor, whether the supervising physician or podiatrist, or the institutional instructor, that certifies in writing the place and date the training was provided, the content and duration of the training, and that the MA

was observed to demonstrate competence in the performance of each task or service. The certificate must be signed by the supervising physician or podiatrist, or the institutional instructor. More than one task or service may be certified in a single document and separate certification may be made for subsequent training<sup>1</sup>. **See Figure 2.** A copy of the certification must be retained as a record by the MA's employer.

### Scope of practice

Under California law, an MA in a private practice performs "basic administrative, clerical and technical supportive services." A "technical supportive service" is defined as "simple routine medical tasks and procedures that may be safely performed by a medical assistant who has limited training and who functions under the supervision of a licensed physician and surgeon or a licensed podiatrist, or a physician assistant, a nurse practitioner, or a certified nurse-midwife." A "technical supportive service" (specifically including administration of medication by intradermal, subcutaneous, or intramuscular injection, performance of skin tests, venipuncture or skin puncture for the purpose of withdrawing

blood) may only be performed by a MA upon "specific authorization" and "supervision" of a licensed physician and surgeon, or podiatrist.

The "supervision" of these tasks must be by a licensed physician or podiatrist who is physically present in the treatment facility during the MA's performance of the procedures. A supervising physician or podiatrist may delegate the supervision of these tasks to a physician assistant, nurse practitioner, or certified nurse-midwife if certain conditions are met. Such delegation may apply when the physician is not onsite, but there must be written instructions for the MA's performance of the procedures, developed in consultation with the involved physician assistant, nurse practitioner, or certified nurse-midwife, and those instructions must be encompassed within the relevant standardized procedures or protocols, as follows:

- The nurse practitioner or nurse midwife must be functioning pursuant to standardized procedure, as defined by protocol or B&P Code §2725; and
- The physician assistant must be providing services authorized by B&P Code §3502, and be approved to do so by the supervising physician and surgeon.

<sup>1</sup> Meaningful Use Requirement - In order to be counted in the numerator for Computerized Provider Order Entry (CPOE), CMS now requires all medical assistants entering CPOE hold certification by an entity outside of the organization employing the MA.

“*Specific authorization*” for an MA-performed technical supportive service means a specific written order, or a standing order, which authorizes the procedure(s) to be performed upon a patient. The specific order or a notation of the standing order must be placed in the patient’s medical record for each technical supportive services provided by the MA. The order may be made by a supervising physician or podiatrist, physician assistant, nurse practitioner, or certified nurse-midwife.

A record must be made in the patient’s chart of each supportive service performed by a medical assistant, identifying the MA, the task performed, and including the name of the physician or other health care provider who authorized performance of the task. [16 C.C.R. §1366(a)(5)]

According to B&P Code §1206.5 and §2069(e), MAs may perform tests “waived” under CLIA (Clinical Laboratory Improvement Amendments of 1988), as long as they meet CLIA’s minimal requirements for MAs conducting tasks in physician office laboratories, and the MA’s performance is specifically authorized as described above.

An MA who works in a physician office may also draw blood upon specific authorization and under the supervision of a licensed physician and surgeon

or podiatrist as long as the MA has received the training described above. As of April 9, 2006, an MA who is drawing blood outside a physician office or clinic must be a Certified Phlebotomy Technician under the regulations of the California Department of Public Health (CDPH). For information on how to become a certified phlebotomy technician, visit the CDPH web site at: <http://www.cdph.ca.gov/programs/lfs/pages/phlebotomist.aspx>.

### Authorized technical supportive services

In California, an MA can:

- Administer medication orally, sublingually, topically, vaginally, rectally, by single dose to a patient for immediate self-administration, or by inhalation if the medications are patient-specific and are routine for the patient. In every instance, prior to an MA’s administration of medication, a licensed physician, podiatrist or another person authorized by law to do so must verify the correct medication and dosage;
- Perform electrocardiogram, electroencephalogram, or plethysmography tests (except full body plethysmography). The MA may not interpret test findings or results;
- Apply and remove bandages and dressings, apply certain

orthopedic appliances such as: knee immobilizers, envelope slings, orthotics and similar devices; remove casts, splints and other external devices; obtain impressions for orthotics, padding and custom molded shoes; select and adjust crutches and instruct patients in their use. The MA may not apply or place casts or splints, or manipulate, reduce or set a fracture;

- Remove sutures or staples from superficial incisions or lacerations;
- Perform ear lavage to remove impacted cerumen;
- Collect (by non-invasive techniques) and preserve urine, sputum, semen, and stool specimens for testing;
- Assist patients in ambulation and transfers;
- Prepare patients for examinations or procedures by positioning, draping, shaving, and disinfecting treatment sites; and prepare a patient for gait analysis testing;
- Provide patient information and instructions as authorized by the physician or podiatrist;
- Collect and record patient data such as height, weight, vital signs, and basic information about presenting and previous conditions;

- Perform (but not interpret) simple medical office laboratory and screening tests (for example, the MA may measure and describe the test reaction, inform the health care provider, and make a record in the patient chart, but may not interpret the results);
- Cut nails of otherwise healthy patients;
- Fit prescription lenses or use any optical device in connection with ocular exercises, visual training, or orthoptics pursuant to B&P Code §2544 and 3042;
- Call in a prescription refill if specifically directed, and only a routine refill that is exact and has no changes. An MA may not call in a new prescription or a refill with changes; and
- Administer flu shots.

### Prohibited technical supportive services

Medical assistants *cannot*:

- Independently diagnose or treat patients;
- Perform arterial punctures;
- Start or discontinue IVs or insert urinary catheters;
- Administer physical therapy modalities (hot packs, diathermy, or exercise);
- Practice physical therapy; (they may assist a physician

by providing technical supportive services which utilize concepts of physical therapy);

- Provide medical treatment, analyze or read test results, advise patients about their condition, or treatment regimen, make assessments or perform any kind of medical care decision-making;
- Administer any anesthetic agent, whether topically or by injection;
- Independently prescribe or refill medications;
- Perform tests that involve the penetration of human tissues except for skin tests and drawing blood as provided by law;
- Apply orthopedic devices or other external devices (e.g., casts, splints);
- Dispense medication to patients;
- Renew a prescription (even if based on patient-specific protocols);
- Inject collagen or Botox;
- Use a laser or intense light devices for any reason; or
- Independently perform telephone triage.

*The above is not an exclusive itemization of the technical supportive services a medical assistant can and cannot perform. Additional information*

regarding MAs and their scope of training and practice may be obtained by calling the Licensing Operations Section of the Medical Board of California at (916) 263-2393.

### MA's in an optometry/ ophthalmology setting

On authorization and with a licensed physician or optometrist physically present in the treatment facility, an MA in an ophthalmology practice may:

- Fit prescription lenses;
- Prepare patients for an exam;
- Collect patient data (including histories);
- Perform simple non-invasive testing of visual acuity, pupils, and ocular motility;
- Perform automated visual field testing;
- Perform ophthalmic photography and digital imaging, tonometry, lensometry;
- Perform non-subjective auto-refraction in connection with subjective refraction procedures performed by an ophthalmologist or optometrist;
- Administer cycloplegiacs, mydriatics, and topical anesthetics that are not controlled substances, for ophthalmic purposes; and

- Perform pachymetry, keratometry, A scans, B scans, and electrodiagnostic testing.

### Surgical Technologists

According to the Bureau of Labor Statics, as the number of surgeries increase, the occupation of surgical technologist will grow nearly 20% by 2020. This unlicensed allied health professional is an integral surgical team member employed by hospitals, physician offices, outpatient care centers; and ambulatory surgical centers. There is currently no regulatory framework that defines the training or scope of practice for surgical technologists in California. The Association of Surgical Technologists ([www.ast.org](http://www.ast.org)) states that surgical technicians may:

- Prepare the surgical instruments and equipment, sterile drapes and sterile solutions;
- Assemble sterile and non-sterile equipment and ensure it is working properly;
- Prepare patients for surgery by washing, shaving and disinfecting the incision sites;
- Transport patients to the operating room and position them on the table;
- Observe patients' vital signs, check charts and assist the surgical team with putting on surgical gowns and gloves;

- Pass instruments and other sterile supplies to surgeons and surgical assistants;
- Hold retractors, cut smears, and help count sponges, needles supplies, and instruments;
- Prepare, care for and dispose of specimens taken for laboratory analysis;
- Assist in applying dressings;
- Operate sterilizing lights or suction machines and assist with diagnostic equipment;
- Transfer patients to the recovery room; and
- Clean and stock the operating room

Although not mandatory under California law, prudent employers of surgical technologists will require accreditation by the Commission on Accreditation of Allied Health Education ([www.caahep.org](http://www.caahep.org)) or by the Accrediting Bureau of Health Education Schools ([www.abhes.org](http://www.abhes.org)).

### MIEC's recommendations

The supervising physician or podiatrist is ultimately responsible and liable for the actions of MAs in his or her employ. For physicians who employ, or plan to hire a medical assistant, MIEC recommends the following:

- Ensure your medical assistants' level of competency: make certain that adequate training was provided (or that adequate training is provided on site), that you are personally familiar with their knowledge and experience, and that you are confident they can satisfactorily complete the delegated tasks.
- Certify the in-practice training by documenting the type and duration of training: preserve the date and signature that verifies the certification and place the certificate in the MA's employment file. A copy of the medical assistant's certification from a teaching institution should also be placed in his or her employment file.
- Develop a written office policy that specifies the duties an MA can and cannot perform in your practice.
- Ensure that MAs document in patients' charts each technical supportive service performed, including: the medical assistant's name, initials, or other identifier; the time and date; a description of the service performed; and the name of the physician and surgeon or podiatrist who authorized the service either directly or by a patient-specific standing order. (Example: 1/8/02, Per Dr. G's order, trimmed Mrs. Q's

toenails (10) before assisting her return to her son-in-law in the reception area. SS, MA).

- Consider MAs certified by formal training institutions as applicants for new positions to ensure that employees possess verifiable skills and training appropriate to medical assistants.
- Encourage medical assistants to participate in seminars, classes, in-service training or other means by which they can perfect their skills, stay current with relevant California laws, and learn ways to identify and prevent liability in an office practice.
- Update your Advanced Practice Nurses' Scope of Practice or PA's Delegation of Services Agreement to include supervisory responsibilities when you are not physically present in your practice.

### FAQs...

#### *Does a medical assistant have to be certified to practice in California?*

Yes, in the sense that MAs require certification by a physician employer or training institution that they have undergone the necessary training in order to practice in California. In California, the medical assistant is governed by the Medical Board of California, which sets the guidelines, train-

ing and scope of training for the profession. There is no formal governmental licensing or certification required. There are also several voluntary national certification organizations as listed above and in **Figure 1**.

#### *Does my MIEC insurance cover my medical assistants?*

Yes. They will be covered under your policy for no additional charge, provided that they are performing within the scope of their training.

#### *I refer to my medical assistant as "nurse" in the presence of patients; is that acceptable?*

No. By calling your MA "nurse," you are misleading your patients by implying that the MA has the training and licensure of a licensed vocational/practical nurse (LVN/LPN) or a registered nurse (RN). B&P Code §680 states that it is unlawful for persons to use the title of "nurse" in reference to himself or herself in any capacity, unless they are a registered nurse or a licensed vocational/practical nurse. The section also requires that a healthcare practitioner disclose, while working, his or her name and "practitioner's license status" on a name tag with letters of at least 18-point type.

#### *Can a medical assistant prescribe, refill or call in refills for medications?*

No. Only a physician or someone licensed to practice medicine can independently prescribe or authorize the refill of medications. A medical assistant may pass on to a pharmacy a physician's patient-specific authorization for the refill of a medication, but only for routine refills that have no changes. According to the MBC, an MA may call in routine refills that are exact and have no changes in the dosage levels. The refill must be patient-specific and documented in the patient's chart as a standing order. **MAs may not call in new prescriptions or any prescriptions that have changes.** Proper documentation of the transaction is important. When an MA documents refill information in the patient's chart, the entry should indicate that the authorization is "per Dr. XX."

#### *Can MAs renew prescriptions based on protocols?*

No, the MBC believes this would constitute the unlawful practice of medicine.

#### *Can a medical assistant perform acupuncture?*

No. According to the Medical Board of California and Business & Professions Code §730.5, it is unprofessional con-

duct and a crime for a person who is not licensed pursuant to the Acupuncture Licensure Act to perform acupuncture.

### ***Can MAs draw blood?***

Yes. MAs working in a medical office or “physician office laboratory” or clinic are authorized to perform venipuncture or skin puncture for the purpose of withdrawing blood upon specific authorization of the supervising physician or podiatrist, provided that the MA has been properly trained. The training must include the aforementioned ten hours of venipunctures and ten additional hours of practical training, and the satisfactory performance of at least ten venipunctures and ten skin punctures.

### ***Are MAs allowed to inject collagen?***

No. The injection of collagen or Botox does not fall within the medical assistant’s scope of practice. MAs are only authorized to inject “medications.”

### ***Are MAs allowed to use lasers or intense light devices to remove hair, spider veins, wrinkles, scars, moles, tattoos, or other blemishes?***

Medical assistants are not authorized to utilize lasers or intense light devices to remove those conditions. Nor may a medical assistant perform any type of dermabrasion.

For additional information on Medi-Spas see: MIEC’s *The Exchange No. 4, Loss Prevention FAQ: Medispas*, starting on page 14, or you may contact the Loss Prevention Department for a copy of the newsletter.

You may call MIEC’s Loss Prevention Department for answers to general professional liability questions about medical assistants. If you have patient-specific questions, please contact the Claims Department.

*We thank Sonja M. Dahl, Esq., of Donnelly Nelson Depolo & Murray, APC, Walnut Creek, California, for her assistance and review of this edition of Special Report Claims Alert.*

## **How to reach MIEC:**

### **Phone:**

Oakland: 510/428-9411

Honolulu: 808/545-7231

Boise: 208/344-6378

Alaska: 907/868-2500

Outside of area: 800/227-4527

### **Fax:**

Loss Prevention: 510/420-7066

Oakland: 510/654-4634

Honolulu: 808/531-5224

Boise: 208/344-7903

Alaska: 907/868-2805

### **Email:**

Lossprevention@miec.com

Underwriting@miec.com

Claims@miec.com

## **MIEC on the Internet:**

**[www.miec.com](http://www.miec.com)**

Certifying agencies recognized by the Medical Board of California  
include:

- American Association of Medical Assistants (AAMA), (800) 228-2262 or (312) 899-1500  
www.aama-ntl.org
- California Certifying Board for Medical Assistants (CMAA), (866) 622-2262  
www.ccbma.org
- Multiskilled Medical Certification Institute, Inc. (MMCI), (888) 625-8408  
www.mmciinc.com

*Figure 1*

**Medical Assistant Certification**  
[recommend physician/office letterhead]

I, \_\_\_\_\_, hereby certify that the following training was provided to:  
(name of supervising physician or podiatrist)

\_\_\_\_\_, by \_\_\_\_\_, and, and that I have  
(name of medical assistant) (name and qualifications of trainer)

observed said Medical Assistant demonstrate competence in the performance of each of  
the below-listed technical supportive services.

Date and Place of training: \_\_\_\_\_

Duration of training: \_\_\_\_\_

Content of training: \_\_\_\_\_

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature

*Figure 2*