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Medical assistants

Scope of practice, education, and credentialing

(The following was adapted from a presentation given by AAMA Executive Director Balasa for the National Council of State Boards of Nursing.)

Who are medical assistants?

Medical assistants are allied health professionals who work primarily in outpatient/ambulatory health care delivery settings, most often under direct physician supervision, who are able to be delegated both back-office clinical duties as well as front-office administrative duties. Medical assistants are different from: (1) nursing assistants; and (2) medication aides/assistants.

Nursing assistants work primarily in inpatient settings, most often under registered nurse (RN) supervision, and are delegated mostly bedside, clinical duties. Medication aides/assistants also work primarily in inpatient settings, and are able to pass medications to patients, usually under RN supervision.

From what laws do medical assistants derive their right to practice?

Because most medical assistants are delegated duties by physicians, in the majority of American jurisdictions medical

assistants derive their legal authority to practice from state medical practice acts and/or the regulations and policies of the state boards of medical examiners. In most states, medical assistants work under direct physician supervision. “Direct supervision” is usually defined as the delegating/supervising/overseeing physician(s) being on the premises and reasonably available (although not necessarily in the same room) when medical assistants are undertaking clinical duties other than the most basic tasks, such as taking vital signs and collecting certain specimens (e.g., urine and sputum).

Does this mean that physicians are permitted to delegate any duties to a medical assistant as long as they are done under direct physician supervision?

No. Medical assistants cannot be delegated any duties that: (1) constitute the practice of medicine or require the skill and knowledge of a licensed physician; (2) are restricted in state law to other health professionals; (3) require the medical assistant to exercise independent professional judgment or to make clinical assessments, evaluations, or interpretations.

Is it legal for physicians to assign to other health professionals supervisory responsibilities over medical assistants?

Yes. Under the laws of most states, physicians are permitted (explicitly or implicitly) to ask health professionals, such as advanced practice nurses (APNs)—most often nurse practitioners—physician assistants, and registered nurses to supervise medical assistants in the performance of duties delegated to the medical assistants by the physician. This type of supervision is sometimes referred to as “intermediary supervision.”

Are the health professionals exercising intermediary supervision legally liable for negligence by the medical assistants?

The delegating physician is legally responsible for negligent acts by the medical assistant. Medical assistants are also legally responsible for their negligent acts. Health professionals exercising intermediary supervision are usually *not* responsible for the negligent acts of medical assistants *unless* the physician has asked the intermediary professional to monitor and evaluate the competence of the medical assistants.

Is it legal for a nurse to exercise such intermediary supervision assigned by a physician if the physician's delegation to medical assistants is not based on the state nurse practice act and the rules and policies of the state board of nursing?

Yes. Note the following from *Working with Others: A Position Paper*, a publication of the National Council of State Boards of Nursing¹:

Accepting an assignment to supervise— There are situations when a nurse may be assigned to supervise a staff member who has been delegated tasks by another licensed provider (e.g., in a physician's office). There are other situations where the authority to provide tasks or procedures ... has been granted by a statute or rule/regulation separate from the Nurse Practice Act or rules/regulations.

If an APN is working independently, what duties can the APN delegate to medical assistants?

An increasing number of American jurisdictions are permitting advanced practice nurses—especially nurse practitioners—to practice independently and autonomously. In other words, these APNs are allowed in some states to work without a collaboration agreement with an overseeing physician. In such situations, the operative law for determining what APNs are permitted to delegate to unlicensed allied health professionals, such as medical assistants, is the state nurse practice act and the rules, policies, and opinions of the state board of nursing.

What formal education programs do medical assistants attend?

There are many varieties of “medical assisting” education programs throughout the United States. Some of these programs only teach the administrative aspects of medical assisting, and others only teach the clinical aspects. “Medical assisting” courses are taught at both the second-

ary and postsecondary levels. Medical assisting programs at the postsecondary level are taught in community colleges and vocational/technical schools. Such postsecondary academic programs are either: (1) one-year certificate or diploma programs; or (2) two-year associate degree programs.

However, there are only two accrediting bodies that are recognized by the United States Department of Education or the Council for Higher Education Accreditation as programmatic accreditors of postsecondary medical assisting programs: (1) the Commission on Accreditation of Allied Health Education Programs (CAAHEP); and (2) the Accrediting Bureau of Health Education Schools (ABHES). Medical assisting programs accredited by CAAHEP and ABHES require that both clinical and administrative aspects of medical assisting be taught. Only graduates of CAAHEP or ABHES accredited medical assisting programs are eligible to take the CMA (AAMA) Certification Examination given by the Certifying Board of the American Association of Medical Assistants (AAMA).

What medical assisting credentials can medical assistants receive?

As is the case with medical assisting education programs, there are many different “medical assisting” credentials in the United States. There are “medical assisting” tests and credentials that are exclusively administrative. There are “medical assisting” tests and credentials that are exclusively clinical. There are medical assisting tests and credentials that measure both administrative and clinical knowledge.

The CMA (AAMA) certification is the only medical assisting credentialing program that requires candidates to graduate from an accredited postsecondary medical assisting program. As stated above, only graduates of CAAHEP or ABHES accredited medical assisting programs

are eligible to sit for the CMA (AAMA) Certification Examination.

In addition, the CMA (AAMA) is the only medical assisting credentialing program that utilizes the National Board of Medical Examiners (NBME) as test consultant. As a result, the reliability, validity, and security of the CMA (AAMA) Certification Examination are of the highest order.

Does the AAMA inform medical assistants that it is against the law for medical assistants to refer to themselves as “nurses”?

Yes. For more than 20 years, the AAMA has stressed—both in writing and in oral presentations—that medical assistants must *not*, in any circumstances, refer to themselves as nurses. Note the following excerpt from an article in *CMA Today*:

It is unethical, illegal, and a disservice to the medical assisting profession for medical assistants to refer to themselves as “nurses,” “office nurses,” “doctors’ nurses,” or any other generic term or phrase that even remotely implies that medical assistants are nurses.²

Medical assistants have become an integral part of the health care delivery team. As employers and other health professionals strive to understand the distinctions regarding the education, credentialing, and scope-of-practice issues of medical assisting staff, the AAMA stands dedicated in providing relevant and reliable information on the profession. ◀

References

1. National Council of State Boards of Nursing. *Working with others: a position paper*. https://www.ncsbn.org/Working_with_Others.pdf. 2005:15. Accessed April 3, 2013.
2. Balasa DA. Medical assistants must not refer to themselves as nurses. *CMA Today*. 2011;44(1):6-7. <http://www.aama-ntl.org/CMAToday/archives/publicaffairs/details.aspx?ArticleID=795>. Accessed March 14, 2013.

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