

May 2016

Thank you for your inquiry concerning what duties are delegable legally to medical assistants according to Michigan law.

According to 333.16215 of the Michigan Public Health Code:

(1) A licensee [viz., a licensed physician] who holds a license other than a health profession subfield license may delegate to a licensed or unlicensed individual who is otherwise qualified by education, training, or experience the performance of selected acts, tasks, or functions where the acts, tasks, or functions fall within the scope of practice of the licensee's profession and will be performed under the licensee's supervision. An act, task, or function shall not be delegated under this section which, under standards of acceptable and prevailing practice, requires the level of education, skill, and judgment required of a licensee under this article.

There is no language in Michigan law that more specifically delineates what duties are delegable by physicians to medical assistants. Nevertheless, it is my legal opinion that this language permits physicians to delegate a reasonable scope of clinical procedures (including venipuncture, intramuscular, intradermal, and subcutaneous **injections**, drafting prescriptions for the physician's review and signature, and taking vital signs) to competent and knowledgeable medical assistants working under their direct supervision in outpatient settings. Procedures which constitute the practice of medicine, or which state law **specifically and unambiguously** permits only certain licensed health care professionals to perform, however, may not be delegated to unlicensed personnel such as medical assistants.

The question of delegating triage responsibilities is also not specifically addressed in Michigan law. It is my legal judgment, however, that the delegation to a medical assistant of telephone screening which is specifically authorized in writing by the supervising physician(s), requires the medical assistant to follow set protocols/decision trees/algorithms established by the physician, and does not require the exercise of independent professional judgment or the making of clinical assessments/evaluations is not forbidden by Michigan law.

I have enclosed the *Occupational Analysis of the CMA (AAMA)*, the entry-level competencies taught in medical assisting programs accredited by CAAHEP, and the *Content Outline* of the CMA (AAMA) Certification Examination. Although these documents do not have the force of law, they should offer some guidance on scope of practice.

I hope this information is helpful. Please do not hesitate to contact me if you have further questions or need additional assistance.

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