

# HOUSE BILL REPORT

## SSB 5940

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**As Reported by House Committee On:**  
Health Care & Wellness  
Appropriations

**Title:** An act relating to creating a medical assistant-EMT certification.

**Brief Description:** Creating a medical assistant-EMT certification.

**Sponsors:** Senate Committee on Health & Long Term Care (originally sponsored by Senators Van De Wege, Hasegawa, Keiser, Lovick, Muzzall and Wagoner).

**Brief History:**

**Committee Activity:**

Health Care & Wellness: 2/14/24, 2/16/24 [DP];  
Appropriations: 2/22/24, 2/26/24 [DP].

**Brief Summary of Substitute Bill**

- Creates a medical assistant-emergency medical technician certification.

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### HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

**Majority Report:** Do pass. Signed by 15 members: Representatives Riccelli, Chair; Bateman, Vice Chair; Schmick, Ranking Minority Member; Hutchins, Assistant Ranking Minority Member; Bronoske, Caldier, Davis, Harris, Macri, Mosbrucker, Orwall, Simmons, Stonier, Thai and Tharinger.

**Staff:** Emily Poole (786-7106).

**Background:**

The Department of Health (DOH) issues certifications for several different types of medical assistants (MAs), including MA-certified, MA-registered, MA-hemodialysis technician, and

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MA-phlebotomist. The Secretary of Health (Secretary) adopts minimum qualifications and requirements for each type of MA.

The DOH also licenses emergency medical services (EMS) providers, including emergency medical technicians (EMTs), advanced EMTs, and paramedics. Certified EMS personnel may only provide services within the scope of care established in the curriculum of the person's level of certification or any specialized training.

An EMT is a person authorized by the Secretary to provide emergency medical care under the supervision and direction of an approved Medical Program Director (MPD), which may include participating in an emergency services supervisory organization or a community assistance referral and education services program or providing collaborative medical care, if the participation or provision of collaborative medical care does not exceed the participant's training and certification.

An advanced EMT is a person who has been examined and certified by the Secretary as an intermediate life support technician.

A paramedic is a person certified by the Secretary who has been trained in an approved program to perform all phases of prehospital emergency medical care, including advanced life support, under the authorization of an MPD or approved physician delegate.

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### **Summary of Bill:**

A medical assistant-EMT (MA-EMT) is defined as a person who holds an EMT certification, an advanced EMT certification, or a paramedic certification, and is certified by the DOH to perform certain authorized functions under the supervision of a health care practitioner.

#### Certification.

Any person with an EMT, advanced EMT, or paramedic certification is eligible for an MA-EMT certification with no additional training or examination requirements if the EMT, advanced EMT, or paramedic certification is in good standing. The qualifications established by the Secretary for an MA-EMT must be consistent with the qualifications for the EMT certification, the advanced EMT certification, or the paramedic certification.

A person may not practice as an MA-EMT unless the person is certified to do so.

An MA-EMT certification is transferable only between licensed hospitals in the state.

#### Authorized Duties.

Medical assistant-emergency medical technicians may perform the following duties delegated by, and under the supervision of, a health care practitioner if the duties are within

the scope, training, and endorsements of the MA-EMT's EMT, advanced EMT, or paramedic certification:

- fundamental procedures including disposing of biohazardous materials and practicing standard precautions;
- clinical procedures including taking vital signs, preparing patients for examination, observing and reporting patients' signs or symptoms, simple eye irrigation, hemorrhage control with direct pressure or hemostatic gauze, spinal and extremity motion restriction and immobilization, oxygen administration, airway maintenance, stabilization, and suctioning, cardiopulmonary resuscitation, and use of automated external defibrillators and semiautomated external defibrillators;
- specimen collection including capillary puncture and venipuncture and instructing patients in proper technique to collect urine and fecal specimens;
- diagnostic testing including electrocardiography and respiratory testing;
- patient care including telephone and in-person screenings limited to intake of information without requiring the exercise of judgment based on clinical knowledge, obtaining vital signs, obtaining and recording patient history, and preparing and maintaining examination and treatment areas;
- administering certain medications; and
- establishing intravenous lines.

An MA-EMT may only administer medications if the drugs are:

- administered by unit or single dosage, or by a dosage calculated and verified by a health care practitioner;
- vaccines, opioid antagonists, or oral glucose, as authorized by a health care practitioner under the scope of the practitioner's license; and
- administered pursuant to a written order from a health care practitioner.

An MA-EMT may establish intravenous lines for diagnostic or therapeutic purposes, without administering medications, and remove intravenous lines under the supervision of a health care practitioner.

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**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

**Staff Summary of Public Testimony:**

(In support) This bill is a creative effort to address a workforce shortage. In rural counties, there is no money to pay for EMS providers. This bill will give EMS providers the opportunity to gain paid employment and valuable experience in a hospital setting within

their region. There are 21 states that have adopted a similar credential. This bill sets out a narrow set of authorized duties for MA-EMTs.

(Opposed) The level of training varies widely for EMTs, advanced EMTs, and paramedics and this bill seems to combine the different levels of training into one credential. The scope of practice set out in this bill is concerning, including for nurses who would be tasked with supervising MA-EMTs.

**Persons Testifying:** (In support) Colton Myers, Ferry County Public Hospital District; and Katie Kolan, Washington State Hospital Association.

(Opposed) Erin Allison, Washington State Nurses Association.

**Persons Signed In To Testify But Not Testifying:** None.

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## HOUSE COMMITTEE ON APPROPRIATIONS

**Majority Report:** Do pass. Signed by 24 members: Representatives Bergquist, Vice Chair; Corry, Ranking Minority Member; Chambers, Assistant Ranking Minority Member; Connors, Assistant Ranking Minority Member; Couture, Assistant Ranking Minority Member; Berg, Callan, Chopp, Davis, Harris, Lekanoff, Pollet, Riccelli, Rude, Ryu, Sandlin, Schmick, Senn, Simmons, Slatter, Springer, Stokesbary, Tharinger and Wilcox.

**Minority Report:** Without recommendation. Signed by 5 members: Representatives Ormsby, Chair; Gregerson, Vice Chair; Macri, Vice Chair; Fitzgibbon and Stonier.

**Staff:** Lily Smith (786-7175).

### **Summary of Recommendation of Committee On Appropriations Compared to Recommendation of Committee On Health Care & Wellness:**

No new changes were recommended.

**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

### **Staff Summary of Public Testimony:**

(In support) This bill creatively addresses a profound workforce shortage and helps hospitals, which are very familiar with this license type and are looking to fill these gaps.

Many other states are doing something similar. This bill helps to keep EMS personnel in the district they are currently working. Patient safety is paramount to this policy, and the list of duties for this profession is very narrow compared to what EMS personnel can already do in the field.

(Opposed) None.

**Persons Testifying:** Katie Kolan, Washington State Hospital Association.

**Persons Signed In To Testify But Not Testifying:** None.