

Bobby Jindal
GOVERNOR



Alan Levine
SECRETARY

State of Louisiana
Department of Health and Hospitals
Office of the Secretary

August 18, 2009

The Honorable Willie Mount, Chair
Senate Health and Welfare Committee
State Capital
P.O. Box 94183
Baton Rouge, LA 70804

Dear Senator Mount:

In response to Act No. 293 (HB 246) of the 2007 Regular Session, the Louisiana Department of Health and Hospitals (DHH) submits the enclosed report. Act No. 293 created a pilot program to provide for the certification of medication attendants to perform certain functions in licensed nursing homes. The bill provides that the pilot program be administered by DHH and remain in effect until August 1, 2011. The bill requires that DHH submit annual interim reports to the House and Senate committees on health and welfare regarding the progress of the pilot program.

The health standards section in the bureau of health services financing within DHH is available to discuss the enclosed report and recommendations with you and the members of the Senate Health and Welfare Committee. Please contact Erin Rabalais, manager, health standards section, at (225) 342-4997 or Denise Traylor, medication attendant certified program manager, at (225) 342-7715 with any questions or comments you may have.

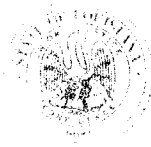
Sincerely,

A handwritten signature in cursive script, appearing to read "Alan Levine".

Alan Levine
Secretary

Enclosures

Bobby Jindal
GOVERNOR



Alan Levine
SECRETARY

State of Louisiana
Department of Health and Hospitals
Office of the Secretary

August 18, 2009

The Honorable Kay Katz, Chair
House Health and Welfare Committee
State Capital
P.O. Box 44486
Baton Rouge, LA 70804

Dear Representative Katz:

In response to Act No. 293 (HB 246) of the 2007 Regular Session, the Louisiana Department of Health and Hospitals (DHH) submits the enclosed report. Act No. 293 created a pilot program to provide for the certification of medication attendants to perform certain functions in licensed nursing homes. The bill provides that the pilot program be administered by DHH and remain in effect until August 1, 2011. The bill requires that DHH submit annual interim reports to the House and Senate committees on health and welfare regarding the progress of the pilot program.

The health standards section in the bureau of health services financing within DHH is available to discuss the enclosed report and recommendations with you and the members of the House Health and Welfare Committee. Please contact Erin Rabalais, manager, health standards section, at (225) 342-4997 or Denise Traylor, medication attendant certified program manager, at (225) 342-7715 with any questions or comments you may have.

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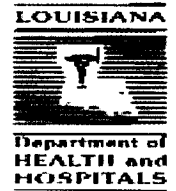
A handwritten signature in cursive script that reads "Alan Levine".

Alan Levine
Secretary

Enclosures



Louisiana Department of Health and Hospitals
Health Standards Section
Act 293 of the 2007 Regular Session
Medication Attendant Certified Pilot Program
2009 Annual Legislative Report



Act 293 – Medication Attendants Certified Pilot Program, (MAC), was signed into law by Governor Bobby Jindal on July 9, 2007. The first year following the legislation was spent developing rules and regulations with the La State Board of Nursing, the La State Board for Practical Nursing, La Community and Technical Colleges, La State Nurses Association, the State Board of Pharmacy, La Nursing Home Association, Governor’s Office of Elderly Affairs and DHH Health Standards. The MAC rule was promulgated in the Louisiana Register, Vol. 34, No.07, on July 20, 2008. Act 293 created a pilot program to authorize certification of Medication Attendants to perform certain functions, including the administration of certain medications, to nursing home residents in licensed nursing homes, until August 1, 2011. This program is administered by the Department of Health and Hospitals, (the department).

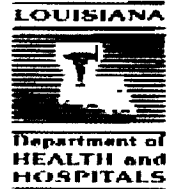
The training curriculum is offered through the Louisiana Community and Technical College system, (LCTC). The length of the program is 120 clock hours. Students must have a minimum of 1 year of experience as a Certified Nurse Aide, (CNA), must be currently employed in a facility as a CNA on the first official day of enrollment, and must successfully pass a statewide criminal history background check and a comprehensive drug screening test. A referral letter from the applicant’s current employer is also required. Clinical training sites will be established through contracts with nursing homes in the region of the LCTC. Once training is complete and the student has passed the competency evaluation, the LCTC will report those individuals to the registry. The Medication Attendant Certified Registry will be maintained through a contract with the Louisiana Board of Examiners of Nursing Facility Administrators.

Nursing Homes must apply to the department to utilize MACs. Upon receipt of the application, the department will review the facility’s compliance history, with emphasis being placed on deficiencies cited in the area of medication administration such as significant medication errors, medication error rates and repeat deficiencies. If a facility is denied participation, they may ask for a reconsideration and review of the circumstances which contributed to the denial.

The department, through its Bureau of Appeals, has provided for a process of the review and investigation of all allegations of resident abuse, neglect or misappropriation of residents’ property or funds by MACs.



Louisiana Department of Health and Hospitals
Health Standards Section
Act 293 of the 2007 Regular Session
Medication Attendant Certified Pilot Program
2009 Annual Legislative Report



In order to evaluate the effectiveness of the MAC program and its impact on the quality of patient care in nursing homes, the education programs and nursing facilities that choose to participate in the pilot program must participate in the evaluation of all components of the program, utilizing evaluation forms designated by the department. Nursing facilities shall also be required to maintain documentation of medication errors on an ongoing basis and submit this information to the department on a monthly basis.

STATUS OF THE LCTCs AND NURSING HOMES THAT HAVE EXPRESSED INTEREST IN PARTICIPATING IN THE PILOT PROJECT

6 LCTCs HAVE APPLIED TO TEACH THE CURRICULUM:

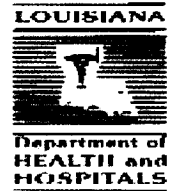
Acadian Campus; Crowley, La.
Evangeline Campus; St. Martinville, La.
Greater Shreveport/Red River Region Campus; Shreveport, La.
Gulf Area Campus; Abbeville, La.
Northeast Campus; Winnsboro, La.
T.H. Harris Campus; Opelousas, La.

17 NURSING HOMES HAVE BEEN SOLICITED FOR CLINICAL TRAINING SITES:

Charlyn Rehabilitation and Nursing Center; Winnsboro, La.
Consolata Home; New Iberia, La.
Cypress Point Nursing and Rehabilitation Center; Bossier City, La.
Eastridge Nursing Center; Abbeville, La.
Eunice Manor; Eunice, La.
Kaplan Healthcare Center; Kaplan, La.
Landmark Nursing Center of Shreveport; Shreveport, La.
Live Oak; Shreveport, La.
Maison Deville Doctor's Care; Opelousas, La.
Maison du Monde; Abbeville, La.
New Iberia Manor South; New Iberia, La.



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Our Lady of Prompt Succor Nursing Facility; Opelousas, La.
Plantation Manor Nursing and Rehabilitation Center; Winnsboro, La.
Senior Village; Opelousas, La.
Southwind Nursing and Rehabilitation Center; Crowley, La.
Vermillion Health Care Center; Kaplan, La.
Village Health Care at The Glen; Shreveport, La.

***Awaiting completed applications on 15 of the above nursing homes.**

1 NURSING HOME DENIED APPROVAL TO PARTICIPATE DUE TO COMPLIANCE HISTORY

1 LCTC IS APPROVED TO TRAIN:

Acadian Campus in Crowley, La.; will utilize Southwind Nursing and Rehabilitation Center in Crowley, La., as clinical training site.

5 LCTCs NOT APPROVED TO TEACH CURRICULUM:

Nursing homes with whom they have contracted to provide clinical training have not submitted completed applications and/or contracts for evaluation.

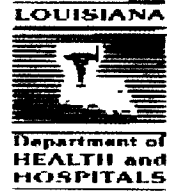
7 NURSING HOMES HAVE SUBMITTED APPLICATIONS TO PARTICIPATE IN THE PILOT PROGRAM, BUT NO LCTC IN THEIR AREA HAS APPLIED TO TEACH THE CURRICULUM:

Autumn Leaves Nursing & Rehabilitation Center; Winnfield, La.
Golden Age Nursing Home; Denham Springs, La.
Gonzales Healthcare Center; Gonzales, La.
Jefferson Healthcare Center; Jefferson, La.
Riverside Nursing Home; Monroe, La.
The Guest House; Baton Rouge, La.

Awaiting completed applications on 6 of the above nursing homes.



Louisiana Department of Health and Hospitals
Health Standards Section
Act 293 of the 2007 Regular Session
Medication Attendant Certified Pilot Program
2009 Annual Legislative Report



1 NURSING HOME APPROVED AS A CLINICAL TRAINING/MAC UTILIZATION SITE WITH NO LCTC IN THEIR AREA TO TEACH CURRICULUM

Gonzales Healthcare Center; Gonzales, La.

There have been no training classes begun as of this date.

No students have been trained or certified, so no evaluations have been submitted.

No renewals, denials, revocations, suspensions or appeals.

No requests for reciprocity.

REASONS GIVEN BY NURSING HOMES FOR NOT APPLYING FOR THE PROGRAM

Fears about liability by supervising nurses

Inability to include the MAC in calculating nursing hours

Curriculum through LCTC not available in all areas of the state

PROGRAM PROBLEMS

Facilities submitting incomplete applications for evaluation.

Contact Information:

Denise Traylor, BSN, RN
Medication Attendant Certified Program Manager
DHH/Health Standards Section
500 Laurel St., Suite 100
Baton Rouge, La. 70801-1811
225-342-7715 phone
225-342-0453 fax
Denise.Traylor@LA.GOV

ACT No. 293

Regular Session, 2007

HOUSE BILL NO. 246

BY REPRESENTATIVE MCDONALD

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

1 AN ACT

2 To enact Part I-A of Chapter 11-A of Title 37 of the Louisiana Revised Statutes of 1950, to
3 be comprised of R.S. 37:1026.1 through 1026.9, relative to certified medication
4 attendants in licensed nursing homes; to provide for the purpose, application, and
5 definitions; to authorize the Department of Health and Hospitals to administer the
6 medication attendant pilot program; to establish qualifications for certification; to
7 provide for authorized and prohibited functions of medication attendants; to require
8 promulgation of rules and regulations; to establish medication administration
9 applicant requirements; to establish a registry; to provide for a termination date; to
10 provide an effective date; and to provide for related matters.

11 Be it enacted by the Legislature of Louisiana:

12 Section 1. Part I-A of Chapter 11-A of Title 37 of the Louisiana Revised Statutes of
13 1950, comprised of R.S. 37:1026.1 through 1026.9, is hereby enacted to read as follows:

14 PART I-A. MEDICATION ATTENDANTS IN LICENSED NURSING HOMES

15 §1026.1. Purpose

16 The purpose of this Part is to create a pilot program that shall authorize
17 certification of medication attendants to perform certain functions in licensed nursing
18 homes until August 1, 2011. This program shall be administered by the Department
19 of Health and Hospitals.

20 §1026.2. Applicability

21 This Part shall apply only to nursing homes licensed by the Department of
22 Health and Hospitals pursuant to R.S. 40:2009.3.

1 §1026.3. Definitions

2 As used in this Part:

3 (1) "Authorized prescriber" means a licensed physician, dentist, or other
4 health care provider authorized by law to prescribe drugs, medications, medical
5 devices or appliances, and health care regimens.

6 (2) "Medication attendant" means a person who, pursuant to this Part, has
7 completed a medication administration course approved by the Department of Health
8 and Hospitals, passed an examination for medication attendants approved by the
9 Department of Health and Hospitals, and received a current certification from the
10 Department of Health and Hospitals.

11 (3) "Department" means the Department of Health and Hospitals.

12 (4) "Licensed nursing home" means a facility established and licensed
13 pursuant to R.S. 40:2009.3.

14 §1026.4. Medication Attendants

15 Persons who have successfully completed an approved medication
16 administration course, passed a qualifying certification examination, and been issued
17 a current certification by the department pursuant to this Part shall be permitted to
18 administer certain medications to residents of licensed nursing homes and shall be
19 considered direct care staff with regard to nursing homes. The ratio of supervising
20 licensed personnel to certified medication attendants shall be specified in department
21 rules.

22 §1026.5. Authorized and prohibited functions of medication attendants

23 A. The authorized functions of the certified medication attendant shall
24 include the following:

25 (1) Delivery and administration of certain prescribed medications ordered
26 by an authorized prescriber for patients under the supervision of a licensed nurse by
27 the following methods:

28 (a) Orally.

29 (b) Topically.

30 (c) Drops for eye, ear, or nose.

- 1 (d) Vaginally.
- 2 (e) Rectally.
- 3 (f) Transdermally.
- 4 (g) Via oral inhaler.
- 5 (2) Recording medications administered to the resident in the resident's
- 6 chart.
- 7 (3) Charting medication effects and side effects.
- 8 B. The prohibited functions of the medication attendant shall include the
- 9 following:
- 10 (1) Administering controlled dangerous substances or other substances
- 11 identified as high risk by the department, unless otherwise specified in department
- 12 rules.
- 13 (2) Administering medications by intramuscular, intravenous, subcutaneous,
- 14 or other routes restricted in department rules.
- 15 (3) Administering medications by the oral inhalant aerosol route, unless
- 16 administering a premeasured dosage unit provided by the manufacturer.
- 17 (4) Administering medications ordered on a pro re nata, as-needed, basis,
- 18 except on an individualized basis as specified in department rules.
- 19 (5) Receiving or assuming responsibility for writing oral or telephone orders
- 20 from an authorized prescriber.
- 21 (6) Performing a task involving the administration of medication if the
- 22 medication administration requires an assessment of the patient's physical status, the
- 23 need for medication, a calculation of the dosage of the medication, or the conversion
- 24 of a dosage.
- 25 (7) Performing a task involving the administration of a medication if the
- 26 patient is unstable or has changing nursing needs, unless the supervising nurse is
- 27 available to monitor the patient and the effect of the medication on the patient.
- 28 §1026.6. Promulgation of rules and regulations
- 29 A. The department, in consultation with an advisory committee to be
- 30 comprised of one representative each, designated by the chief elected or

1 administrative officer, of the Louisiana State Nurses' Association, Louisiana Board
2 of Pharmacy, Louisiana State Board of Practical Nurse Examiners, Louisiana State
3 Board of Nursing, Louisiana State Long-Term Care Ombudsman Program in the
4 office of the governor, Board of Supervisors of Community and Technical Colleges,
5 and Louisiana Nursing Home Association, shall promulgate rules and regulations
6 pursuant to the Administrative Procedure Act for the enforcement of this Part by
7 March 31, 2008.

8 B. The rules and regulations shall include but not be limited to:

9 (1) Establishment of a medication administration course of not less than one
10 hundred hours.

11 (2) Establishment of standards, curricula, and training requirements for a
12 medication administration course for certified medication attendants, including but
13 not limited to:

14 (a) Legal aspects of medication administration.

15 (b) Roles of health care providers in relation to medication administration.

16 (c) Responsibilities of medication administration.

17 (d) Definitions.

18 (e) Terminology.

19 (f) Classification.

20 (g) Measurement of medications.

21 (h) Identification of residents.

22 (i) Documentation.

23 (j) Effects of medications.

24 (k) Distribution, care, and handling of medications.

25 (3) Examination and certification of medication attendants.

26 (4) Performance evaluations for certified medication attendants.

27 (5) Application for and issuance, renewal, suspension, and revocation of
28 certificates of medication attendants.

29 (6) Ratios of supervising licensed nurses to medication attendants in licensed
30 nursing homes.

- 1 ~~(7) Appeal procedures.~~
- 2 ~~(8) Analysis of statistical data pertaining to medication error rates, resident~~
- 3 ~~outcomes, and satisfaction.~~
- 4 ~~(9) Evaluation of the training program to determine its effectiveness.~~
- 5 ~~(10) Preparation and delivery of annual interim reports to the Senate~~
- 6 ~~Committee on Health and Welfare and the House Committee on Health and Welfare~~
- 7 ~~not less than thirty days prior to the commencement of the regular session of the~~
- 8 ~~legislature and a final report to same not later than January 31, 2011.~~
- 9 §1026.7. Medication administration course; qualifications of applicants
- 10 Each person accepted to participate in the medication administration course
- 11 shall meet the following minimum qualifications:
- 12 (1) Be a citizen of the United States, a United States national, or an alien
- 13 lawfully admitted for permanent residency in the United States.
- 14 (2) Have attained a high school diploma or approved equivalent.
- 15 (3) Be at least eighteen years old.
- 16 (4) Be proficient in reading and writing the English language.
- 17 (5) Be free of abused substances as evidenced by periodic random testing.
- 18 (6) Pass a criminal background check and have no history of criminal
- 19 activities that may subject persons entrusted to their care to potential harm.
- 20 (7) Be a certified nursing assistant with a valid certification.
- 21 (8) Have a minimum of one year's experience in a nursing home as a
- 22 certified nursing assistant or graduated from a nursing program.
- 23 (9) Have a letter of recommendation from an administrator or a director of
- 24 nursing.
- 25 (10) Any qualifications specified in the rules promulgated by the department.
- 26 §1026.8. Registry
- 27 A permanent register of all persons certified to practice as a medication
- 28 attendant shall be maintained by the department as part of the nurse aide registry.
- 29 Any nursing home utilizing a medication attendant shall verify with this registry that
- 30 the person has a current certification.

1 §1026.9. Termination date

2 The provisions and authority of this Part shall terminate on August 1, 2011.

3 Section 2. This Act shall become effective upon signature by the governor or, if not
4 signed by the governor, upon expiration of the time for bills to become law without signature
5 by the governor, as provided by Article III, Section 18 of the Constitution of Louisiana. If
6 vetoed by the governor and subsequently approved by the legislature, this Act shall become
7 effective on the day following such approval.

SPEAKER OF THE HOUSE OF REPRESENTATIVES

PRESIDENT OF THE SENATE

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: _____



OFFICE OF LEGISLATIVE AUDITOR

Fiscal Note

Fiscal Note On: **HB 246** HLS 07RS 743
 Bill Text Version: **ENROLLED**
 Opp. Chamb. Action:
 Proposed Amd.:
 Sub. Bill For.:

Date: June 28, 2007 11:15 AM **Author:** MCDONALD
Dept./Agy.: Department of Health and Hospitals
Subject: Medication Attendants **Analyst:** Nicole Edmonson

NURSING HOMES

EN +\$40,900 GF EX See Note

Page 1 of 1

Provides for the certification of medication attendants to work in licensed nursing homes until August 1, 2011

Purpose of Bill: This measure authorizes the Department of Health and Hospitals (DHH) to create a pilot program to authorize certification of medication attendants in licensed nursing homes to perform the following tasks: (1) deliver and administer certain prescribed medications, by certain methods, under the supervision of a licensed nurse, (2) obtain vital signs of residents, (3) record medications administered, and (4) chart medication effects and side effects. This measure provides for qualifications of applicants for the medication administration course and requires DHH to maintain a permanent register of all medication attendants as part of the nurse aide registry.

This measure requires DHH, in conjunction with an advisory committee, to promulgate rules and regulations by March 31, 2008, for enforcement of the proposed law and for termination of the law on August 1, 2011.

EXPENDITURES	2007-08	2008-09	2009-10	2010-11	2011-12	5-YEAR TOTAL
State Gen. Fd.	\$40,900	\$32,200	\$33,350	SEE BELOW	\$0	\$106,450
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$40,900	\$32,200	\$33,350	SEE BELOW	\$0	\$106,450
Local Funds	\$0	\$0	\$0	\$0	\$0	\$0
Annual Total	\$81,800	\$64,400	\$66,700	\$0	\$0	\$212,900
REVENUES	2007-08	2008-09	2009-10	2010-11	2011-12	5-YEAR TOTAL
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$0	\$0	\$0	\$0	\$0	\$0
Local Funds	\$0	\$0	\$0	\$0	\$0	\$0
Annual Total	\$0	\$0	\$0	\$0	\$0	\$0

EXPENDITURE EXPLANATION

This measure will increase both state general fund expenditures and federal fund expenditures by approximately \$40,900 (\$81,800 total) during fiscal year 2008, \$32,200 (\$64,400 total) during fiscal year 2009, and \$33,350 (\$66,700 total) during fiscal year 2010.

According to an official with DHH, the \$81,800 in fiscal year 2008 expenditures includes approximately \$55,300 in salary for one Medicaid program monitor, \$6,800 in operating expenses (e.g., travel, building rent, supplies, rule making, computer port, and telephone services, etc.), \$10,000 in professional services (e.g., development of computer software, software update and maintenance, etc.), and \$9,700 in equipment [\$55,300 + \$6,800 + \$10,000 + \$9,700 = \$81,800].

The \$64,400 in fiscal year 2009 expenditures includes \$57,500 in salary, \$5,900 in operating expenses, and \$1,000 in professional services [\$57,500 + \$5,900 + \$1,000 = \$64,400]. The \$66,700 in fiscal year 2010 expenditures includes \$59,800 in salary, \$5,900 in operating expenses, and \$1,000 in professional services [\$59,800 + \$5,900 + \$1,000 = \$66,700]. At this time, we are waiting on information regarding expenditures for fiscal year 2011. However, we assume they will be similar to those for fiscal year 2010.

According to DHH, there will be a Medicaid match of 50% federal and 50% state for the Medicaid Program Monitor's salary and for the expenditures associated with the operating expenses, professional services, and equipment.

REVENUE EXPLANATION

There is no anticipated direct material effect on governmental revenues as a result of this measure.

SenateDual Referral RulesHouse
☐ 13.5.1 >= \$500,000 Annual Fiscal Cost

☐ 6.8(F) >= \$500,000 Annual Fiscal Cost

☐ 13.5.2 >= \$500,000 Annual Tax or Fee Change

☐ 6.8(G) >= \$500,000 Tax or Fee Increase or a Net Fee Decrease

Michael G. Battle
 Manager, Performance Audit

RULE
Department of Health and Hospitals
Office of the Secretary
Bureau of Health Services Financing

Medication Attendants Certified
(LAC 48:I.10080-10091)

The Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing has adopted LAC 48:I.10080-10091 as authorized by R.S. 37:1026.1-37:1026.9. This Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

Title 48
PUBLIC HEALTH—GENERAL
Part I. General Administration
Subpart 3. Health Standards

Chapter 100. Nurse Aide Training and Competency Evaluation Program

Subchapter G. Medication Attendant Certified

§10080. Definitions

Abuse—

1. the willful infliction of injury;
2. unreasonable confinement;
3. intimidation; or
4. punishment with resulting physical harm, pain, or mental anguish.

Department—the Louisiana Department of Health and Hospitals (DHH).

LBP—the Louisiana Board of Pharmacy.

LSBN—the Louisiana State Board of Nursing.

LSBPNE—the Louisiana State Board of Practical Nurse Examiners.

Licensed Nurse—a licensed registered nurse or a licensed practical nurse.

Licensed Practical Nurse—a person licensed by the LSBPNE to practice practical nursing in Louisiana.

Medication Attendant Certified (MAC)—a person certified by DHH to administer medications to nursing facility residents, hereafter referred to as a medication attendant certified.

Nurse Aide—an individual who has completed a nurse aide training and competency evaluation program (NATCEP) approved by the state as meeting the requirements of 42 Code of Federal Regulations (CFR), §§483.151-483.154, or has been determined competent as provided in 42 CFR, §483.150(a) and (b), and is listed as certified and in good standing on Louisiana's nurse aide registry.

Nursing Home—an institution licensed pursuant to R.S. 40:2009.1-2009.10.

Pilot—a program administered by the Department of Health and Hospitals to authorize the certification of medication attendants on a trial basis to perform certain functions in nursing homes licensed and in good standing with DHH and who agree to comply with established criteria to measure the outcome of the program.

Registered Nurse (RN)—a person licensed by the LSBN to practice professional nursing in Louisiana.

Registered Pharmacist—an individual currently licensed by the Louisiana Board of Pharmacy to practice pharmacy.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1413 (July 2008).

§10081. General Provisions

A. The Department of Health and Hospitals (DHH) implements a three-year pilot project which establishes provisions for the use of medication attendants certified in licensed nursing facilities. The department shall also develop and maintain a registry of individuals who have, at a minimum, successfully completed a state-approved medication attendant certified training course and competency evaluation, and criminal background check.

B. The medication attendant certified registry will contain the following items:

1. a list of individuals who have successfully completed a medication attendant certified training curriculum and competency evaluation. Each individual listed will have the following information maintained on the registry:

- a. name;
- b. address;
- c. Social Security number;
- d. phone number;
- e. place of employment;
- f. date of employment;
- g. date employment ceased;
- h. state certification number;
- i. documentation of any investigation including codes for specific findings of:
 - i. abuse;
 - ii. neglect;
 - iii. extortion;
 - iv. exploitation and misappropriation of property; and

v. an accurate summary of findings after action on findings are final and after any appeal is ruled upon or the deadline for filing an appeal has expired; and

j. information relative to training and registry status which will be available through procedures established by the department.

C. Employers must use the registry to determine if a prospective hire is a medication attendant certified and if there is a finding that he/she has abused or neglected an individual being supported or misappropriated the individual's property or funds.

D. A certificate holder must notify the department within 30 days after changing his or her address or name.

E. A medication attendant certified or his or her employer, if aware, must immediately notify the department of any arrest in any state.

F. A person who holds a valid license, registration or certificate as a medication attendant issued by another state may also be certified in Louisiana if the transferring state's training program is at least 100 hours or more and the applicant passes the state competency examination.

1. The applicant must submit a request for reciprocity to the registry.
2. The application must include a current copy of the rules of the other state governing its licensing and regulation of medication aides, a copy of the legal authority (law, act, code, or other) for the state's licensing program, and a certified copy of the license or certificate for which the reciprocal certificate is requested.

3. The department may contact the issuing agency to verify the applicant's status with the agency.

G. When issued, an initial certificate is valid for 12 months from the date of issue. The registry will renew the certificate if:

1. a certificate holder has completed four hours of continuing education focusing on medication administration prior to expiration of the certificate; and

2. a certificate holder has worked at least 400 hours per year in a licensed nursing facility.

H. The department shall deny renewal of the certificate of a medication attendant certified who is in violation of this Chapter at the time of the application renewal.

I. A person whose certificate has expired may not engage in activities that require a certificate until the certificate has been renewed.

J. A medication attendant certified must function under the direct supervision of a licensed nurse on duty at the nursing facility. A certificate holder must:

1. function in accordance with applicable laws and rules relating to administration of medication and operation of a nursing facility; and

2. comply with the department's rules applicable to personnel used in a nursing facility.

K. Persons employed as medication attendants certified in a nursing facility must comply with the requirements relating to nurse aides as set forth in the Omnibus Budget Reconciliation Act of 1987, Public Law 100-203, the department's rule governing the Standards for Payment for Nursing Homes and Minimum Licensure Standards for Nursing Homes or subsequent amendments. Requirements are met if the individual is:

1. a student enrolled in an accredited school of practical nursing or program for the education of vocational nurses who is administering medications as part of the student's clinical experience; or

2. a trainee in a medication assistant training program approved by the department under this Chapter who is administering medications as part of the trainee's clinical experience.

L. While on duty, a MAC's sole function shall be to administer medications to residents. Persons employed as medication attendants in a nursing facility may not be assigned additional responsibilities. If medication administration has been completed, they may assist in other areas.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1413 (July 2008).

§10082. General Requirements

A. Prior to application for a certificate under this Chapter, all persons must:

1. be proficient in reading, writing, speaking, and understanding the English language at a minimum eighth grade level as evidenced by the following COMPASS scores:

- a. reading, 64;

- b. writing, 25; and

- c. pre-algebra, 31;

2. be a citizen of the United States;

3. be at least 18 years of age;

4. complete a required health and physical examination;

5. be a graduate of high school or have a general equivalency diploma;

6. be currently employed in a facility as a certified nurse aide on the first official day of an applicant's medication attendant training program or be a graduate of a nursing program; and

7. successfully pass a statewide criminal history background check and verification of the results sent to the training entity.

B. A medication attendant certified may not administer medication to a resident in a nursing facility unless he/she:

1. holds a current certificate issued by the department under this Chapter and acts under the supervision of a person who holds a current license under state law which authorizes the licensee to administer medication; or

2. is currently enrolled in a state approved training course and is acting under the direct supervision of faculty.

C. All medication attendant training and competency evaluation programs must be approved by the department.

D. Training and competency evaluation programs may be provided by the Louisiana Community and Technical College System (LCTCS) during the three year pilot project.

E. Each training and competency evaluation program must:

1. maintain qualified, approved registered nurses and licensed practical nurses for classroom and clinical instruction;

2. protect the integrity of the competency evaluations by keeping them secure;

3. utilize a pass rate of at least 80 percent for each individual student; and

4. assure the curriculum meets state requirements.

F. Clinical instruction must be conducted in an approved nursing facility with a ratio of no more than 5:1 under the direct supervision of the instructor.

G. Training programs that do not meet the minimum standards and cannot provide an acceptable plan for correcting deficiencies will be eliminated from participation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1414 (July 2008).

§10083. Trainee Responsibilities

A. Each medication attendant trainee should be clearly identified as a trainee during all clinical portions of the training. Identification should be recognizable to residents, family members, visitors and staff.

B. Trainees must take the competency evaluation (through skills demonstration and written examination) within 30 days after completion of the training program. Trainees will be given a maximum of two opportunities within 90 days following completion of the training program to successfully complete the competency evaluation program.

C. If a trainee fails to successfully complete the competency evaluation program, he or she must re-enroll in a training program.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1415 (July 2008).

§10084. Training Curriculum

A. The goal of the medication attendant training and competency evaluation program is the provision of safe, effective and timely administration of medication to residents by medication attendants who are able to:

1. communicate and interact competently on a one-to-one basis with residents as part of the team implementing resident care;

2. demonstrate sensitivity to the resident's emotional, social and mental health needs through skillful, directed interactions;

3. exhibit behavior to support and promote the rights of residents; and

4. demonstrate proficiency in the skills related to medication administration.

B. Each medication attendant training program shall provide all trainees with a nursing facility orientation that is not included in the required minimum 100 hours of core curriculum. The orientation program shall include, but is not limited to:

1. an explanation of the facility's organizational structure;
2. the facility's policies and procedures;
3. discussion of the facility's philosophy of care;
4. a description of the resident population; and
5. employee rules.

C. Core Curriculum. The curriculum content for the training program must include material which provides a basic level of knowledge and demonstrable skills for each individual completing the program. The content should include the needs of populations which may be served by an individual nursing facility.

1. The core curriculum must be a minimum of 100 hours in length with a minimum of 40 clinical hours.

2. Each unit objective must be behaviorally-stated for each topic of instruction. Each objective must state performance criteria which are measurable and will serve as the basis for the competency evaluation.

D. Minimum Curriculum. The training program must be developed and conducted to ensure that each medication attendant, at a minimum, is able to demonstrate competency in the following areas including, but not limited to:

1. the basic principles of medication administration and the responsibilities of the medication attendant including:

- a. the role and functions of a MAC;
- b. the professional relationship between the MAC and the residents and their families; and
- c. prohibited functions or duties;

2. definition of nurse delegation;

3. definition of the basic terms used in medication administration, including identification of the abbreviations used in medication orders and on the medication administration records;

4. review of the various forms of medications;

5. methods of medication administration including:

- a. proper positioning of resident for various medication administrations; and
- b. the value of good body alignment prior to and after medication administration;

6. requirements for proper storage and security of medications;

7. proper methods for disposal of drugs;

8. infection control;

9. basic anatomy and physiology;

10. the functions of the gastrointestinal, musculoskeletal, integumentary, nervous, sensory, renal and urinary, reproductive, cardiovascular, respiratory, and endocrine systems;

- a. description of the common disorders associated with these systems; and
- b. the effect of aging on these systems;

11. definition of pharmacology including:

- a. medication classifications,
- b. a description of a controlled drug and how administration of these drugs differ;
- c. the cycle of a drug in the body; and
- d. side effects of medications;

12. the safe administration of all forms of oral medication including;

- a. a description of the difference among all forms of oral medication; and
 - b. special precautions observed when administering timed-release capsules, enteric-coated tablets and oral suspensions;
13. appropriate procedures to follow when the resident is NPO, dysphagic, refuses the medication, vomits the medication, or has allergies;
14. application of topical medications and the standard precautions utilized in administering a topical medication;
15. the safe instillation of ophthalmic drops and ointments;
16. the safe administration of nose drops;
17. proper technique for administration of inhalant medications including:
- a. a description of when the MAC may administer an inhalant;
18. the safe administration of a rectal suppository;
19. the safe administration of a vaginal medication;
20. developing proficiency in measuring liquid medications in a medicine cup or syringe;
21. measuring apical pulse and/or blood pressure (B/P) prior to medication administration;
22. the importance of the "chain of command;"
23. developing effective communication and interpersonal skills;
24. maintaining communication with the licensed nurse including:
- a. a description of the situations that must be reported to the nurse;
25. the purpose of the clinical record and the importance of timely, clear and complete documentation in the medication administration record;
26. methods for avoiding medication errors:
- a. reporting and documentation requirements when medication errors occur;
27. a resident's rights related to medication administration;
28. a discussion of the "rights" of medication administration;
29. the application and certification; and
30. violations of the laws and rules that may result in disciplinary action and/or loss of certification.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1415 (July 2008).

§10085. Competency Evaluation

A. A competency evaluation must be developed and conducted to ensure that each trainee, at a minimum, is able to demonstrate competencies taught in each part of the training curriculum.

B. Written examinations will be provided by the training entity or organizations approved by the department. The examination will reflect the content and emphasis of the training curriculum and will be developed in accordance with accepted educational principles.

C. The entity responsible for the training and competency evaluation must report to the registry the names of all individuals who have satisfactorily completed the curriculum after the training is completed. Within 15 days after a medication attendant certified has successfully completed the training and competency evaluation, the training entity shall notify the registry.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1416 (July 2008).

§10086. Authorized Duties

A. The medication attendant certified may perform certain duties and functions under the direct supervision of a licensed nurse. These authorized duties will apply to medication attendant

trainees under the supervision of the clinical instructor. The ratio of medication attendants certified to licensed nurses shall not exceed two medication attendants to one licensed nurse at any given time.

B. Medication attendants certified may:

1. observe and report to the licensed nurse a resident's adverse reaction to a medication;
2. administer medications which require vital signs only with direct authorization from the licensed nurse prior to administration;
3. take and record vital signs prior to the administration of medication that could affect or change the vital signs;
4. in an emergency only, administer oxygen at 2 liters per minute per nasal cannula and immediately after the emergency, verbally notify the licensed nurse on duty and appropriately document the action and notification;
5. administer regularly prescribed medication only after personally preparing (setting up) the medications to be administered;
6. deliver and administer certain prescribed medications ordered by an authorized prescriber by the following methods:
 - a. orally;
 - b. topically (to intact skin only);
 - c. drops and sprays for the eye, ear or nose;
 - d. vaginally;
 - e. rectally;
 - f. transdermally;
 - g. by metered dose oral inhalation; or
 - h. sublingually;
7. record medications administered in the resident's chart and/or medication administration record;
8. chart medication effects and side effects;
9. administer medications which require vital signs, only with direct authorization from the licensed nurse prior to administration:
 - a. the results of the vital signs must be documented in the clinical record;
10. administer pro re nata (prn), as needed medications only with direct authorization of the licensed nurse;
11. measure prescribed liquid medication only if verified by the licensed nurse prior to administration; and
12. crush prescribed medications only if ordered by the physician and verified by the licensed nurse.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1416 (July 2008).

§10087. Prohibited Duties

A. Medication attendants certified shall not:

1. administer any controlled dangerous substances (schedules II through V) as set forth by the Drug Enforcement Agency or the Louisiana Board of Pharmacy;
2. administer any medications by the following parenteral routes:
 - a. intramuscular;
 - b. intravenous;
 - c. subcutaneous; or

- d. intradermal;
3. administer any medication used for intermittent positive breathing (IPPB) treatments;
4. administer an initial dose of a medication that has not been previously administered to a resident as determined by the clinical record;
5. calculate medication doses for administration;
6. administer medications or feedings by way of a tube inserted in a cavity of the body;
7. receive or assume responsibility for writing any verbal or telephone order from an authorized prescriber;
8. order new medications or medications whose directions have changed from the pharmacy;
9. apply topical medications that involve the treatment of skin that is broken;
10. steal, divert or otherwise misuse medication;
11. violate any provision of this Chapter;
12. procure or attempt to procure a certificate by fraudulent means;
13. neglect to administer prescribed medications in a responsible and timely manner;
14. perform a task involving the administration of a medication which requires:
 - a. an assessment of the patient's physical status;
 - b. an assessment of the need for the medication;
 - c. a calculation of the dose of the medication; or
 - d. the conversion of the dose;
15. perform a task involving the administration of a medication if the patient is unstable or has changing nursing needs, unless the supervising nurse is able to monitor the patient and the effect of the medication on the patient; or
16. administer medications if he/she is unable to do so with reasonable skill and safety to the resident if the resident is impaired by reason of excessive use of mood altering drugs, narcotics, chemicals or any other type of material.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1416 (July 2008).

§10088. Provider Participation and Responsibilities

A. A nursing facility must apply to the department to utilize medication attendants certified. Upon receipt of a facility's application, the department will review the facility's compliance history.

B. If a facility is non-compliant with program regulations, the department shall take into consideration the findings that resulted in the facility's noncompliance before making a determination whether or not to allow the facility to utilize medication attendants certified. Emphasis shall be placed on deficiencies cited in the area of medication administration such as significant medication errors, medication error rates and repeat deficiencies.

C. The department may deny a facility's request to use medication attendants if it is determined that, based upon the compliance history, the safety and well-being of residents would be jeopardized. If the facility is denied participation, the facility may ask for a reconsideration and review of the circumstances which contributed to the denial.

D. The following information must be provided prior to acceptance in the pilot project:

1. the number of beds for the entire nursing facility and beds per unit;
2. the type of nursing facility;
3. the staffing levels per shift;
4. the turnover rate of staff;

5. a plan for orientation and utilization of medication attendants certified, including orientation of all staff to the role of medication attendants;

6. the number and type of medication errors in the year prior to the utilization of medication attendants certified;

7. a survey of patient satisfaction, including the patient's perception of receiving medications, prior to the utilization of medication attendants certified; and

8. a statement that the nursing home will utilize the medication attendants certified in accordance with the accepted rules and regulations and will provide evaluation information as indicated.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1417 (July 2008).

§10089. Allegations of Medication Attendant Certified Wrong-Doing

A. The department, through its Bureau of Appeals, has provided for a process of the review and investigation of all allegations of resident abuse, neglect or misappropriation of residents' property or funds by medication attendants certified.

B. In the event of an allegation of wrong-doing, medication attendants certified shall be bound by the department's established:

1. reporting requirements;
2. informal dispute resolution policies;
3. preliminary conference requirements; and
4. appeal and administrative hearing provisions:

a. the formal hearing shall be conducted according to formal hearing procedures set forth in the Administrative Procedure Act.

C. Through the formal hearing process, determinations will be made on both the certificate for medication attendant and the certificate for nurse aide practice.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1417 (July 2008).

§10090. Suspension, Revocation or Non-Renewal

A. The department may revoke, suspend or refuse to renew a certificate or reprimand a certificate holder for a violation of this Chapter.

B. The following are grounds for disciplinary actions:

1. stealing, diverting or otherwise misusing medication;
2. procuring or attempting to procure a certificate by fraudulent means; or
3. violating any provision of this Chapter.

C. Prior to institution of formal proceedings to revoke or suspend a permit, the department shall give written notice to the certificate holder of the facts or conduct alleged to warrant revocation, suspension or rescission. The certificate holder shall be given an opportunity to show compliance with all requirements of this Chapter.

D. If denial, revocation or suspension of a certificate is proposed, the department shall give written notice that the certificate holder must submit a written request for a formal hearing within 30 days of receipt of the notice. If not, the right to a hearing shall be waived and the certificate shall be denied, revoked or suspended.

E. If the department suspends a MAC's certificate, the suspension shall remain in effect until the department:

1. determines that the reason for suspension no longer exists;

2. revokes the certificate; or
3. determines not to renew the certificate.

F. The department shall investigate prior to making a final determination on a suspended certificate. During the time of suspension, the suspended certificate holder must return his certificate to the department.

1. If a suspension overlaps a certificate renewal date, the suspended certificate holder shall be subject to the renewal procedures stated in §8603.G. However, the department shall not renew the certificate until it determines that the reason for suspension no longer exists.

G. If the department revokes or does not renew a certificate, a person may reapply for a certificate by complying with the provisions of this Chapter at the time of reapplication. The department may refuse to issue a certificate if the reason for revocation or non-renewal continues to exist.

1. If a certificate is revoked or not renewed, the certificate holder must immediately return the certificate to the department.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1417 (July 2008).

§10091. Evaluation of Pilot Program

A. In order to evaluate the effectiveness of the medication attendant certified program and its impact on the quality of patient care in nursing homes, it is required that the education programs and nursing facilities that choose to participate in the pilot program must participate in the evaluation of all components of the program. They must utilize the appropriate evaluation forms designated by the department and within the required time frames. The completed forms must be submitted to the department.

B. The areas of evaluation and data to be collected are as follows:

1. education program;
2. level of student achievement;
3. student satisfaction surveys;
4. faculty satisfaction; and
5. nursing facility satisfaction surveys.

C. Medication Errors. Nursing facilities shall be required to maintain documentation of medication errors on an ongoing basis and shall submit this information to the department on a monthly basis. AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1026.1-37:1026.9.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:1418 (July 2008).

Alan Levine
Secretary