BOARDS AND COMMISSIONS

Board of Nursing

(New Administrative Regulation)

201 KAR 20:700. Medication aide training programs and credentialing of medication aides.

RELATES TO: KRS 194A.705(2), 216.510(1), 314.133

STATUTORY AUTHORITY: KRS 314.131, 314.133

NECESSITY, FUNCTION, AND CONFORMITY: KRS 314.131 and 314.133 requires the Kentucky Board of Nursing (KBN) to promulgate administrative regulations to establish requirements for the credentialing of medication aides, including educational requirements, standards for training programs including delegation of the administration of oral or topical medications and preloaded insulin injection, credentialing requirements, and fees for initial, renewal, and reinstatement of credentials, and any other necessary fees. This administrative regulation establishes requirements for KBN approval of medication aide training programs and requirements for the credentialing of medication aides.

Section 1. Definitions.

(1) "Board" means the Kentucky Board of Nursing.

(2) "Certified medication aide I" or "CMA I" means a person who:

(a) Has received specialized training under the supervision of a nurse; and

(b) Is permitted to administer oral or topical medications under the delegation of a nurse upon successful completion of a board approved examination.

(3) "Certified medication aide II" or "CMA II" means a person who:

(a) Meets the requirements of a CMA I; and

(b) Receives additional specialized training under the supervision of a nurse to administer only insulin via preloaded insulin pen upon successful completion of a board approved examination.

(4) "Didactic" means the component of a medication aide training program that includes lecture, verbal instruction, or other means of exchanging theoretical information between the instructor and students, including a classroom setting or distance learning technology.

(5) "Kentucky medication aide" means a state registered nurse aide (SRNA) who:

(a) Has successfully completed the medication aide examination administered by the Kentucky Community and Technical College System (KCTCS);

(b) Administers oral or topical medications under the delegation of a nurse to a resident of a long-term care facility; and

(c) Is accepted by the board as having a credential that shall be equivalent to a CMA I.

(6) "Long-term care facility" is defined by KRS 216.510(1).

(7) "Mentor" means a didactic instructor with teaching experience.

(8) "Training program" means formal specialized medication aide training provided by an individual, facility, college, or school.

Section 2. Medication Aide Training Program Approval.

(1) A KMA medication aide training and testing program administered by a college within KCTCS shall:

(a) Be deemed compliant with the requirements of this administrative regulation; and

(b) Not be required to submit an application to the board unless the KMA program provides training to individuals seeking a CMA II credential.

(2) Unless exempt under subsection (1) of this section, a training program shall not admit an individual until the program has been approved by the board.

(3) The following may request approval from the board to provide medication aide training for individuals seeking a CMA I or CMA II credential:

(a) A long-term care facility that has a license in good standing and offers medication aide training to:

1. Its own employees; or
2. Employees of a long-term care facility owned by the same company;

(b) A Kentucky university or college program; or

(c) Other proprietary education program located in Kentucky.

(4) In-state training programs.

(a) An in-state entity seeking board approval of its training program shall:

1. Submit a completed Application for Medication Aide Training Program via the portal at www.kbn.ky.gov accompanied by a fee of:
   a. $200 for initial approval of a CMA I training program; or
   b. $300 for initial approval of a CMA I and CMA II training program;
2. Prepare each candidate seeking a CMA I credential to pass:
   a. The Medication Aide Competency Examination (MACE) administered by National Council of State Boards of Nursing; or
   b. Other competency examination approved by the board; and
3. If the training program prepares a candidate seeking a CMA II credential, it shall prepare the candidate to pass a competency examination approved by the board.

(b) If the training program administers a proprietary competency examination to candidates seeking a CMA I or CMA II credential, the program shall submit a copy of the examination to the board for prior approval.

(5) Out-of-state training.

(a) An individual who completes a medication aide training program provided by an out-of-state training provider shall:

1. As a condition of obtaining the CMA I credential, pass the MACE or other competency examination approved by the board; or
2. As a condition of obtaining the CMA II credential:
   a. Complete an out-of-state training program that meets the requirements of Section 6(7) and (8) of this administrative regulation; and
   b. Pass a competency examination approved by the board.

(b) An out-of-state medication aide training program shall be exempt from the application requirements of subsection (4)1. of this section.

Section 3. Medication Aide Training Program Administration.

(1) The training program shall appoint a program administrator who shall be responsible for the administrative oversight of the program; and

(2) Submit the following in writing to the board:

(a) Name of the program administrator;

(b) Date the program administrator will assume responsibility for administrative oversight of the program; and

(c) A copy of the program administrator's curriculum vitae;

(3) The training program shall notify the board in writing of a change of program administrators within thirty (30) days of the personnel change; and

(4) Develop and implement a plan of organization and administration that clearly establishes the lines of authority, accountability, and responsibility for each training program location; and

(5) Maintain a system of official records and reports essential to the operation of the training program according to the program's written policies that shall:

(a) Address how the program's records will be maintained in a secure manner to protect from loss or unauthorized distribution or use;

(b) Ensure that all records shall be retained for at least five (5) years;

(c) Ensure that each trainee roster includes:

1. The nurse instructor's name and licensure information;
2. Each trainee's:
a. Name;
b. Date of birth;
c. Last four (4) digits of the trainee's Social Security number; and
d. Program activity and completion dates;

(d) Document how the program will conduct a periodic and systematic plan of evaluation; and

(e) Ensure that a list of successful graduates of the training program is maintained.

Section 4. Program Administrator. The program administrator shall be:

(1) The facility administrator on record for each facility; or

(2) A registered nurse who has the following qualifications:

(a) An unencumbered Kentucky nursing license or multistate privilege to practice; or

(b) A temporary work permit as nurse in Kentucky.

Section 5. Instructors.

(1) The number of instructors shall be adequate to implement the training program as determined by:

(a) Program outcomes;

(b) Instruction objectives; and

(c) The educational technology utilized.

(2) The program administrator shall be responsible for approving the instructors.

(3) Didactic instructors.

(a) The training program's didactic instructor shall have the following qualifications:

1. An unencumbered Kentucky nursing license or multistate privilege to practice; or
2. A temporary work permit as nurse in Kentucky.

(b) If the didactic instructor does not have prior teaching experience, the program administrator shall assign a mentor to the didactic instructor for the purpose of assisting with implementation of an educational development plan.

(4) Clinical instructors and preceptors.

(a) A clinical instructor shall hold a current:

1. Unencumbered Kentucky nursing license or multistate privilege to practice; or
2. Temporary work permit as nurse in Kentucky.

(b) A preceptor shall:

1. Meet the clinical instructor requirements in paragraph (a) of this subsection, or:
2. Hold a current medication aide certification; and
3. Have a minimum of six (6) months experience passing medications.

(5) Each training program shall maintain records in accordance with Section 3 of this administrative regulation to document that each clinical instructor has been oriented to the:

(a) Course;

(b) Program outcomes;

(c) Student learning objectives;

(d) Evaluation methods used by the instructors; and

(e) Role expectations.

Section 6. Standards for Training Programs and Medication Aide Certification.

(1) A training program shall conduct an evaluation as required by Section 3(5)(d) of this administrative regulation to:

(a) Validate that identified program outcomes have been achieved; and

(b) Provide evidence of improvement based on an analysis of the results.

(2) As a condition of admission to a training program for a CMA I credential, the applicant shall:

(a) Be able to read, write, and speak English;

(b) Have basic math skills;

(c) Have a high school diploma or equivalent; and

(d)

1. Have at least six (6) months of continuous work experience as a State registered nurse aide (SRNA) in a nursing facility that is certified under Title XVIII or XIX of the Social Security Act; or

2. Direct care staff member of a:

a. Long-term care facility that is not certified under Title XVIII or XIX of the Social Security Act;

b. Facility operated by the Department of Juvenile Justice; or

c. Residential facility licensed by the Cabinet for Health and Family Services if authorized under the facility's scope of licensure.

(3) A training program that prepares an individual for a CMA I credential shall:

(a) Include at least:

1. Forty (40) clock hours of didactic course work;

2. Twenty (20) clock hours of skills laboratory; and

3. Forty (40) clock hours of direct patient contact with a clinical instructor;

(b) Ensure that the didactic course work and skills laboratory shall be completed in no shorter than a two (2) week course;

(c) Ensure that the candidate is precepted for a minimum of sixty (60) clock hours; and

(d) Maintain a log of clinical hours for each trainee in which the instructor and preceptor document completion of the clock hours required by subparagraphs 1 to 3 of this paragraph.

(4)

(a) Upon completion of CMA I training, a candidate shall complete the MACE or other board approved examination within sixty (60) days.

(b) If the candidate does not pass the examination after two (2) attempts or if more than sixty (60) days have elapsed since completion of the CMA I training, the candidate shall provide documentation of repeating the CMA I training to be eligible to retake the examination.

(5) The curriculum for a CMA I training program shall include the following topics:

(a) Medication orders, documentation, storage, and disposal;

(b) Mathematics, weights and measures;

(c) Forms of medications;

(d) Medication basics, including terms, abbreviations, dosage, and actions;

(e) Safety and rights of medication administration;

(f) Preparation and actual medication administration;

(g) Prevention of medication errors;

(h) Causes and reporting of medication errors;

(i) Building of relationships;

(j) Reporting of symptoms or side effects;

(k) Reporting of changes from the resident's normal condition, status, or routine;

(l) Documentation of medication administration;

(m) Routes of administration;

(n) Factors affecting how the body uses medication;

(o) Classes of medications related to body systems and common actions;

(p) Location of resources and references;

(q) Rights of individuals;

(r) Specific legal and ethical issues;

(s) Knowledge of infection control related to medication administration;
(t) Roles of the supervising nurse;
(u) Role of the medication aide; and
(v) Responsibility of the medication aide when accepting delegated tasks.

(6) As a condition of admission to a training program for a CMA II credential, the applicant shall have successfully completed the CMA I specialized training and passed the board approved CMA I examination.

(7) A training program that prepares an individual for a CMA II credential shall include:

(a) A minimum of sixteen (16) clock hours of didactic course work in insulin administration via a prefilled insulin pen;

(b) A minimum of eight (8) clock hours of clinical training with continuous, direct, on-site supervision by a nurse to be completed within sixty (60) days of completion of the didactic course work;

(c) A minimum of twenty (20) documented insulin injections via prefilled insulin pen that shall be:

1. Directly supervised by a nurse; and
2. Completed within sixty (60) days of completion of the didactic course work; and

(d) A board approved competency examination.

1. Upon completion of the CMA II training, a candidate shall complete a board approved examination within sixty (60) days.
2. If the candidate does not pass the examination after two (2) attempts or if more than sixty (60) days have elapsed since completion of the CMA II training, the candidate shall provide documentation of repeating the CMA II training to be eligible to retake the examination.

(8) The curriculum for a CMA II training program shall include the following topics:

(a) Pathophysiology of diabetes;
(b) Diabetes disease management;
(c) Blood glucose testing and use of equipment;
(d) Understanding the meaning of glucose levels;
(e) Insulin administration procedure;
(f) Potential complications and adverse reactions; and
(g) Role and responsibility.

(9) Implementation of the curriculum.

(a) A training program shall be developed to include outcomes, planned instruction, learning activities, and methods of evaluation.

(b) The instruction methods and activities of both instructor and trainee shall be specified. The activities shall be congruent with stated objectives, and content shall reflect adult learning principles.

(c) A copy of the training program's curriculum shall be on file and available to the board upon request.

(d) Didactic instruction may be offered through distance learning technologies. The instruction offered through the use of distance learning technologies shall be comparable to that offered in an in-person program.

(10) Substantive changes to the training program's standards for medication training or certification shall be:

(a) Submitted to the board portal at www.kbn.ky.gov with a completed Application for Medication Aide Training Program within thirty (30) days of implementation; and

(b) Subject to a change of status fee of:

1. $200 for a CMA I training program; or
2. $300 for a CMA II training program.

(11) A training program shall respond to a written request from the board for documentation within thirty (30) days of the date of the board's request.

(12) The board shall have the authority to amend a program's standards for medication training or certification if it fails to comply with the requirements of the administrative regulation. Upon written notification, the training provider shall comply with the requirements within thirty (30) days.

(13) The board may deny, suspend, or revoke approval or the change of status of a medication aide training program, based upon the following:

(a) Failure to meet or maintain the requirements set forth in this administrative regulation; or

(b) Submitting false, misleading or deceptive statements, information or documentation to the board or its designees.

(14) If approval of the training program is denied, suspended, or revoked, the board shall do so in writing stating the reasons for the adverse action.

Section 7. Program Completion Requirements and Recertification.

(1) Each individual who successfully completes a board approved medication aide training program and passes the medication aide training and competency evaluation shall register via the board's nursing portal at www.kbn.ky.gov.

(2) The training program shall submit to the board:

(a) The name of the certified individual;

(b) Title of training program, date of completion, and location;

(c) A program code number issued by the board; and

(d) Name and signature of the program administrator;

(3) A training program shall:

(a) Maintain a record of graduates for at least five (5) years; and

(b) Provide a copy of the training program's graduate records to the board upon request.

(4) Recertification.

(a) The credential for a CMA I or CMA II shall expire one (1) year from the date of initial certification or recertification.

(b) To recertify as a CMA I or CMA II, the medication aide shall provide the board with:

1. Documentation of a yearly evaluation and validation of competency;
2. Proof of at least four (4) clock hours of medication-specific education;
3. A minimum of forty (40) hours worked prior to expiration of certification; and
4. A certification fee of twenty-five (25) dollars.

Section 8. Incorporation by Reference.

(1) The following material is incorporated by reference:

(a) "Application for Medication Aide Training Program (CMA I)", 05/23; and

(b) "Application for Medication Aide Training Program (CMA I and II)", 05/23.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Nursing, 312 Whittington Parkway, Suite 300, Louisville, Kentucky 40222-5172, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the board's Web site at: https://kbn.ky.gov/General/Pages/Document-Libary.aspx.

AUDRIA DENKER, President

APPROVED BY AGENCY: May 4, 2023

FILED WITH LRC: May 9, 2023 at 2:40 p.m.

PUBLIC HEARING AND COMMENT PERIOD: A public hearing on this administrative regulation shall be held on July 24, 2023 at 10:00 AM at Kentucky Board of Nursing, 312 Whittington Parkway, Ste 300, Louisville, Kentucky 40222. Individuals

interested in being heard at this hearing shall notify this agency in writing by July 17, 2023, five workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing was received by that date, the hearing may be cancelled. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted through July 31, 2023. Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person.

CONTACT PERSON: Jeffrey R. Prather, General Counsel, Kentucky Board of Nursing, 312 Whittington Parkway, Suite 300, Louisville, Kentucky 40222, (502) 338-2851, Jeffrey.Prather@ky.gov. Or submit a comment at: https://secure.kentucky.gov/formservices/Nursing/PendReg

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Contact Person:Jeffrey Prather; General Counsel

(1) Provide a brief summary of:

(a) What this administrative regulation does:
This administrative regulation sets educational requirements for medication aide training programs and the credentialing of medication aides.

(b) The necessity of this administrative regulation:
This regulation is required by statute.

(c) How this administrative regulation conforms to the content of the authorizing statutes:
By establishing educational requirements for medication aide training programs and the credentialing of medication aides.

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes:
By establishing program educational requirements, approved by the Kentucky Board of Nursing (Board), for the approval of medication aide training programs and the certification of medication aides (CMA). There are two classes of CMAs are created: CMA I, and CMA 2. An individual with the CMA I certification will be trained in a KBN approved program to administer oral and topical medications in a long-term care facility; an individual with a CMA II will be trained in an approved program to also administer preloaded insulin injections.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation:
This is not an amendment to an existing administrative regulation. This is a new regulation.

(b) The necessity of the amendment to this administrative regulation:
This is a new regulation that is needed to conform with KRS 314.133.

(c) How the amendment conforms to the content of the authorizing statutes:
This is a new regulation that sets the standards for medication aide I and II training programs and the credentialing of those medication aides.

(d) How the amendment will assist in the effective administration of the statutes:
This is a new regulation that sets the standards for medication aide I and II training programs and the credentialing of those medication aides.

(3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation:
In addition to individuals, colleges and universities the may offer the training, there are approximately 100 assisted living communities, 290 nursing facilities, 16 independent care facilities, 105 personal care homes, and a provider categorized as an "Alzheimer's Nursing Home". Therefore, there are over 500 facilities that will be able to offer the training under this regulation.

(4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment:

The entities with need to have individuals in their facilities who are trained as CMA I or CMA II to administer medications to their residents. The entities may institute their own training program as long as it has approved by the Board.

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3):

The cost is $200 for review and approval of a CMA I program and $300 for a CMA II program. There are no renewal fees. However identical fees if the entity substantially changes its CMA training program(s) at a later time.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (3):

The facilities with be in compliance with the Cabinet for Health and Family Services statutory and regulatory requirements regarding medication administration. The Board approved training program provides another avenue to employ trained staffing to assist with medical care of residents.

(5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:

(a) Initially:

There is no additional cost beyond the application fee.

(b) On a continuing basis:

There is no additional cost, unless the program substantially changes its training program.

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation:

Agency funds.

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment:

New fees are mandated by KRS 314.133(4) and will be necessary to compensate the Board for staff time.

(8) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees:

It establishes fees pursuant to KRS 314.133(4).

(9) TIERING: Is tiering applied?

The changes will apply equally, there is no tiering.

FISCAL NOTE

(1) What units, parts, or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation?

Board of Nursing.

(2) Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation.

KRS 314.131 and 314.133.

(3) Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect.

(a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year?

None.

(b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years?

None.

(c) How much will it cost to administer this program for the first year?

No additional cost.

(d) How much will it cost to administer this program for subsequent years?

No additional cost.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-):

Expenditures (+/-):

Other Explanation:

(4) Estimate the effect of this administrative regulation on the expenditures and cost savings of regulated entities for the first full year the administrative regulation is to be in effect.

(a) How much cost savings will this administrative regulation generate for the regulated entities for the first year?

No additional cost savings.

(b) How much cost savings will this administrative regulation generate for the regulated entities for subsequent years?

No additional cost saving.

(c) How much will it cost the regulated entities for the first year?

No additional cost.

(d) How much will it cost the regulated entities for subsequent years?

No additional cost.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Cost Savings (+/-):

Expenditures (+/-):

Other Explanation:

(5) Explain whether this administrative regulation will have a major economic impact, as defined below.

"Major economic impact" means an overall negative or adverse economic impact from an administrative regulation of five hundred thousand dollars ($500,000) or more on state or local government or regulated entities, in aggregate, as determined by the promulgating administrative bodies. [KRS 13A.010(13)]. This administrative regulation will not have a major economic impact.