**Medication Aide / Technician / Assistants**

**By State**

This document represents an attempt to capture states authorizing the use of medication aides with varying titles and their respective settings. It does not address the school (K-12) setting. Last updated in 2019, ANA is no longer tracking.

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| State | Allow  | Description  |
| Alabama  | No | Has been considered, no category of medication aide exists at this time. However, the Board of Nursing Administrative Code [610-X-6-.06](http://www.alabamaadministrativecode.state.al.us/docs/nurs/6NURS.RTF) (2004) allows registered or licensed practical nurses to delegate in the school setting.  |
| Alaska  | No  |  |
| Arizona | Yes  | House Bill 2256, passed in 2004, **established a pilot program allowing certified nursing assistants, called medication technicians, to administer pills and topical medication to patients.** The State Board of Nursing administered the program, limited to 6 SNFs. The participants must have worked in the facility as a certified nursing assistant for at least six months, complete 45 hours ofdidactic study, 15 hours of skills lab practice and 40 hours of supervised clinical, and pass a state board competency exam. The 2008 published report of the study findings are available from the Board of Nursing <http://www.azbn.gov/Documents/Newsletters/2008/Journal%204th%20Quarter%202008.pdf> .  |
| Arkansas | Yes  | Medication assistive person” means a person who is certified by the board of nursing to administer certain nonprescription and legend drugs in designated facilities and must be currently in good standing on the state’s certified nurse aide registry and employed by the designated facility to be considered. (Subchapter 7) |
| California | No | Considering for assisted living, though nothing apparent to authorize for any setting at this time.  |
| Colorado | Yes  | The Certified Nurse Aide Practice Act (12-38.1-110.5. Medication aides - training - scope of duties – rules) authorizes CNAs in good standing to be trained and administer medications in a nursing facility. Candidates must have spent at least 2000 hours working as a CNA in a nursing facility, complete 10 credit hours of a training course and pass a state board exam. Amended CMA 2016 – related to department of corrections. |
| ConnecticutConnecticut Continued  | Yes | Those trained to be "medication technicians" may administer medications under the supervision of a registered nurse in facilities run by the Department of Children and Families, the Department of Mental Retardation, and the Department of Mental Health and Addiction Services. (CT General Statute Section 20-14i) In 1999 legislation (PA 99-80) passed, authorizing trained, unlicensed personnel to administer medication to elderly people in residential care homes (residents must be ambulatory and generally less frail than those in nursing homes). In 2006, HB 5245 Created a medication technician pilot program involving 30 facilities.A “medication technician” must be a current nurse’s aide and have maintained good standing for at least 2 years, must be recommended by the director of nursing at the facility at which the nurse’s aide is employed, must have completed a training program of45 hours of pharmacology training and 80 supervised clinical hours. They must also pass a written exam and a practical exam administered by a nurse. They can administer medication at chronic and convalescent nursing homes and rest homes with nursing supervision. The program was scheduled to end no later than September 30, 2009. No additional information available at the time of the report.  |
| Delaware  | Yes | § 1932 Limited Lay Administration of Medications. LLAM trained unlicensed assistive personnel (UAP)” is an individual who has successfully completed the Board of Nursing approved LLAM course, including the core course and any program specific specialized training modules required. (a) Individuals who have successfully completed a Board-approved limited lay administration of medications training program may administer prescription or nonprescription medications to patients/residents/clients in the following settings: (1) Residential child care facilities and Day Treatment Programs regulated by the State under Title 31.(2) All residential or day services for persons with intellectual disabilities regulated by the State under Chapter 79 of Title 29 and Chapter 11 of Title 16.(3) Group homes for persons with psychiatric disabilities regulated by the State under Chapter 11 of Title 16 and other community support programs certified by the Division of Substance Abuse and Mental Health.(4) Assisted living facilities regulated by the State under Chapter 11 of Title 16.(5) Group homes established for persons with AIDS regulated by the State under Chapter 11 of Title 16.(b) Medications must be in the original container and properly labeled.(c) An annual report to the Board of Nursing, on a form developed by the Board of Nursing, must be submitted no later than August 1 of each year indicating compliance with the guidelines as set forth in the approved LLAM training program. Section 1. § 1902, Title 24 of the Delaware Code |
| District of Columbia | No | Although the category of medication aide does not exist, Chapter 61 (6100-6199) permits trained employees to administer medications to an individual with mental retardation or other developmental disability who is enrolled in or attending a public or private program recognized within an agency licensed, certified, or approved by the District government as a child care facility, private school, day program, community based residence, or other agency providing residential services, education, habilitation, vocational, or employment training services to individuals with mental retardation or other developmental disability. A District of Columbia licensed registered nurse provides general supervision and review of a trained medication employee administering medications with at least quarterly review. The assembled curriculum encompassing all phases of medication administration authorized under D.C. Code §§ 21-1201 through 21-1204, |
| Florida | No | Florida only permits unlicensed personnel to "assist" with self-administration of medications in the assisted living setting but it has been reported there is a blurring of the definition of "assistance". In day programs for the developmentally disabled, unlicensed personnel are permitted to *administer* medications. (F.S. 393.506) |
| Georgia  | Yes | Effective 2006, **§** 434326 50 -26- The Georgia Qualified Medication Aide(QMA) Act permits nurses to delegate medication administration to those that have meet the qualifications and training as designated by Board of Nursing regulations and only to those residing in Community Living Arrangements (CLAs). This law will sunset June 30th 2011. **§** 434326 56 -26- describes activities permitted. The QMA may not administer the initial dose of a newly ordered medication nor via the intravenous or injectable routes. Other restrictions apply.  |
| Hawaii | No  |  |
| Idaho | Yes | Legislation sponsored by the Idaho Health Care Association and the Board ofNursing amends the Nursing Practice Act to allow the Board to develop rules to regulate Medication Assistants–Certified (MA-C). Where allowed by law, MA-Cs will be permitted to administer medications prescribed by an authorized provider within the parameters set forth in rules and supervised by a licensed nurse. It is still a very new program with the rules having gone into effect in July 2008.  |
| Illinois | No  | Category of healthcare worker does not exists – and practice is limited to developmentally disabled residents with the adoption of Rule 116 on February 7, 2000, enabling an RN to delegate medication administration to non-nurse direct care staff in group homes for 16 or fewer developmentally disabled residents.  |
| Indiana | Yes | Indiana has allowed medication aides in nursing homes since 1977. They have to be certified nurses' aides having completed 1,000 work hours and then complete 60 hours of classroom instruction and 40 of supervised practicum before passing a competency exam.   |
| Iowa | Yes | Iowa Code 81—65.17(135C) Medication management.65.17(1)A person may administer medications (excluding injectable medications) in nursing, residential or living facilities under the supervision of a registered nurse, having successfully completed a department-approved medication aide course or passed a department-approved medication aide challenge examination administered by an area community college. Prior to taking a department-approved medication aide course, the individual must have been a CNA and have worked in the same facility for at least 6 months.  |
| Kansas | Yes | Medication aides are allowed in nursing homes, which come under the definition of "adult care homes". They must first be certified nurses' aides and undergo 60 hours of instruction, 15 of which must be clinical instruction. They must complete 10 hours of medication aide continuing education every two years (Kansas Stat. §§ 65-1, 121, 65-1124) (Administrative regulations 28-39-169a.) |
| Kentucky  | Yes | In Kentucky, unlicensed personnel known as medication aides or similar titles, may function by administering oral and topical medication in long-term care facilities only through delegation by and under the supervision of a registered nurse or licensed practical nurse. Unlicensed personnel who function as medication aides must have successfully completed the state approved course for administration of medication as defined in the administrative regulations issued by the Cabinet for Health and Family Services, Office of the Inspector General. KRS 314.011(6)© and (10)©  |
| Louisiana | Yes | The Medication Attendant Certified (MAC) is a Certified Nursing Assistant (CNA), who has had the additional training in designated medication preparation and administration. The primary role of the MAC is administering medications, and he/ she will not have a patient care assignment which conflicts or distracts from his/ her primary role. The MAC's role is completely dependent upon delegation from a licensed nurse.On July 9, 2008, Louisiana began a 3 year pilot program which establishes provisions for the use of the MAC in licensed nursing facilities with a Registry managed by the Board of Nursing. More information can be obtained from the Department of Health Standards <http://www.dhh.louisiana.gov/offices/page.asp?id=112&detail=8553>  |
| Maine | Yes | Medication aides are certified after completing a program approved by the Department of Health; the program includes 40 hours of classroom instruction. Following a written exam, they have 30 days to complete 6 successful med passes. Unlike some states, Medication aides may also administer PRN medications, perform blood glucose testing and administer insulin. Regulations mandate eight hours every two years in continuing education. Medication aides are not required to be CNAs. ( Maine Administrative Code 10-149 Chapter 113 2.57)  |
| Maryland | Yes | The Certified Medication Technician (CMT), is an individual who has completed the Board of Nursing approved 20 hour training program in medication administration. The medication technician who has completed this required training and who is certified by the Board may administer medications at the delegation of and under the supervision of registered nurses to clients in a community based setting. The registered nurse, case manager/delegating nurse must make an onsite home visit to the client setting at a minimum of every 45 days.For more information about this role, visit the Maryland Board of Nursing website <http://www.mbon.org/main.php>  |
| Massachusetts  | Yes | MA has a Medication Administration Program (MAP) jointly regulated by theDepartments of Public Health, Mental Health and Mental Retardation which established a training and certification program for medication administration by qualified staff in community programs.  |
| Michigan | No |  |
| Minnesota | Yes | Minnesota regulations allow the director of nursing services in a nursing home to delegate medication administration to unlicensed personnel. These people have to complete a nursing assistant training program and a standardized medication administration training program for unlicensed personnel in nursing homes, offered through a postsecondary educational institution (Minn. Rule § 4658.1360).  |
| Mississippi | No |  |
| Missouri | Yes  | Once certified, Level I Medication Aides (LIMA) may administer medications or supervise self administration of medications in any community residential care facility (RCF) funded, licensed or certified by the Department of Mental Health to provide services to persons who are mentally retarded or developmentally disabled and to residents of assisted living facilities (ALF) (9 CSR 45-3.070.)<http://www.sos.mo.gov/adrules/csr/current/9csr/9c45-3.pdf>  |
| Montana | Yes  | Licensed Medication Aides are permitted in Assisted Living Facilities (Mt Code 37-8-101 (3) and the legislature requested a study of the use of medication aides in nursing homes with a report back during the 2011 session. Resolution <http://www.dphhs.mt.gov/qad/hj17/hj0017.pdf>  |
| Nebraska | Yes | The Nebraska Medication Aide Act, passed in 1998, allows people who are not nurses to receive 40 hours of training and administer medications in a nursing home under the supervision of a physician, nurse, or other licensed health care professionals. It also allows them to engage in these activities in assisted living facilities and other settings (Neb. Rev. Stat. § 71-620 et seq., Neb. Admin. R. and Regs., Title 172, Ch. 96) |
| Nevada | No  |  |
| New Hampshire  | Yes  | A Medication Nursing Assistant (MNA) is a Licensed Nursing Assistant (LNA) An LNA is authorized to administer medication if: (a) The LNA holds a currently valid certificate of medication administration; or (b) A licensed nurse delegates the task of medication administration to the LNA who is employed in the home care, hospice, residential care, or adult day care setting. The board, in consultation with the commissioner of health and human services or a designee, shall adopt rules under RSA 541-A establishing standards for such delegation of medication administration which include, but are not limited to, limitations on the number of delegations per assistive personnel, training and competency requirements, documentation requirements, and medication administration error reporting requirements.Amended July 2015 332-K:1 Nursing Care and Consumer Directed Attendant Care Services; Care by Unlicensed Persons.<http://www.nh.gov/nhes/elmi/licertoccs/mednurse.htm>  |
| New Jersey  | Yes | Those who qualify to take the exam for Certified Medication Aides (CMA) include those with current certification in NJ as a nurse aide, homemaker/home health aide, or personal care assistant. Delegation of the medication administration task to a CMA may occur in Assisted Living Residences and Comprehensive Personal Care Homes, or only as part of an Assisted Living Program. These facilities are licensed by the New Jersey Department of Health & Senior Services (NJDHSS) |
| New Mexico  | Yes | Certified Medication Aides (CMAs) came into existence in New Mexico in 1991, limited to ICR-MR facilities for the first few years. In 1997 the section of the Nursing Practice Act covering CMAs added DD-Waiver facilities, and in 2005 it was again expanded to long term care and public schools. A more detailed description is available on the Board of Nursing website <http://www.state.nm.us/nursing/-the> topic is "Rules."  |
| New York  | No  | The category of worker does not exist however, in facilities operated by the Office of Mental Retardation and Developmental Disability, an MOU establishes parameters for nurse’s role regarding training and evaluation. And medication administration training (MAT) is also required for interested child care providers <http://www.ocfs.state.ny.us/main/childcare/mat/>  |
| North Carolina  | Yes  | Medication aides were approved to practice in skilled nursing facilities (SNF, also known as long term care) via Senate Bill 622 August of 2005.  The law became effective July 1, 2006, and the NC Division of Health Service Regulation (previously known as the State Division of Facility Services) rules for SNF became effective October 1, 2006.  (10 NCAC 42C.2014 or 10 NCAC 42D. 1415) To learn more, visit <http://ncbon.org/content.aspx?id=450#MedAideLawsRules> |
| North Dakota | Yes | In 1994, the North Dakota Board of Nursing authorized the role of medication administration by a medication assistant as a delegated nursing task, directly supervised by licensed nurses.To establish this assistive role, the Board of Nursing established standards for two types of medication assistant programs. Between 2000 and 2005, it has been reported there was more than a 300 percent increase in the number of registered medication assistants in North Dakota from 426 to 1,260. Report may be located <http://ruralhealth.und.edu/projects/nursing/pdf/MedicationAssistantReport.pdf>  |
| Ohio | Yes  | Following a pilot program, conducted from 2006 through May 2009 in which 80 nursing homes and 40 residential care facilities participated, certified medication aides are now permitted to administer medications in those settings. A certified medication aide must meet certain criteria as established in the Ohio Laws and Rules Chapter 4723-27 ORC, which can be found on the Ohio Board of Nursing website <http://www.nursing.ohio.gov/medicationAides.htm>  |
| Oklahoma  | Yes | The State Board of Health provides oversight for Certified medication aides, who, upon successful completion of competency standards or prescribed training courses, shall be eligible to distribute medications or treatments within a correctional facility, as set forth in Section 623 of Title 57 of the Oklahoma Statutes, as well as any correctional facility operated by a contractor of the Department of Corrections, nursing facility, specialized facility, continuum of care facility, assisted living center, adult day care or residential care home. |
| Oregon  | Yes | Certified Medication Aides (CMAs) are Certified Nursing Assistants (CNAs) who have had additional training and are authorized to administer non-injectable medications. Oregon CMAs are trained in Board of Nursing approved medication aide programs and must pass a Board-administered examination to qualify for CMA certification before administering medication. ([ORS 678](http://licenseinfo.oregon.gov/index.cfm?fuseaction=external&linktext=ORS%20678&jump_url=http%3A%2F%2Fwww%2Eleg%2Estate%2Eor%2Eus%2Fors%2F678%2Ehtml) [OAR 851-062](http://licenseinfo.oregon.gov/index.cfm?fuseaction=external&linktext=OAR%20851%2D062&jump_url=http%3A%2F%2Farcweb%2Esos%2Estate%2Eor%2Eus%2Frules%2FOARS%5F800%2FOAR%5F851%2F851%5F062%2Ehtml)) <http://licenseinfo.oregon.gov/index.cfm?fuseaction=license_seng&link_item_id=1634>  |
| Pennsylvania  | No  | Although medication aides appear to be working in assisted living facilities, the source for authority is not readily identifiable.  |
| Rhode Island  | Yes | Rhode Island regulations have allowed unlicensed personnel to act as medication technicians in nursing homes since 1979. They must complete 45 hours of instruction at a higher education institution. They do not have to be nurses' aides if all they do is administer medications (R.I. Code R. § 23.7). |
| South Carolina | Yes  | It has been reported that CNAs with additional training are permitted to provide medications to residents of assisted living facilities. Board of Nursing has discussed regulating this worker, but unable to locate evidence of such authority for CNAs or regulation of the practice.  |
| South Dakota | Yes | South Dakota's Nurse Practice Act allows nurses in nursing homes and other settings to delegate some of their nursing tasks to "unlicensed assistive personnel (UAP)." Administering medication is one of these tasks. The regulations require the nurse to supervise the UAP and specify the tasks that may be delegated. The regulations also set standards for approval of medication administration programs, which must provide 16 hours of classroom instruction and four hours of clinical or laboratory instruction as well as a series of tests (S.D. Codified Laws, §§ 20:48:04.01:10 et seq.). |
| Tennessee | Yes | Tennessee Code Annotated, Section 63-7-102, medication aide" means an individual who administers medications under the general supervision of a licensed registered or practical nurse pursuant to this section. During the course of administering medication, a medication aide shall not be assigned any other nonmedication administration duties. Among qualifications – * Be a nurse aide, duly certified under the standards established under

federal law and title 68, chapter 11, part 2, who has practiced as a certified nurse aide in a nursing home or assisted care living facility or a Program for All-Inclusive Care for the Elderly (PACE) as defined in§ 56-2-121(b) for a minimum of one (1) year at the time the applicant submits an application for certification as a medication aide;* Have successfully completed the course of instruction provided by a

training program approved by the board under subsection (i); and* Have passed a standardized examination.
* If an applicant meets the requirements of subsection (e), the board shall issue a medication aide certificate to the applicant. Certificate is valid for 2 years; 6 contact hours of CE required annually.

Amendments 2016 |
| Texas | Yes | Since 1979, Texas has allowed medication aides to work in nursing homes. They must first be certified nurses' aides and complete 140 hours of additional instruction. These include 100 hours of classroom instruction, 30 hours of a skills demonstration laboratory, and 10 hours of clinical experience (Texas Code § 242.606 et seq.)  |
| Utah  | Yes  | MA-C is a medication aide – certified is authorized to administer medications under the supervision of a licensed nurse as defined in Subsection R156-31b-102(40), (i) via approved routes as listed in Subsection 58-31b-102(17)(b);(ii) that includes turning oxygen on and off at a predetermined, established flow rate; and(iii) that is prescribed as PRN (as needed), if expressly instructed to do so by the nurse, or the medication is an over-the-counter medication;(b) destroy medications per facility policy;(c) assist a patient with self administration; and(d) account for controlled substances with another MA-C or nurse.Limitations and other details are cited (**R156-31b-801. Medication Aide – Certified – Formulary and Protocols)**<http://www.dopl.utah.gov/licensing/nursing.html>  |
| Vermont  | No | Unable to locate authority for this practice.  |
| Virginia  | Yes | Medication aides are authorized to practice according to (18VAC90-60-10 et seq. § 54.1-2400 and Chapter 30 of Title 54.1 of the *Code of Virginia, e*ffective Date: July 1, 2009) and regulated by the Board of Nursing  |
| Washington  | Yes | A nursing assistant-certified with a medication assistant endorsement administers medications and certain treatments to residents in a nursing home under the direct supervision of a designated registered nurse.[Medication Assistant FAQs :: Washington State Department of Health](https://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/NursingAssistant/FrequentlyAskedQuestions/MedicationAssistantEndorsementFAQs) |
| West Virginia  | Yes | In accordance with West Virginia Code Chapter 16-50 only a registered professional nurse in conjunction with the resident’s attending physician may delegate the task of medication administration to an Approved Medication Assistive Personnel (AMAP). Licensed practical nurses cannot by law delegate this task to other personnel. Delegation is restricted to ICF/MR (intermediate Care Facility for Persons with Mental Retardation); a personal care home, a residential board and care home, a behavioral health group home, a private residence in which health care services are provided under the supervision of a registered professional nurse, and an adult family care home that is licensed by or approved by the West Virginia state health department. |
| Wisconsin  | Yes | Regulations allow unlicensed personnel to administer medications to nursing home residents if they have taken a Department of Health and Family Services approved medication administration program –(Wisconsin Administrative Code DHS 132.60(5)(d)1) <http://dhs.wisconsin.gov/rl_dsl/NHs/MedAides.htm>  |
| Wyoming  | No  | Repeated legislative efforts to create medication aides have failed thus far.  |

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