Submission date: February 11, 2020

Program/s in this review: Medical Assisting, AAS, Medical Office Coding OEC

Specialized accrediting agency (if applicable): Medical Assisting Education Review Board (MAERB)

Campuses where the program is delivered: Anchorage

Members of the program review committee:

- Lisa Ann Nash, Interim Program Director, Assistant Professor, MA (Chair), Anchorage
- Cheryl Lippert, Assistant Professor, MLS, Program Review Committee Member, UAA

1. Centrality of Program Mission and Supporting Role (700 words or less)

Relevancy
The mission of the UAA Medical Assisting (MA) program is to “provide quality training to individuals desiring to work in the fast-paced, highly technical, ever-changing field of medical assisting.” The program’s mission aligns with that of the School of Allied Health, College of Health and UAA by supporting UAA’s commitment to serving the higher education needs of the state and its communities by providing training in highly technical and skilled medical occupations to meet the healthcare needs of the people of Alaska.

The UAA MA program is the primary educator for Certified Medical Assistants (CMA®), American Association of Medical Assistants (AAMA) (recognized internationally), in Southcentral Alaska. Graduates are educated and tested in clinical and administrative responsibilities. The CMA (AAMA) requires graduation from an accredited postsecondary medical assisting program. Only these graduates are eligible to take the CMA (AAMA) Exam. Three pathways exist: certificate-only, AAS-only, or an AAS with passing of core competencies. The majority of students pursue the last.

UAA MA students are highly sought after by clinical practices before they graduate. Many are hired by their externship sites. Weekly requests to host or hire students and graduates are received. Offices report they prefer our graduates because of the extensive clinical education as well as English, writing and communication.

Our MA program offers an Occupational Endorsement Certificate (OEC) in Medical Office Coding. Students that complete the coursework are prepared for the American Academy of Professional Coders (AAPC) Certified Professional Coder (CPC) examination. Graduates are extremely employable due to the high demand of certified coders across the country. This OEC does not hold any separate accreditation.

Support of Other Programs
The MA program oversees two primary entry-level courses for students interested in healthcare careers: Medical Terminology (MA A101) and Essentials of Human Diseases (MA A104). Pre-majors in nursing, therapies, sonography, surgical technology, and physician assistant engage in interprofessional health team conversations through these courses.

Partnerships
The Medical Assisting program hosts an Advisory Committee comprised of students, graduates, MA faculty, sponsor administrators, employers, physicians, and the public. The Board meets annually and provides guidance and direction to meet the needs and expectations of our healthcare community.

The MA program externship sites include: Southcentral Foundation, Providence Family Medicine Center, and various specialty clinics.
The Medical Office Coding OEC is a stand-alone entity. It does not offer coursework required in other UA programs. The OEC program relies on UAA-Kodiak for two essential courses: Coding for the Medical Office (MA A220, 3 credits) and Advanced Case Studies in Medical Coding (MA A320, 2 credits). These courses are offered only in specific semesters: MA A220 in Fall and MA A320 in Spring. Nevertheless, an agreement was reached to teach MA A220 this spring to facilitate the academic progress of several Anchorage-based students.

Workforce Development/Employment Opportunities

According to the State of Alaska Department of Labor, employment outlook for medical assistants is robust (minimum of 21% growth) with very high employment opportunities. The average monthly wage is $3,791.

With demand for graduates of both programs, a coordinated statewide marketing effort could help attract more students to help meet workforce demands. The Alaska@Work initiative is a recruitment tool developed by Alaska Public Media and its partners to connect individuals to career opportunities. The targeted careers do not require a traditional four-year degree. The December 13, 2019 broadcast of Talk of Alaska spotlighted Alaska’s health care workforce shortage and how it threatens the growing industry. The Wrangell Medical Center has recruited members of their community to reduce CNA turnover from outsiders. “Use of Apprenticeship to Meet Demand for Medical Assistants in the U.S.” states the use of apprenticeships is a workforce development tool that provides employers with skilled workers trained to the specific needs of the employer. Alaska currently has a program run through Alaska Primary Care Associates. Is there an opportunity to partner?

Extramural Support

Strong support for the MA program is evident within the healthcare community at large through the hosting of our students during externship. This in-kind support of 240 hours of real-life, hands-on, supervised patient experiences is invaluable, required by accreditation, and provides a pipeline of placement for our students. In addition, the program is fortunate to receive donated equipment and supplies from the community.

2. Program Demand (including service to other programs), Efficiency, and Productivity (7 year trend; 1400 words or less)

IR data indicate the MA program has not met its capacity to graduate 24 students in the AAS CMA (AAMA) certification path for the past two years. Enrollment for the 2019 Admission Cohort is low, as enrollments across the UA system have also decreased.

The enrollment in the Medical Office Coding OEC is declining as well. Although the certificate is available with the support of other UA campuses, this knowledge is not fully known or communicated. In fact, a request from outside the program was made in January 2019 to suspend admissions to the program. Fortunately, this request was denied, as this program meets a critical need that supports the healthcare industry.

Lower class size does not mean lower employment opportunities. The Program Director receives at least one call every week looking for CMA (AAMA). Employment opportunities remain high for CMAs and coders/billers. The challenge is to market the programs to recruit students to fill available space.

Credits and years per degree seem high for an OEC and AAS. Many students have prior coursework before entering our programs which gives an inaccurate appearance of time or credits required for the degree. Student advising for prerequisite courses required for the program has been weak, however, and has resulted in some additional time and credits towards the award. Courses are scheduled for efficient completion of each program and student advising on appropriate course selection has been improved to reduce excess time and credits.
Tuition revenue from the Medical Assisting courses continue to wholly support the Program expenses including full-time faculty, Program Director, and (Clinical) Practicum Coordinator, and any adjunct faculty. The Program has reallocated faculty resources to meet the demands of the Program.

3. **Program Quality, Improvement and Student Success (1500 words or less)**

   **Specialized Accreditation**
   The UAA Medical Assisting program is accredited by CAAHEP (Commission on Accreditation of Allied Health Education Programs) and reviewed by MAERB (Medical Assisting Education Review Board). The next site visit is scheduled for in 2024.

   **Curriculum and Distance Offerings**
   MAERB periodically reviews the Standards and curriculum for Medical Assisting programs and makes curriculum recommendations to CAAHEP. As an accredited program, we are required to follow the core curriculum and to document the demonstration of affective, cognitive, and psychomotor competencies. However, program faculty incorporate additional topics such as implicit bias, trauma informed care, clinical incidence reporting, and interprofessional simulations. The MA Program recognizes that it needs to formally update its institutional curriculum documents.

   There is value to increasing core curriculum class offerings via a quality hybrid or online delivery modality. MA A235 Medical Insurance, Billing and Healthcare Documentation, an online asynchronous course offered through Blackboard, is being redesigned to meet Quality Matters metrics for the Spring 2020. This course also provides opportunities for students to interact in real time at least a few times during the semester.

   MA A101 Medical Terminology is being updated with new textbooks and a substantial online presence to include voice recognition software to enhance students’ correct pronunciation of medical terms and conditions. MA A104 Essentials of Human Disease is also getting a new textbook with an extensive online resource for students, including pre-recorded lectures. These changes were made to provide a consistent experience for all students regardless of the faculty (adjunct, term, or tenure-track) overseeing the course. Implicit Bias is being introduced into MA A120 Administrative Procedures, MA A250/A255 Clinical Procedures I & II, and MA A295 Clinical Externship.

   To support community wellness across the state, the program should increase the use of distance delivery technology to educate our Alaska residents to address the shortage of skilled healthcare workers. While medical assisting may be considered an “entry-level,” profession, it does require a post high school education and a nationally recognized certification.

   **Program Assessment**
   All students (100%) demonstrated competence with entry-level psychomotor, affective, and cognitive curriculum content areas of medical assisting. The program’s efforts to provide individualized remediation were effective in promoting student competence in all areas of the curriculum.

   Our students are actively sought and welcomed at externship sites across the community. Most are offered positions at their externship sites. Data analysis for the past five years supports assessment findings that our students feel well-prepared to be successful in their role (100% Student Satisfaction), and their employers are also 100% satisfied.

   The Medical Assisting program recognizes that benchmarks and program assessments can be improved. The program is hoping to clearly link student performance in outcome achievement to program improvement recommendations in the future.
Program assessment for the OEC in Medical Office Coding was not completed during 2019. The associated Program Student Learning Outcomes have not been reviewed recently and need to be updated.

Student Success and Accomplishments
Student success does not just happen. Over the years, program faculty have been intimately involved in academic advising in order to ensure students have the knowledge, skills and confidence to be successful in the field. With the establishment of the new College of Health Student Success Center, pre-majors will receive a letter encouraging them to meet with a College of Health advisor to ensure students create a formal academic plan so they are taking the correct pre-requisites and completing courses in the correct order, thus allowing them to graduate in a timely manner. The program is structured so that students are able to move through the program without the expense and time of taking unnecessary classes, thus allowing them to enter the workforce in a timely manner. The new advising system should reduce student credits and time to completion.

MAERB accredited programs annually submit an Annual Report Form (ARF). This may be a good way to compare Medical Assisting programs across the state. Based on this report, the UAA Program for the past five years has graduated at least 92% of its admitted cohorts and graduates have passed the CMA (AAMA) internationally certifying exam at 100%.

ARF reports from the other MAU are currently not available for review.

4. Program Duplication / Distinctiveness (300 words or less)

All three Major Academic Units offer medical assisting programs. All three campus programs are separately accredited through CAAHEP and MAERB.

In Fall 2019, the Program Director initiated conversations with Medical Assisting program directors at both the University of Alaska Fairbanks (UAF) and the University of Alaska Southeast (UAS) to explore opportunities to collaborate in course offerings to maximize limited faculty resources. Preliminary discussions reveal the three campus’ serve distinct student populations. Course sharing currently occurs on a limited basis. Recently UAA automated the transfer of credits for students taking UAF’s Essentials of Human Disease.

5. Summary Analysis (500 words or less)

The Expedited Program Review Committee recommends revision of the UAA Medical Assisting Program to merge the UAA Medical Assisting program into one statewide AAS Medical Assisting program with the OEC-in Medical Office Coding Program housed within it.

Thoughtful, careful, and respectful consideration should be used to complete the following steps:

1. Use the existing academic pathway to graduation (AAS, OEC) that is consistent across all the MAUs.
   • Some academic courses are dictated by MAERB/CAAHEP accreditation and competencies and will be straight forward.
     i. For example, there is a series of core curriculum (MA A120 Administrative Office Procedures; MA A250 Clinical Procedures I; MA A255 Clinical Procedures II; MA A295 Externship) that is mandated by accreditation.
     ii. Course sequencing could be evaluated and aligned.
   • This would simplify Student Success / Academic Advising, petitions and transfers across institutions.
2. Map the MAERB Core Competencies to the same courses across all three institutions to facilitate course alignment.
3. Develop a list of recommended program electives that are pertinent to a career in healthcare that can be aligned across institutions.

4. Review courses as represented in Blackboard based on unbiased, evidence-based metrics such Quality Matters (QM). All MA courses would have a consistent look and feel, allowing students seamless experiences across all courses regardless of location of course delivery.

5. Standardize the textbook(s) for the courses with the imbedded MAERB core competencies. Currently all three campuses use different publishers.

6. Evaluate impact to community campuses and communicate as early as possible.
   - UAA community campuses Eagle River and Mat-Su routinely offer MA A101 and MA A104.
   - If MAERB Core Competencies are assessed within entry-level courses, MAERB must approve faculty teaching those courses or core competencies should be moved to other MA courses that have MEARB-approved faculty.

Additionally:
   - We should maximize use of full-time faculty to teach entry-level courses as needed to meet workload agreements.
   - Eagle River and Mat-Su campuses could potentially continue to offer the courses but MA program majors could not take them from unapproved faculty and still meet accreditation requirements. This could cause much confusion that might be addressed through curriculum revision to create non-accredited courses for non-majors.
   - Local Program Directors would be responsible for working with their respective community campuses to submit ‘workbooks’ to MAERB for accreditation approval.

Please note: The Program Review Committee does NOT recommend changing the individual campus MAERB accreditation to a single accreditation under one campus.

The student population for each campus is unique. UAS has created a program where the faculty deliver didactic courses using online methodologies then physically travel to multiple locations to observe and complete the Evaluation of Competencies. The UAF program works across multiple community campuses to offer their Clinical Procedures at the local level. The UAA campus population commutes twice weekly for didactic courses and Evaluation of Competencies in laboratory/clinical courses. The cost savings and simplification for students is in combining program offerings and faculty resources, not in combining accreditations.