



## Medical Assisting Program Review

2013-2014

### Section I – Accomplishments and Status of 2012 Program Review Report

#### **A. Last Year's Initiatives**

There were two initiatives last year that did not require college funding. Initiative MA1201 was continued from the last program review. This initiative was a plan to revise the existing, outdated degree and COA and create a new one that incorporated one of our most popular courses - BUS V97 (Multi-Skilled Medical Assisting). The existing Medical Assisting degree was revised as an AS Degree and COA in Medical Assisting – Administrative. The degree and COA were recently approved by the state. A new degree was created, which is an AS Degree and COA in Medical Assisting – Multi-Skilled. The new degree and COA were approved by the state in May of this year. We anticipate that these new degrees and COAs will be extremely popular and will vastly increase the number of awards by this program. This initiative has been accomplished.

Another initiative that did not require funding was Initiative MA1302. This was a request for alternative calculations of WSCH. Due to the nature of skills-based training courses, there needs to be limits on enrollment, particularly in BUS V97 (Multi-Skilled Medical Assisting). This year each program can suggest a realistic WSCH for their courses so this initiative will be put forward again.

We had three initiatives that required funding. Initiative MA1303 was a plan to outreach to high school students and special populations. A new marketing brochure was created using grant funds and has been very well-received by the community. Our advisory committee members were presented with copies, as were faculty. Requests for these brochures is very high at community events.

Initiative MA1202 was continued from the previous year and calls for bringing back the externship program. This initiative was not funded but will continue as a request for funding this year.

Initiative MA1301 was a request for laptops for the medical assisting courses. This was not funded and continues to be an issue. It is impossible to adequately teach two of our courses (BUS V97 Multi-Skilled Medical Assisting and BUS V29 Medical Insurance) without using a patient management system. We have tried multiple products and the only one that will be successful in the classroom will not work on a 'thin client' environment. That necessitates the addition of laptop computers. In addition, it is prudent for the courses to incorporate the use of technology in teaching clinical skills. Laptops (or another alternative to thin clients) are also needed for that purpose. The Santa Paula classroom for BUS V97 is completely without computers and desperately needs technology.

#### **B. Updates/accomplishments pertaining to any of the Student Success or Operating Goals from last year's report.**

One of the program's success goals was to increase the number of degrees and certificates awarded by the Medical Assisting program. We believe that the changes that were made with our new degrees and



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COAs will allow us to reach that goal. We have also suggested that faculty pass out copies of the degrees and certificates to their students and discuss them to increase student awareness of their options.

Another goal was to seek alternative technology to improve student training and success in the skills needed for their careers. The initiative for laptops was not funded, which is to the detriment of the program. Although we have been able to continue providing adequate job preparation for our students, we are missing the opportunity to excel in job training.

### Section II - Description

#### **A. Description of Program/Department**

Ventura College's Medical Assisting Program is designed to prepare students for employment in the medical field as administrative and clinical medical assistants. This program is also an excellent training program for career enhancement for those seeking to expand their skills in the medical field and advance into new job positions. Jobs in this area include medical assisting positions in front office or administrative capacity, as well as jobs in a back office, performing tasks of a clinical nature in support of physicians.

#### **Degrees/Certificates**

A.S. Degree: Medical Assistant – Administrative

A.S. Degree: Medical Assistant – Multi-Skilled

Certificate of Achievement: Medical Assistant – Administrative

Certificate of Achievement: Medical Assistant – Multi-Skilled

Proficiency Award in Medical Insurance Billing

#### **B. Program/Department Significant Events (Strengths and Successes), and Accomplishments**

As was mentioned in the above section, the existing degree and COA in Medical Assisting were revised and a new AS degree and COA were created. Both degrees and COAs incorporate the latest training requirement in the medical field, which is Electronic Health Records. The new degree incorporates the Medical Assisting Programs most popular course, BUS V97 Multi-Skilled Medical Assisting. This is a fast-track, one semester course that prepares students for employment in either the front or back office of a medical practice or clinic. The two additional courses in that degree were added in response to suggestions from the Medical Assisting Advisory Committee.

The medical field is transitioning towards electronic charting at a rapid pace. Our new course, BUS V26 (Electronic Health Records) provides training in the latest skills needed by medical assistants. The incorporation of technology has led to new regulatory changes. Medical Assistants who enter orders for patient tests in electronic health records systems, now must be certified medical assistants. This means



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that our program must ensure that the curriculum includes all necessary content for students to be successful in testing for certification. This has been something that has been done for years but we must be diligent in watching for any needed curriculum updates. The faculty for BUS V97 provide certification exam information and applications to students who successfully complete that course in an effort to encourage them to pursue certification. Students completing BUS V97 or either of our AS Degrees or COAs are qualified to sit for the certification exam given by the California Certifying Board for Medical Assistants.

### C. 2013-2014 Estimated Costs/Gainful Employment – for Certificates of Achievement ONLY

	Cost		Cost		Cost		Cost
Enrollment Fees	\$900-\$1100	Enrollment Fees					
Books/Supplies	\$500-\$1000	Books/Supplies					
Total	\$1400 - \$2100	Total		Total		Total	

### D. Criteria Used for Admission

None

### E. College Vision

Ventura College will be a model community college known for enhancing the lives and economic futures of its students and the community.

### F. College Mission

At Ventura College, we transform students' lives, develop human potential, create an informed citizenry, and serve as the educational and cultural heart of our community. Placing students at the center of the educational experience, we serve a highly diverse student body by providing quality instruction and student support, focusing on associate degree and certificate completion, transfer, workforce preparation, and basic skills. We are committed to the sustainable continuous improvement of our college and its services.

### G. College Core Commitments

Ventura College is dedicated to following a set of enduring Core Commitments that shall guide it through changing times and give rise to its Vision, Mission and Goals.

- Student Success
  - Respect
  - Integrity
  - Quality
- Collegiality
  - Access
  - Innovation
  - Diversity



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- Service
- Collaboration
- Sustainability
- Continuous Improvement

### H. Organizational Structure

**President:** Greg Gillespie

**Executive Vice President:** To be determined

**Dean:** Dr. Kathleen Schrader

**Department Chair:** Deborah Newcomb

**Faculty/Staff:**

<b>Name</b>	<b>Deborah Newcomb</b>
Classification	Associate Professor
Year Hired	2009 Full-time 1993 Part-Time
Years of Work-Related Experience	25 years
Degrees/Credentials	A.A., B.A., M.B.A., C.M.M.

Part-time faculty include Lucy Baron-Donnelly, Linda Davis, Kathryn Dunlop, and Caroline Greeby.

### Section IIIa – Data and Analysis

#### A. SLO Data

The Medical Assistant Program created a 5-year rotational plan and entered it into Trac Dat. Courses that are no longer offered were removed from Trac Dat. Mapping of courses to PSLOs was revised and mapping of courses to ISLOs was created. Discussion of existing PSLOs and CSLOs led to revisions as appropriate. A PSLO rubric was created with input from all medical assisting faculty. All SLOs are relevant and measurable. All of these have been entered into Trac Dat.

CSLOs and PSLOs that were assigned to FY13 in our 5-year plan were assessed and the data was entered into Trac Dat. The PSLO and CSLO assessments indicated that we have a high rate of success in achieving our student learning outcomes. Suggestions from faculty for improvement included revisions of assignments and rubrics, more specificity in classroom activities, increase in supplemental learning activities and referrals to tutoring. As a result of this feedback, an increase in use of assignment rubrics has occurred, leading to improved student outcomes.

The major concern was the lack of availability of computers in the Santa Paula campus classroom. As mentioned before, the lack of appropriate technology is hindering the ability to provide students with the full-spectrum of training that is necessary for the medical field. Medisoft, the patient management system that works best in the classroom setting, does not work in a 'thin client' environment. We have spent many hours with the IT personnel in an



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attempt to remedy this problem. We have also tried web-based applications but they were unable to support the number of users our courses have at one time. Laptops would provide a viable solution to this problem. In addition, computers in the Santa Paula classroom will allow faculty to incorporate other technology applications that enhance student clinical skills, including “virtual” practice of skills. The prior initiative (MA 1301) will, once again, be carried forward.

Findings from an SLO assessment in BUS V28A (Medical Assistant – Front Office) showed that students had difficulty using the technology in the classroom because of problems with connectivity to printers. This IT issue resulted in great frustration for students and faculty. This situation has improved but has not yet been resolved.

### B. Performance Data

#### 1. Retention – Program and Course

The retention rate for the Medical Assisting Program for FY13 was 82%. It is slightly lower than the college’s retention rate of 86% for FY13. Comparison of the retention rate to the college’s may not be appropriate. Although this program serves a large diversity of students on both campuses, they are generally students who are not seeking to transfer to a four-year university. The medical assisting students are generally focused on job-training skills.

In comparing the Medical Assisting Program’s retention rates over the past three years, there was a decrease of 5% over the previous three year average. This is concerning, especially since the college’s retention rate increased by 1%. Analysis of our courses shows that the lowest retention rates were in BUS V27A (Beginning Medical Terminology) and BUS V28B (Medical Assisting – Back Office). There was a substantial decrease (11%) in retention in BUS V27A from FY12 to FY13. This warrants further analysis to see what might be done to increase retention. It was determined that BUS V28B was no longer relevant in the existing format so it will not be offered again until it can be appropriately revised.

Review of retention data by ethnicity reveals that the large majority of students in the Medical Assisting Program are Hispanic or White. Although other ethnicities are represented, they represent smaller numbers that make statistical analysis inappropriate. There is a gap between retention in Hispanic students (83%) and White students (91%). Although the overall retention rate for this program meets our expectations, the gap between ethnicities is concerning.

In FY13, changes were made in the unit configuration for two of the courses – BUS V28A (Medical Assisting, Front Office) and BUS V29 (Medical Insurance). In order to be able to cover the skills appropriately for these courses, these courses were changed to lecture plus lab courses. This will allow more time for monitored skills practice and should increase both retention and success rates.



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Additionally, we are exploring ways to incorporate early assessment of basic skills and learning styles in medical assisting courses. This might enable faculty to ensure that their pedagogical approaches are appropriate for the students and may help with recommending tutoring intervention earlier in the semester. It is hoped that these changes will lead to increases in retention and success. An initiative will be created for this purpose.

### **2. Success – Program and Course**

Due to some difficulties with data reports for this program review, there were some questions about the accuracy of the weighted averages for success and retention. That being said, the following analysis was made.

The average success rate for FY13 for the Medical Assisting Program was 66%. This rate is slightly lower than the college's average success rate of 71% for FY13. Again, this may not be an appropriate comparison due to the reasons outlined in the above section on retention. It should be noted that nearly one-third (32%) of medical assisting students complete courses with a grade of "A".

The success rate for the program has gone up and down over the past four years. The success rate for FY13 was down from the previous three-year average of 70%. This is of more concern than the comparison with the college. This is probably due to the fact that there was a marked lower success rate in BUS V27A (Beginning Medical Terminology), which dropped substantially (by 14%) from FY12 to FY13. This course will be reviewed to see what might be done to improve both success and retention rates.

Review of success data by ethnicity reveals that the large majority of students in the Medical Assisting Program are Hispanic or White. Although other ethnicities are represented, they represent smaller numbers that make statistical analysis inappropriate. There is a small gap between retention in Hispanic students (72%) and White students (78%). However, the program's success rate for Hispanic students is higher than the college's success rate of 68%. This would seem to indicate that the success rate gap should be discussed on a campus-wide basis.

The overall success rate for this program is lower than our expectations. As was stated in Section IIIaB2, early assessment of basic skills and learning styles in medical assisting courses might enable faculty to ensure that pedagogical approaches are appropriate and enable them to recommend tutoring intervention earlier in the semester to increase overall retention and success.

In addition, it is hoped that the changes made in the unit configuration for two of the courses – BUS V28A (Medical Assisting, Front Office) and BUS V29 (Medical Insurance), as explained in Section IIIaB2, will help as well. The increased time for monitored skills practice should increase both retention and success rates.

### **3. Program Completion – for "Programs" with Degrees/Certificates Only**



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The Medical Assisting Program has awarded a total of 10 AS Degrees, COAs, and proficiency awards in the past four years. The number of degrees and certificates awarded each year has been about the same.

This data is not surprising. The original medical assisting degree and COA were completely outdated and required courses that are no longer offered at Ventura College. That made it extremely difficult for students to earn these awards as well as unattractive to students. Additionally, the most popular course, BUS V97 (Multi-Skilled Medical Assisting) was not part of any degree or certificate. Even though BUS V97 operates at full capacity every semester on both campuses, students did not earn degrees or certificates. These are the reasons why the original degree and COA were revised and the new degree and COA, which incorporates BUS V97, was created. Since they were both approved this year, we anticipate a large number of awards to be given in May of 2014. We have many students who have already met the requirements or will finish them this semester.

There was also a lack of awareness about the Medical Assisting degree and COA. We have worked with the CTE Specialist, Celine Park, to create awareness at CTE events and create a marketing brochure. We also participated in a Career Exploration event for high school students in Spring of 2013 at Ventura College. A presentation was made to the counseling departments for the three colleges in the district in the spring. Additionally, faculty are providing students with information about the degree and certificate options. An initiative to increase awareness of the degrees and certificates is being created.

The Medical Assistant Programs recommends a goal of 20 degrees and certificates per year.

The data also shows that the degrees and certificates were earned by an equal number of Hispanic and White students. All of the awards were earned by females. This data is not surprising. The gender gap is consistent with that of the medical assisting workforce. Although there is an increase in the number of male medical assistants, it is very slight. Our marketing brochures and outreach activities seek to make the gender gap decrease.

### C. Operating Data

#### 1. Demographics - Program and Course

The demographic data shows that there are twice as many Hispanic students (57%) than White students (28%) in the Medical Assisting Program. There are other ethnicities represented as well but the numbers are too small to make statistical analysis appropriate. The demographic data has not changed significantly over the past three years. These statistics are very similar to the college's averages.

The average age for the medical assisting students is 28, which is slightly older than the college's average age of 24. This is not surprising as the program is particularly attractive to single parents and those who are trying to re-enter the workforce.



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The data regarding gender indicates that there is an overwhelming proportion of females (84%) to males (14%). This proportion has not changed significantly over the past four years. This closely mirrors that of the medical assisting field. Although more men are entering the profession, it remains a predominantly female occupation. As mentioned in Section IIIaB3, outreach to special populations was initiated last year and will continue.

### 2. Budget

- x Program members have reviewed the budget data.
- x No comments or requests to make about the budget

### 3. Productivity – Program and Course

Productivity data for the Medical Assisting Program indicates that the average WSCH is 479. When consideration is given to the fact that skill-based training courses need to have enrollment limitations, this number is very acceptable. The WSCH is at 91% of the district goal of 525 and 88% of the college's goal of 545.

Course enrollment for BUS V97 must be capped at 22 students. The small class size is critical to the ability to provide hands-on skills training and assessments for students. BUS V26, BUS V28A, and BUS V29 need to be capped at 30 for the same reasons. BUS V27A is lecture course that can accommodate larger class sizes.

A reasonable average WSCH goal for this program would be 450. A reasonable WSCH for BUS V97 would be 350. Last year's initiative regarding an appropriate WSCH for this program will be carried forward again.

Course enrollment is very good, with most courses filling to capacity. There is a wait list for BUS V97 on both campuses every semester. The changes in degree and certificate requirements should drive enrollments even higher. In addition, changes to scheduling were made to meet student needs for degree and certificate completion. BUS V26 is being offered every semester since it is a requirement for both COAs and degrees. BUS V25 and BUS V29 are offered every other semester. These changes should also help productivity for the program.

### D. Resources

#### 1. Faculty

The FTEF data for this program was not available. However, there have been no significant changes in staffing over the past three years. There is one full-time faculty who is assigned to the Medical Assisting courses as part of her load. There are four part-time faculty members.





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There have been no problems with finding appropriate faculty for the program and no new contract positions will be requested.

### 2. Classified Staff

There are no classified staff assigned to this program. The program shares classified staff with the entire CTE division.

### 3. Inventory

The current inventory list is adequate for the Medical Assisting Program.

### 4. Facilities or other Resource Requests

The facilities are adequate for the Medical Assisting Program. No new facilities or other resources are being requested at this time.

### 5. Combined Initiatives

The Medical Assisting Program has no combined initiatives.

## E. Other Program/Department Data

The Medical Assisting Advisory Committee provided input into the new degree that was created in FY13. The members emphasized the need for EHR (Electronic Health Records) training for all medical assisting students. Our Electronic Health Records course (BUS V26) is now a requirement in all of our degrees and certificates. Because of this, BUS V26 will be offered every semester.

A meeting of the advisory committee was held in May of 2013. A copy of the minutes is attached to this report. The committee strongly suggested that there is a significant need for students to strengthen their "soft skills". Soft skills specifically mentioned were: professionalism, writing skills, and communication skills. Further discussion is needed to find additional methods of emphasizing these in the medical assisting curriculum. An on-line resource called Health Center 21 was presented to the faculty recently. This resource provides supplemental materials for medical courses. Some of the modules emphasize soft skills and communication. This may be a good addition to the program.

The other concern of the advisory committee was about the need for certification for medical assistants. It will important that preparation for certification continue to be a focus for our courses.

Additionally, the advisory committee again recommended externships and shadowing. An initiative was developed last year for this purpose and will be put forward again this year.



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Advisory committee minutes are attached at the end of this document.

### Section IIIb – Other Program Goals and Initiatives

#### **A. Other Program Goals**

It is imperative that the Medical Assisting Program stay current with standards in the medical field and incorporate new technology to assist students in being competitive in the job market as well as successful in their careers. This further supports the necessity for laptops, as was requested last year. This initiative is being carried forward again this year.

### Section IV – Program Vitality (Academic Senate Approved Self-Evaluation)

The rubric score was 22. This is lower than desired due to the low number of degrees and certificates awarded in the past three years. As explained in this document, the changes in the degrees and certificates effective this fiscal year will greatly increase the number of awards given by this program. In addition, the data provided for this program review had potential errors in retention and success rates. This would greatly affect the vitality rubric.

The vitality rubric should be reviewed. The rubric components should be evaluated for some flexibility. There was a 4.5% difference in student success between the Medical Assisting Program and the college. The success criteria on the rubric awarded 2 points for being within 4 points of the college's success rate and 1 point for being within 8 points. The Medical Assisting program fell into the lower category by 1/2 point, affecting the total score.

This program is a strong part of CTE and provides career training that is relevant and needed in the healthcare community.

### Section V - Initiatives

#### Ranking:

The ranking provided below indicated the program/department's ranking. The initiatives will be ranked again later at the division level before going to the appropriate committees (i.e. technology) for additional ranking.

**R** = Required – mandated or unavoidable needs (litigation, contracts, unsafe to operate conditions, etc.)

**H** = High – Approximately 1/3 of the total program/department/division's initiatives by resource category

**M** = Medium – Approximately 1/3 of the total program/department/division's initiative by resource category

**L** = Low – Approximately 1/3 of the total program/department/division's initiatives by resource category

#### **A. Initiative:** Laptops for Santa Paula Medical Assisting Program

**Initiative ID:** MA1301



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**Link to Data:** This initiative is linked to SLO assessment data and curriculum requirements. We are unable to teach the full curriculum without computers. This results in disparity of curriculum for an economically disadvantaged area. The medical assisting curriculum must include training in using a patient management system. The software we own, Medisoft, does not run on thin clients. The IT department has been unsuccessful in getting Medisoft to run on thin clients. We have been unable to find an alternative patient management system that will work in the classroom setting. The Santa Paula classroom has no computers and cannot provide the necessary training. New technology is available for enhancing clinical skills, using virtual skills practice, but computers are necessary in order to access that technology. This was an unachieved goal from last program review.

**Expected Benefits:** Laptops would enable us to teach the full curriculum and incorporate the technology needed to properly prepare students for the workplace with increased confidence in their abilities to perform required everyday workplace tasks. Students not adequately prepared in the use of PMS software will not be as competitive in the job search market.

**Goal:** Students would be appropriately trained for the workforce and would be competitive candidates in the job search.

**Performance Indicator:** Laptops would be provided for the Santa Paula campus this year and the main campus next year. This could lead to an increase of 3% in the success rates.

**Timeline:** 2014-2015

**Funding Resource Category:** Technology Funds

**Description:** Currently the Medical Assistant Program at Santa Paula has no computers on which to train the students. Due to the unique nature of the software for this program, laptops are required because the current desktop computers (thin clients) provided by the college cannot support this software. Faculty are unable to teach the content specified in the Course Outline of Record. The Santa Paula students do not receive the same content as the main campus students, resulting in disparity of curriculum for an economically disadvantaged area. Laptops (25) are necessary to meet the instructional goals of the course.

**Estimated Cost:** \$20,000

**Ranking:** R

### B. **Initiative:** Student Externships added to schedule

**Initiative ID:** MA1202

**Link to Data:** This initiative is linked to other program/department data. The Medical Assisting Advisory Committee expressed a concern for the lack of an externship and requested reconsideration. This initiative is also linked to the district-wide goal to "Partner more effectively to meet community needs", objectives #2, 4 and 8, found in the Ventura College Planning Parameter document.

**Expected Benefits:** Students would be able to apply the skills learned in the classroom to the workplace with increased confidence in their abilities to perform required everyday workplace tasks. They would gain/strengthen soft skills that are necessary for keeping a job. The competitive job market requires students to have the proper training needed to compete for jobs. Vocational education schools include an externship program, leaving our students at a disadvantage.



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**Goal:** Students would gain work experience and soft skills development. They will have better access to jobs, develop contacts in the medical community, and ideally receive job recommendations and/or job offers.

**Performance Indicator:** Increase in job placements for students.

**Timeline:** 2014-2015

**Funding Resource Category:** Hourly Instruction Funds

**Description:** Reinstitution of student externships. Students would gain work experience and soft skills development. They will have better access to jobs, develop contacts in the medical community, and ideally receive job recommendations and/or job offers.

**Estimated Cost:** \$5000 per semester

**Ranking:** H

**C. Initiative:** Alternative WSCH for the Medical Assisting Program

**Initiative ID:** MA1302

**Link to Data:** This initiative is linked to productivity data. Due to the nature of medical assisting training, which necessitates smaller class sizes for some courses, the program cannot reach the WSCH goal of 545 set by the college.

**Expected Benefits:** Revision of the WSCH would result in a more realistic assessment of efficiency.

**Goal:** Realistic assessment of efficiency

**Performance Indicator:** WSCH of 350 for BUS V97 and 450 for the program in general.

**Timeline:** 2014-2015

**Funding Resource Category:** No new resources needed

**Description:** Alternative WSCH calculation for Medical Assisting Program

**Estimated Cost:** None

**Ranking:** H

**D. Initiative:** Increase student retention and success

**Initiative ID:** MA1401

**Link to Data:** This initiative is linked to SLO, student retention and student success data. Data shows that there has been a decrease of 5% in student retention and 4% in student success over the previous 3-year average. It is also linked to the district-wide goal to "Increase student success", objective #4, found in the Ventura College Planning Parameter document.

**Expected Benefits:** Evaluating methods of early intervention, such as assessing basic skills and learning styles and referrals to tutoring, could increase student retention and success. Better student performance could lead to increased self-esteem and employability for students of the program.

**Goal:** Increase student success and retention to by 4%.

**Performance Indicator:** Student retention rate of 86% and student success rate of 70%

**Timeline:** 2014-2015

**Funding Resource Category:** No new resources needed

**Description:** Evaluate methods of early intervention to increase student retention and success

**Estimated Cost:** None



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**Ranking:** M

- E. Initiative:** Increase awareness of current degrees and certificates

**Initiative ID:** MA1402

**Link to Data:** This initiative is linked to completion data. Data shows that there has been no significant increase in degrees and certificates over the past four years.

**Expected Benefits:** Increasing student awareness of the degrees and certificates offered will lead to higher completion rates.

**Goal:** Increase completion rates to approximately 20 degrees or COAs per year.

**Performance Indicator:** Completion rates of 20 degrees or COAs per year.

**Timeline:** 2014-2015

**Funding Resource Category:** No new resources needed

**Description:** Additional marketing efforts to increase student awareness of degrees and certificates, including revision of marketing brochure and installation of bulletin board display case on third floor of MCE building that would allow for publicizing programs, degrees and certificates

**Estimated Cost:** None

**Ranking:** L

### Section VI – Process Assessment

- A. How have the changes in the program review process this year worked for your area?**

Discussion with faculty was productive. The review of the program clearly indicated that evaluation of courses with low retention and success is needed. We would not have been aware of the significant decrease in success and retention in one of our courses. The form was much easier to understand and use.

- B. How would you improve the program review process based on this experience?**

Keep the form as it is but improve the data provided. It would be much more beneficial to be given only the data needed for the program review. Perhaps meeting with each department chair to find out what information is relevant and needed for their program would make the process smoother.

The vitality rubric should be revisited. The category criteria for some rubric components seem overly punitive.

- C. Appeals**

After the program review process is complete, your program has the right to appeal the ranking of initiatives (i.e. initiatives that should have been ranked high but were not, initiatives that were ranked high but should not have been), the division's decision to support/not support



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program discontinuance, or the process (either within the department/program or the division) itself.

If you choose to appeal, please complete the Appeals form (Appendix E) that explains and supports your position. Forms are located at the Program Review VC website.

The appeal will be handled at the next higher level of the program review process.

### VII – Submission Verification

**Program/Department: Medical Assisting Program**

**Preparer: Debbie Newcomb**

**Dates met (include email discussions): 09-16-13, 09-18-13, and 09-23-13**

**List of Faculty who participated in the program Review Process:**

Debbie Newcomb, Kathy Dunlop, and Lucy Baron-Donnelly

**Preparer Verification:** I verify that this program document was completed in accordance with the program review process.

**Dean Verification:** I verify that I have reviewed this program review document and find it complete. Dean may also provide comments (optional):



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## Rubric for Instructional Program Vitality-CTE

The purpose of this rubric is to aid a program in thoughtful, meaningful and reflective self-evaluation. This rubric is also a defensible and objective way at looking at program viability and efficacy. This rubric should not be used as the mechanism to justify funding requests or for resource allocation. Lastly, a low score on this rubric does not preclude a program from requesting documented and necessary resource requests in other parts of this program review document.

### CTE programs:

Point Value	Element	Score
Up to 6	<b>Enrollment demand / Fill rate</b> <sup>1</sup>	
	A "6" would be the ability to fill 100% of sections prior to the start of the semester.	
	A "5" would be the ability to fill 95% or greater of class sections prior to the start of the semester for the past two terms.	5
	A "4" would be the ability to fill 90% or greater of class sections prior to the start of a semester for the past two terms.	
	A "3" would be the ability to fill 85% or greater of class sections prior to the start of a semester for the past two terms.	
	A "2" would be the ability to fill 80% or greater of class sections prior to the start of a semester for the past two terms.	
	A "1" would be the ability to fill 75% or greater of class sections prior to the start of a semester for the past two terms.	
	A "0" would be the ability to fill less than 75% of class sections prior to the start of a semester for the past two terms.	
Up to 3	<b>Sufficient capital / human resources to maintain the program, as defined by:</b>	
	<b>Ability to find qualified instructors</b>	
	A "3" would indicate that no classes have been canceled due to the inability to find qualified instructors.	3
	A "2" would indicate that rarely but occasionally have classes been canceled due to the inability to find qualified instructors.	
	A "1" would indicate that a significant number of sections in the past year have been canceled due to the inability to find qualified instructors.	
Up to 3	<b>Financial resources, equipment, space</b>	
	A "3" would indicate that the program is fully supported with regards to dedicated class / lab space, supplies and equipment.	3
	A "2" would indicate that the program is partially supported with regards to dedicated class / lab space, supplies and equipment	
	A "1" would indicate that the program is minimally supported with regards to dedicate class / lab space, supplies and equipment.	
	A "0" would indicate that there is no college support with regards to class / lab space, supplies and equipment.	
Up to 4	<b>Agreed-upon productivity rate</b> <sup>2</sup>	
	A "4" would indicate that a program has met or exceeded its productivity rate.	4
	A "3" would indicate that a program is at 90% or greater of its productivity rate.	
	A "2" would indicate that a program is at 80% or greater of its productivity rate.	
	A "1" would indicate that a program is at 70% or greater of its productivity rate.	

<sup>1</sup> Enrollment demand is determined by the ability to fill classes.

<sup>2</sup> Productivity rate is defined as **WSCH/FTEF** as determined by the program faculty at the college.



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A "0" would indicate that a program is at less than 70% of its productivity rate.	
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<b>Up to 3</b>	<b>Program Completion</b>	
	A "3" would indicate that the program has granted 25 or greater combined degrees, certificates and proficiency awards over the past four academic years.	
	A "2" would indicate that the program has granted 20-24 combined degrees, certificates and proficiency awards over the past four academic years.	
	A "1" would indicate that the program has granted 15-19 combined degrees, certificates and proficiency awards over the past four academic years.	
	A "0" would indicate that the program has granted fewer than 14 combined degrees, certificates and proficiency awards over the past four academic years.	0

<b>Up to 3</b>	<b>Employment Outlook for Students/Job Market Relevance</b>	
	A "3" would indicate that the employment outlook for students in the program is greater than the projected county-wide employment average for the next three years and/or "leavers" of the program make more money in their jobs based on taking courses at the college (with or without having completed a degree) than had they not taken courses at the college.	3
	A "2" would indicate the employment outlook for students in the program is about average with the projected county-wide employment average for the next three years.	
	A "1" would indicate that the employment outlook for students in the program is less than the projected county-wide employment average for the next three years.	
	A "0" would indicate that the employment outlook for students in the program is significantly less than the projected county-wide employment average for the next three years.	

<b>Up to 3</b>	<b>Success rate<sup>3</sup></b>	
	A "3" would indicate that the sum of the program's course success rates for the past academic year is greater than the most recent college-wide course success rate metric found in the annual "VC Institutional Effectiveness Report."	
	A "2" would indicate that the sum of the program's success rates for the past academic year is within 4 percentage points of the most recent college-wide course success rate metric found in the annual "VC Institutional Effectiveness Report."	
	A "1" would indicate that the sum of the program's success rates for the past academic year is within 8 percentage points of the most recent college-wide course success rate metric found in the annual "VC Institutional Effectiveness Report."	1
	A "0" would indicate that the sum of the program's success rates for the past academic year is lesser than 8 percentage points of the most recent college-wide course success rate metric found in the annual "VC Institutional Effectiveness Report."	

<b>Up to 4</b>	<b>Course completion rate<sup>4</sup></b>	
	A "4" would indicate that the program's course completion rate is greater than 5 percentage points or greater than most recent college-wide course completion rate metric found in the annual "VC Institutional Effectiveness Report."	
	A "3" would indicate the program's course completion rate is equal to or greater than the most recent college-wide course completion rate metric found in the annual "VC Institutional Effectiveness Report."	
	A "2" would indicate that a program's course completion rate is up to 2 percentage points less than most recent college-wide course completion rate metric found in the annual "VC Institutional Effectiveness Report."	
	A "1" would indicate that a program's course completion rate is up to 5 percentage points less than most recent college-wide course completion rate metric found in the annual "VC Institutional Effectiveness Report."	
	A "0" would indicate that a program's course completion rate is greater than 5 percentage points less than most recent college-wide course completion rate metric found in the annual "VC Institutional Effectiveness Report."	0

<sup>3</sup> As defined by the RP Group, the success rate is "the percentage of students who receive a passing/satisfactory grade" notation of A, B, C, P, IB, or IC.

<sup>4</sup> As defined by the RP Group, the course completion rate is the "percentage of students who do not withdraw from class and who receive a valid grade."





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<b>Up to 3</b>	<b>Ongoing and active participation in SLO assessment process</b>	
	A "3" would indicate that all required courses, programs and institutional level SLOs as indicated by the programs SLO mapping document found in TracDat have been assessed on a regular and robust manner within the past academic year.	3
	A "2" would indicate that 95% of all required courses, programs and institutional level SLOs as indicated by the program's SLO mapping document have been assessed on a regular and robust manner within the past academic year.	
	A "1" would indicate that 90% of all required courses, programs and institutional level SLOs as indicated by the program's SLO mapping document have been assessed on a regular and robust manner within the past academic year.	
	A "0" would indicate than less than 90% of all required courses, programs and institutional level SLOs as indicated by the program's SLO mapping document have been assessed on a regular and robust manner within the past academic year.	

In no more than two to three sentences, supply a narrative explanation, rationale or justification for the score you provided, especially for programs with a score of less than 22:

The score is lower than desired due to the low number of degrees and certificates awarded in the past three years. As explained in this document, the changes in the degrees and certificates effective this fiscal year, will greatly increase the number of awards given by this program. This program is a strong part of CTE and provides career training that is relevant and needed in the healthcare community.

Score interpretation, academic programs:

- 27-32**            Program is current and vibrant with no further action recommended
- 22-26**            Recommendation to attempt to strengthen program
- Below 22**        Recommendation to consider discontinuation of the program



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### MEDICAL ASSISTING ADVISORY COMMITTEE

#### MINUTES

05-03-13

Attendees: Debbie Newcomb, Linda Davis, Lucy Baron-Donnelly, Caroline Greeby, Holly Schaefer, Nancy Kennedy, Amy Rangel, Angela Alvidres, Roxanne Grodin, and Shana Collins.

1. Meeting was called to order at 12:25.
2. Welcome was given by Debbie Newcomb. She explained that today both the Medical Assisting and Business Advisory Committees were brought together for general information and lunch then they would break out for individual committee meetings.
3. Kathy Schrader, new Dean of CTE was introduced. Dean Schrader told about her role at VC and her background. She then explained the role and purpose of advisory committees.
4. Jeff Stauffer's retirement was announced and Jeff gave a few remarks.
5. Newcomb explained the role of advisory committees in regards to degrees and certificates. She explained that copies of the degrees were being passed out to the respective committees and that we also have an Accounting Degree/COA and a Bookkeeping Proficiency Award. She then explained the difference between AS degrees and COAs (Certificates of Achievement).

#### BREAKOUT SESSION

1. A handout containing the new AS Degree/COA for Medical Assistant- Multi-Skilled, the revised AS Degree/COA for Medical Assistant – Administrative, and a labor market summary was passed out.
2. Debbie Newcomb explained the difference between the two degrees and the reasons they were created. She also explained the background of the MA Program.
3. Ballots were passed out for a vote for acceptance of the new Multi-Skilled Medical Assistant Degree/COA. Holly Schaefer asked for an explanation of BUS V97. Newcomb explained what the curriculum included.
4. Proxy ballots had been sent to members who were unable to attend the meeting. Final results were 13 votes in favor of the new degree and 1 opposed.
5. After ballots were turned in, Newcomb explained that the revised degree was sent to the State Chancellor's Office in February. At this point, it is still pending approval. The new Multi-Skilled MA degree was sent to the State Chancellor's office two weeks ago. It was sent with the email survey from the committee that was done last October regarding committee recommendations for the degree changes. This week notification was received from the Chancellor's office that they had approved the new degree. The vote today was to be an affirmation of the previous email survey.



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6. Nancy Kennedy asked about certification for MAs. Newcomb explained the CCBMA's certification test and requirements. The requirement that MAs be certified before they can do CPOE (Computerized Physician Order Entry) in Electronic Health Records (EHR) systems was discussed. Managers are concerned that they will need to send their MAs to take the test. Several members asked that information regarding a study guide for the exam be sent to the committee. Newcomb agreed to forward that information. It was suggested that a short-term study course be offered for MAs who already work in the field to prepare them to take the certification exam. Newcomb agreed to look into creating such a course.
7. Newcomb then opened the meeting to discussion of committee concerns and suggestions.
8. Linda Davis explained that Obamacare was going to drive a need for more physicians, which in turn would lead to the need for more MAs. Newcomb referred to the Labor Market data that was in the handouts substantiated a continued need for trained MAs.
9. Roxanne Grodin discussed the need for students to understand the role and importance of Meaningful Use requirements. Newcomb agreed and explained that the new EHR textbooks include that.
10. The need for excellent written and oral communication skills was then discussed with many members explaining the various office tasks requiring these skills and the problems they encounter in these areas. Shana Collins explained that MAs completing entries in EHR systems have to write with clarity, accuracy and specificity. Other communication concerns are letter writing, professional appearance of letters, emails, etc.
11. Professionalism and soft skills were discussed and are a continuing concern of office managers.
12. Celine Parks shared information about the outreach program she is creating for middle school students to explore career paths, including a healthcare path. The opportunity to help them develop the soft skills at earlier ages was brought up.
13. Internships and "shadowing" were discussed.
14. Carol Greeby asked the committee if they felt that students completing a medical terminology course would be able to seek jobs and receive the rest of their training on the job. Varying opinions were offered. Discussion was held about requirements for coding certification. Holly Schaefer explained that the AAPC offers a CPC-A certification for apprenticeship certification. Linda Davis explained that AHIMA also offers an apprenticeship exam – CCS-A. Schaefer also recommended that students be encouraged or given an assignment to attend a local AAPC chapter meeting as part of coding courses so they can begin networking opportunities. Students can join the AAPC. It was recommended that students take anatomy & physiology in order to be able to learn ICD-10 coding.

Meeting was adjourned.



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### APPEAL FORM

(Due to Office of Institutional Effectiveness by November 8)

The program review appeals process is available to any faculty, staff, or administrator who feels strongly that the prioritization of initiatives (i.e. initiatives that were not ranked high but should have been, initiatives that were ranked high but should not have been), the decision to support or not support program discontinuance, or the process followed by the division should be reviewed by the College Planning Council.

Appeal submitted by: (name and program) Debbie Newcomb for Medical Assisting Program

Date: 11-13-13

Category for appeal:  Faculty  
 Personnel – Other  
 Equipment- Computer  
 Equipment – Other  
 Facilities  
 Operating Budget  
 Program Discontinuance (appeal explanation is attached)  
 Other (Please specify)

Briefly explain the process that was used to prioritize the initiative(s) being appealed:

See attachment.

Briefly explain the rationale for asking that the prioritization of an initiative/resource request be changed:

See attachment.

**Appeals will be heard by the College Planning Council on November 9, 2011 at its regularly scheduled meeting (3:00 – 5:00 p.m.). You will be notified of your time to present.**



## Medical Assisting Program Review

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### MEDICAL ASSISTANT PROGRAM DISCONTINUANCE APPEAL

#### VC's MEDICAL ASSISTING PROGRAM

The Medical Assisting Program offerings were updated in the past year and became effective in Fall 2013. Students have the following options for training.

- AS Degree - Multi-Skilled Medical Assistant
- AS Degree – Administrative Medical Assistant
- COA - Multi-Skilled Medical Assistant
- COA – Administrative Medical Assistant
- BUS V97 – Multi-Skilled Medical Assistant - Fast-track, one semester course in training
- Proficiency Award in Insurance Billing

The Multi-Skilled Medical Assistant AS Degree and COA are new and incorporate our most popular course – BUS V97, which was designed to help students get rapid training and move into the workforce. BUS V97 was created in Spring of 1999 and has been especially successful at serving special populations, such as Cal Works students, re-entry students, displaced homemakers, and single parent students. The program was so popular and successful that it was expanded to the VCSP site in the fall of 2003.

- Spring 1999 through Summer 2003
  - Approximately 320 students took BUS V97 at the main campus
- Fall 2003 through Spring 2012
  - Approximately 880 students took BUS V97 at both campuses
- Enrollment is full every semester

The Administrative Medical Assistant AS Degree and COA were revised to meet the current needs of the medical field, with input from the advisory committee.

The program was also strengthened by the addition of a course in Electronic Health Records, which is one of the newest skills required of today's medical assistants, and has been included in both AS Degrees and COAs.



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Associate in Science Degree  
Certificate of Achievement

### MEDICAL ASSISTANT - *Administrative*

REQUIRED COURSES:		Units
BUS V25	Medical Coding	3
BUS V26	Electronic Health Records	3
BUS V27A	Beginning Medical Terminology	3
BUS V28A	Medical Office Procedures: Front Office	3
BUS V29	Medical Insurance	3
REQUIRED ADDITIONAL COURSES:		
Select one (1) of the following courses:		
BUS V44/SUP V81	Business English	3
BUS V45	Business Communications	<u>3</u>
		18

Recommended courses: In addition to the required courses listed above, it is recommended that students who seek to obtain additional insight into the field of study consider taking one or more of the following courses: ANAT V01; **BIOL V12**; BUS V03, **BUS V17**, **BUS V27B**; PSY V01. Although these supplemental courses may be of value to the student, please note that they do **NOT** satisfy the requirements for this degree.

The Medical Assistant Program assists students in developing the skills needed for a career as an administrative (front office) medical assistant. This program provides the opportunity for students to develop effective communication skills, computer skills, and technical skills related to working in an administrative role in a variety of healthcare settings. Jobs in this field include: front office medical assistant, medical secretary, entry level medical biller, hospital admitting clerk, hospital unit coordinator and entry level medical records clerk. Students who successfully complete this program may be eligible to take the certification exam offered by the California Certifying Board for Medical Assistants to become a California Certified Medical Assistant – Administrative (CCMA-A)



## Medical Assisting Program Review

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### Associate in Science Degree Certificate of Achievement

#### MEDICAL ASSISTANT – MULTI-SKILLED

REQUIRED COURSES:		Units
BUS V26	Electronic Health Records	3
BUS V27A	Beginning Medical Terminology	3
BUS V97	Multi-Skilled Medical Assistant	<u>16</u>
		22

Recommended courses: In addition to the required courses listed above, it is recommended that students who seek to obtain additional insight into the field of study consider taking one or more of the following courses: BUS V25, V27B, V29, V44, V45. Although these supplemental courses may be of value to the student, please note that they do **NOT** satisfy the requirements for this degree.

The Multi-Skilled Medical Assistant Program assists students in developing the skills needed for a career as a medical assistant, trained in both administrative (front office) and clinical (back office) skills. This comprehensive program is offered in an accelerated format and provides the opportunity for students to develop effective communication skills, computer skills, and technical skills that lead to success in working in a variety of healthcare settings. Jobs in this field include, front office medical assistant, medical secretary, back office medical assistant, entry level medical biller, hospital admitting clerk, hospital unit coordinator and entry level medical records clerk. Students who successfully complete this program may be eligible to take the certification exam offered by the California Certifying Board for Medical Assistants to become a California Certified Medical Assistant – Administrative (CCMA-A), Clinical (CCMA-C) or Administrative and Clinical (CCMA-AC).



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### APPENDIX A Labor Market Study for Medical Assisting Degrees

#### CAREER FACTS

- The occupation is in high demand and provides potential for career laddering.
- Estimated job growth
  - 31% nationally from
  - 22.4% in California
  - 24.9% in Ventura County
- In efforts to reduce healthcare costs, medical assistants are frequently hired in place of nurses, who are traditionally paid higher wages.
- As healthcare providers make the switch to EHR (Electronic Health Records), the duties of the medical assistant and medical secretary have expanded and new roles have been created to deal with the data management in these systems.

#### **Net Job Market**

According to the US Bureau of Labor Statistics Occupation Outlook Handout, medical assisting employment is expected to grow **“by 31 percent from 2010 to 2020, much faster than the average for all occupations.”** The growth of this occupation is attributed to the aging baby-boom population, the increased demand for preventative care services, and the expansion of duties by medical assistants that allow physicians to see more patients. In efforts to reduce healthcare costs, medical assistants are frequently hired in place of nurses, who are traditionally paid higher wages. As healthcare providers make the switch to EHR (Electronic Health Records), the duties of the medical assistant and medical secretary will expand and new roles will be created to deal with the data management in these systems.

The Ventura County Community College District Division of Economic Development prepared a “Medical Assistant Occupational Outlook Report”. The findings were that the medical assisting career has shown a steady growth rate and indicates continued steady growth through 2017. The occupation is in high demand and provides potential for career laddering. Medical Assisting is one of the top five healthcare occupations in terms of growth and number of jobs.

Projected growth rates and projected number of jobs for Medical Assistants and Medical Secretaries are shown in Table 1 below. National, state and local data is provided.

**Table1**

Region	Medical Assistants Projected Growth Rate	Projected # of Medical Assistant Jobs	Medical Secretaries Projected Growth Rate	Projected # of Medical Secretary Jobs
US Outlook for 2010-2020	31%	162,900	not reported separately	not reported separately
California for 2010-2020	22.4%	99,000	29.5%	101,400
Ventura County for 2008-2018	24.9%	2,660	20.8%	2,730





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Additional data was accessed regarding occupations with the projected highest demand. This information is summarized in Table 2. ***“Fastest growth”*** is defined as new openings due to occupational growth within that county. ***“Most jobs”*** is defined as new jobs plus replacements for attrition within that county.

Bearing in mind that many of our students do not remain to work in Ventura County, surrounding area data is included in Table 2.

***The Allied Health Workforce Analysis Los Angeles Region*** report includes data for Ventura, Santa Barbara, Los Angeles, and Riverside/San Bernardino counties. The report states that medical assisting is “projected to be a fast-growing occupation and because of its absolute size, one that will offer significant employment opportunity”.

**Table 2 Fastest Growth and Most Jobs Ranking Within the Named County** (The Allied Health Workforce Analysis Los Angeles Region Report)

Geographical Area	Medical Assistant Rank	Medical Secretary Rank
Ventura County	Fastest Growth – Top 1%	Not reported separately
	Most Jobs - Top 15%	
Santa Barbara County	Fastest Growth – Top 25%	Not reported separately
	Most Jobs - Top 10%	
LA County	Fastest Growth – Top 1%	Not reported separately
	Most Jobs - Top 15%	
Riverside/San Bernardino County	Fastest Growth – Top 10%	Not reported separately
	Most Jobs - Top 15%	

Ranking data was also obtained showing the ranking of Medical Assisting and Medical Secretary careers among other high-growth careers.

***The Program Effectiveness and Planning Committee – Planning Resource – Ten Year Occupational Demand Projections for Ventura County*** (Accessed on 10-13-12 from [http://www.oxnardcollege.edu/assets/pdf/edserv/LMI\\_VCnty\\_Fastest\\_Growing.pdf](http://www.oxnardcollege.edu/assets/pdf/edserv/LMI_VCnty_Fastest_Growing.pdf)) evaluated information for the State of California’s Labor Market Information forecast of the demand occupations in Ventura County for the period of 2008-2018. The list of 572 occupations was arranged in order of the highest growth rates. Medical Assistants were listed 24<sup>th</sup> out of 572 occupations. Medical Secretaries were listed 38<sup>th</sup>. Out of the top 38 occupations, 15 of them were in a healthcare field.

Table 3 provides the ranking data for the Medical Assisting and Medical Secretary careers. Additional data is provided in Attachments B and C showing other top ranking healthcare careers.



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Table 3

Source	Medical Assistant Ranking	Medical Secretaries Ranking	All Healthcare Careers
Program Effectiveness & Planning Committee	24 <sup>th</sup> out of 572	38 out of 572	15 out of top 38
California EDD Labor Market Data – Fastest Growing Occupations	14 <sup>th</sup> out of 50	21 <sup>st</sup> out of 50	16 out of top 50
California EDD Labor Market Data – Most Jobs	26 <sup>th</sup> out of 30	25 <sup>th</sup> out of 30	4 out of top 50
EDD Fastest Growing Occupations in Ventura County	21 <sup>st</sup> out of 100	31 <sup>st</sup> out of 100	29 out of 100

### Earning Potential

- The Medical Assistant Occupational Outlook Report prepared by the Ventura Community College District Division of Economic Development notes that the Median Hourly Salary for Medical Assistants in Ventura County is \$15.19 per hour. According to the report, medical assisting is in high demand, pays well, and has potential for career growth.
- The State of California Employment Development Department Labor Market Information report shows a median wage of \$15.79 per hour for medical assistants and \$17.23 per hour for medical secretaries. (Source: <http://www.labormarketinfo.edd.ca.gov/> Accessed 11-13-13)
- As individuals grow with their organizations and take on additional responsibilities, their earning potential grows.

### Program Credibility/Career Potential

- The revised Certificate of Achievement and Associates in Science Degree in Medical Assisting – Administrative will serve students who desire a career in a medical facility working in the front office, collections, insurance processing, surgery scheduling, scribe and entry-level billing. Completion of the Certificate of Achievement or degree will enable students to take the certification exam offered by the California Certifying Board for Medical Assistants.
- The new Certificate of Achievement and Associates in Science Degree in Medical Assisting – Multi-Skilled will serve students who desire a career in a medical facility working in either the front or the back office of a medical facility. Completion of the Certificate of Achievement or degree will enable students to take the certification exam offered by the California Certifying Board for Medical Assistants.
- The certificate and degree also meet the ongoing needs of incumbent workers who desire to upgrade their skills in order to move into advanced positions in billing, coding and management.