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# TITLE 412 INDIANA HEALTH FACILITIES COUNCIL

#### LSA Document #02-41(F)

#### DIGEST

Amends 412 IAC 2 to govern training, testing, practice, and certification of qualified medication aides. Effective 30 days after filing with the secretary of state.

412 IAC 2-1-1	412 IAC 2-1-10
412 IAC 2-1-2.1	412 IAC 2-1-11
412 IAC 2-1-2.2	412 IAC 2-1-12
412 IAC 2-1-6	412 IAC 2-1-13
412 IAC 2-1-8	412 IAC 2-1-14

SECTION 1. 412 IAC 2-1-1, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED TO READ AS FOLLOWS:

## 412 IAC 2-1-1 "Qualified medication aide" or "QMA" defined

Authority: IC 16-28-1-11 Affected: IC 16-28

Sec. 1. As used in this rule, "qualified medication aide" or "QMA" means an individual who has satisfactorily completed the state qualified state-approved qualified medication aide course, passed the state-approved competency evaluation test, and test received state certification. (Indiana Health Facilities Council; 412 IAC 2-1-1; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1937)

SECTION 2. 412 IAC 2-1, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED BY ADDING A NEW SECTION TO READ AS FOLLOWS:

## 412 IAC 2-1-2.1 Employment of QMA and registry verification

Authority: IC 16-28-1-11 Affected: IC 16-28

- Sec. 2.1. (a) A facility must not allow an individual to work as a QMA unless that individual has satisfactorily completed a state-approved QMA training and competency evaluation program and has been certified by the Indiana state department of health.
- (b) A facility must not allow an individual to work as a QMA unless the individual has been recertified and completed at least six (6) hours of in-service training per calendar year beginning January 1 of the year after initial training and certification.
- (c) Before allowing an individual to serve as QMA, a facility must receive verification from the Indiana Certified Nurse Aide (CNA)/QMA registry that the individual has met certification requirements unless the individual can prove that he or she has recently successfully completed a QMA training and competency evaluation program approved by the Indiana state department of health and has not yet been included in the registry. Facilities must follow-up to ensure that such an individual actually is placed in the registry. (Indiana Health Facilities Council; 412 IAC 2-1-2.1; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1937)

SECTION 3. 412 IAC 2-1, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED BY ADDING A NEW SECTION TO READ AS FOLLOWS:

# 412 IAC 2-1-2.2 Program applicants

Authority: IC 16-28-1-11 Affected: IC 16-28

- Sec. 2.2. All applicants wishing to enroll in a training program to become a QMA shall meet all of the following preenrollment criteria:
  - (1) Proof of a high school diploma or GED.
  - (2) Proof of being at least eighteen (18) years of age.
  - (3) Proof of completion of an Indiana nurse aide training course, including certification and on the Indiana state CNA registry.
  - (4) At least one thousand (1,000) hours of documented work experience as a CNA within in [sic.] the last twenty-four (24) months.
  - (5) Demonstrated ability to read and write in English and the ability to perform the four (4) basic mathematical functions:
    - (A) addition;
    - (B) subtraction;
    - (C) multiplication; and
    - (D) division;

as determined per training entity enrollment pre-test.

(Indiana Health Facilities Council; 412 IAC 2-1-2.2; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1937)

SECTION 4. 412 IAC 2-1-6, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED TO READ AS FOLLOWS:

#### 412 IAC 2-1-6 Location for supervised practicum

**Authority:** IC 16-28-1-11 **Affected:** IC 16-28-1

- Sec. 6. (a) The site for the supervised practicum shall be a facility or unit operating under 410 IAC 16.2. The practicum training site shall have written approval from the Indiana state department of health every two (2) years.
- (b) If the supervised practicum site is conducted at a location other than the site of the classroom training, a written agreement shall be in place stating the practicum is being conducted under appropriate supervision.
  - (c) The Indiana state department of health may remove approval to train QMAs from any training entity that:
  - (1) fails to meet the requirements of 410 IAC 16.2;
  - (2) refuses unannounced visits by the Indiana state department of health;
  - (3) refuses to submit an acceptable plan of correction to an Indiana state department of health survey;
  - (4) falsifies any documents pertaining to the QMA training;
  - (5) has a pattern of excessive failure rates on the competency evaluation test; and
  - (6) has validated training improprieties.

(Indiana Health Facilities Council; 412 IAC 2-1-6; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1937)

SECTION 5. 412 IAC 2-1-8, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED TO READ AS FOLLOWS:

#### 412 IAC 2-1-8 QMA competency evaluation

Authority: IC 16-28-1-11 Affected: IC 16-28-1

Sec. 8. (a) A QMA competency evaluation test shall be administered consisting of multiple choice questions requiring a passing score of eighty percent (80%) by the state-approved training testing entity. Ongoing revision of test questions may be necessary in an effort to maintain a valid exam that includes new medications and updated materials for various medication classifications. The application for competency exam shall be submitted within thirty (30) days of practicum completion.

- (b) The competency evaluation test may be retaken taken three (3) times within one (1) year of the completion date of classroom training. Prior to the student applying to take the second or third test, the student shall provide documentation to the testing entity of additional training that is based on the QMA training program and conducted by a registered nurse. However, if the student is unsuccessful after three (3) attempts, he or she shall repeat the training program in its entirety. Testing will be administered and scored by an entity under contract with approved by the Indiana state department of health.
- (c) The student has six (6) months from the completion of the sixty (60) hour classroom portion of the program to must complete the forty (40) hour practicum and successfully pass apply to take the competency evaluation test including the retake in ease of initial failure. within six (6) months of the completion date of the sixty (60) hour classroom portion of the program. Applications to take the second or third test must be submitted, along with documentation of additional training, within one (1) year of the completion date of the classroom training.
- (d) Graduate nursing students that do not pass the state nursing boards may function as a QMA after successfully completing the competency evaluation test with a passing score of eighty percent (80%).
- (e) Nursing students who have completed a pharmacology class with a grade of "C" or above would be exempt from the classroom training; however, the student is required to complete the practicum and successfully complete the competency evaluation test.
- (f) The competency evaluation program must be approved by the Indiana state department of health every two (2) years. (Indiana Health Facilities Council; 412 IAC 2-1-8; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1938)

SECTION 6. 412 IAC 2-1, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED BY ADDING A NEW SECTION TO READ AS FOLLOWS:

412 IAC 2-1-10 Mandatory recertification/annual in-service education requirements

Authority: IC 16-28-1-11 Affected: IC 16-28

Sec. 10. (a) A QMA shall be recertified by the Indiana state department of health every year.

- (b) To be recertified, a QMA must obtain a minimum of six (6) hours per calendar year of in-service education in the area of medication administration, beginning January 1 of the year after initial QMA training and certification.
- (c) Annual in-service education shall include, but is not limited to, the following if facility policy allows the QMA to perform such functions in the facility:
  - (1) Medication administration via G-tube/J-tube.
  - (2) Hemoccult testing.
  - (3) Finger stick blood glucose testing (specific to the glucose meter used).
- (d) It is the QMA's responsibility to track said hours of in-service training and supply proof of completion of in-service training to the Indiana state department of health in conjunction with application for annual recertification.
  - (e) The Indiana state department of health shall maintain a registry of QMAs who have current certification.
- (f) A QMA who does not meet the six (6) hour per year in-service requirement shall not be recertified. The QMA will be removed from the QMA registry and be required to reenter and satisfactorily complete a training program and pass the state approved competency evaluation test prior to again serving in the capacity of a QMA. (Indiana Health Facilities Council; 412 IAC 2-1-10; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1938)

SECTION 7. 412 IAC 2-1, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED BY ADDING A NEW SECTION TO READ AS FOLLOWS:

412 IAC 2-1-11 Disciplinary action Authority: IC 16-28-1-11

Affected: IC 16-28

Sec. 11. (a) All incidents in a health facility of alleged abuse, neglect, misappropriation of resident property, or conduct outside the QMA scope of practice shall be reported to the Indiana state department of health. The Indiana state department of health will investigate the incident.

- (b) The Indiana state department of health may revoke the certification of a QMA following appropriate investigation.
- (c) Acts that may result in the revocation of QMA certification include, but are not limited to, the following:
- (1) Stealing, diverting, or otherwise misusing medications.
- (2) Fraudulently procuring or attempting to procure a certification.
- (3) Neglecting to administer appropriate medications as prescribed.
- (4) Performing duties outside the QMA scope of practice.
- (d) A finding on the CNA registry results in automatic revocation of the QMA certification. (Indiana Health Facilities Council; 412 IAC 2-1-11; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1939)

SECTION 8. 412 IAC 2-1, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED BY ADDING A NEW SECTION TO READ AS FOLLOWS:

412 IAC 2-1-12 Reciprocity Authority: IC 16-28-1-11 Affected: IC 16-28

Sec. 12. An individual who is a certified QMA in another state may petition the Indiana state department of health to be exempt from the Indiana QMA training course and supervised practicum. The petition for exemption shall be in writing and shall include proof that the applicant is a QMA in good standing in another state. If a petition for exemption is granted, the individual will be required to take and pass the competency evaluation test with a score of eighty percent (80%) or higher before that individual can be certified as a QMA in Indiana. (Indiana Health Facilities Council; 412 IAC 2-1-12; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1939)

SECTION 9. 412 IAC 2-1, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED BY ADDING A NEW SECTION TO READ AS FOLLOWS:

412 IAC 2-1-13 QMA practicing prior to rule

Authority: IC 16-28-1-11 Affected: IC 16-28

- Sec. 13. An individual who is certified and employed as a QMA in Indiana prior to the effective date of this rule may continue to work as a QMA, except the individual:
  - (1) may perform only those tasks addressed in previous QMA training;
  - (2) must complete supplemental training approved by the Indiana state department of health that addresses the QMA scope of practice and allowable tasks within eighteen (18) months from the effective date of this rule; and
  - (3) must meet the annual in-service requirements in section 10 of this rule.

(Indiana Health Facilities Council; 412 IAC 2-1-13; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1939)

SECTION 10. 412 IAC 2-1, AS ADDED AT 25 IR 2728, SECTION 1, IS AMENDED BY ADDING A NEW SECTION TO READ AS FOLLOWS:

412 IAC 2-1-14 Fees

Authority: IC 16-28-1-11 Affected: IC 16-28

Sec. 14. (a) An annual fee of ten dollars (\$10), payable to the Indiana state department of health, is required for

## recertification of a QMA.

(b) The fee required by subsection (a) shall be due thirty (30) days prior to the expiration of the QMA's certification. (Indiana Health Facilities Council; 412 IAC 2-1-14; filed Jan 24, 2003, 8:26 a.m.: 26 IR 1939)

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