

# Medical Assistants' Career Pathways: Survey of MAs in Washington State

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## BACKGROUND

### MAs in Washington State

- Medical Assistants (MAs):
  - Key members of the healthcare team, with roles expanding in office and clinic settings
  - 500,000 to 600,000 MAs employed in the U.S. in 2015
  - Among the 20 fastest growing occupations in the nation: 29% employment growth projected between 2016 and 2026 MAs
  - Occupation growth due to increasing demand for primary care services and mounting pressure to reduce healthcare costs through task shifting to lower-cost providers
  - Non-licensed profession – few studies available that describe MAs' roles, wages, job satisfaction and career plans

- Washington is the only state to credential MAs, with scope of (delegated) practice defined by Legislature
- Supervisor must be either physicians, ARNPs, PAs, optometrists, podiatric physicians, naturopathic physicians, or RNs
- MA-certified (MA-Cs):
  - must complete an approved MA training program
  - must pass 1 of 4 national competency exam
  - 15,789 MA-Cs in Washington State in 2017
- MA-registered (MA-Rs)
  - held jobs as "health care assistant" prior to MA credentialing
  - not required to obtain MA training or pass national exam, unless changing employers
  - 7,584 MA-Rs in Washington State in 2017

THE ANALYSES PRESENTED HERE FOCUS ON MA-Cs

### Washington State Medical Assistant Survey



### Study Purpose

This study takes advantage of Washington's defined MA population to describe the MA workforce, MAs' career pathways, and factors associated with their intentions to remain in or leave the MA profession.

## METHODS

### Survey Approach

- Survey conducted Summer, 2017
- Survey operations by Social and Economic Sciences Research Center (SESRC), Washington State University
- Contacted a random sample of ~2,000 MA-Cs and all MA-Cs with email addresses (approx. 11,800 in addition to those in the random sample). All contacted by email with random sample additionally contacted by USPS.
  - Up to 9 contacts to MAs with email addresses, and up to 3 mailed contacts to random sample

### MA-C Responses (n=3,296)

- Response rate: 25.0% overall (32.9% of random sample)
- Comparison of respondents to non-respondents found:
  - Sex: No significant differences (male/female)
  - Geography: No significant differences for 8 of 9 state health planning regions
  - Age (Across 10 year age categories): Somewhat higher representation of MA-Cs age 35-44 and lower among MA-Cs under age 35 and over age 65
- Analyses included all respondents, unweighted
  - Analyses: descriptive statistics, logistic regression
  - Regressions control for age, among other demographic variables
  - Conclusions take into account any possible remaining age-related response bias

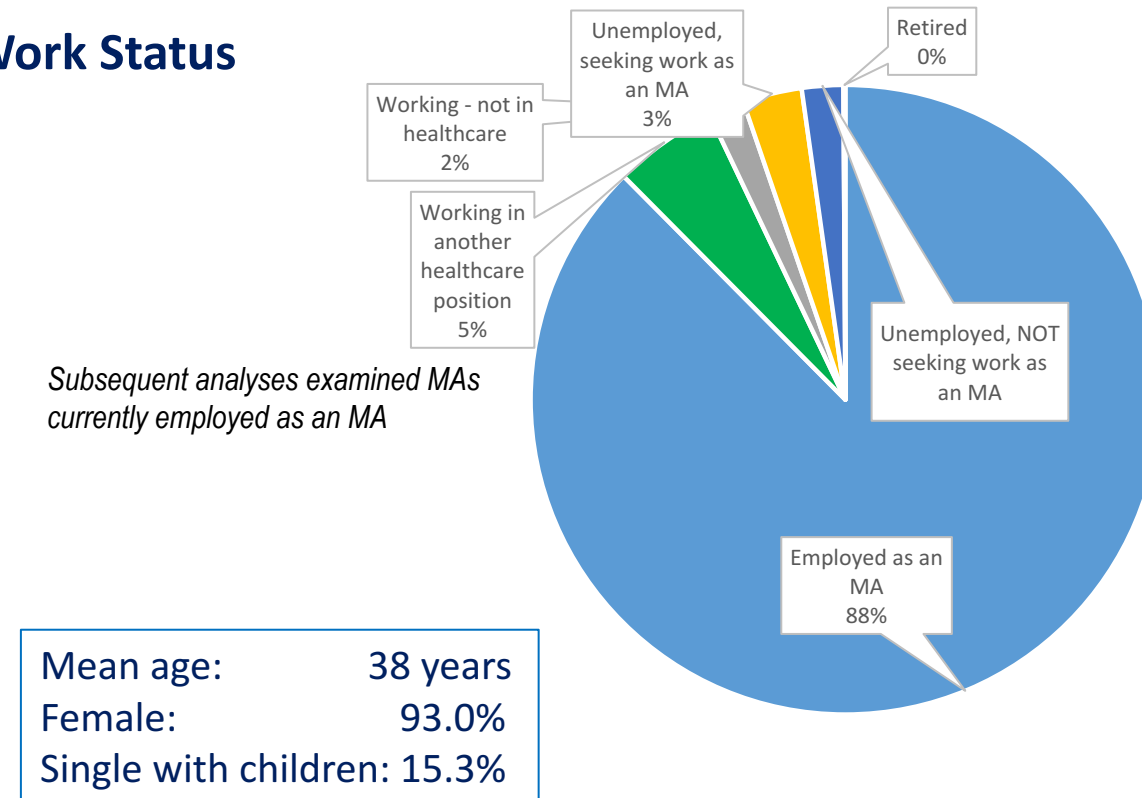
### Questions

- Current employment status
- Practice location and facility type
- Hours and wages
- Work history
- Current duties, tasks and responsibilities (and performance frequency)
- Supervision
- Career satisfaction and future plans
- Education/training and credentials
- Demographics

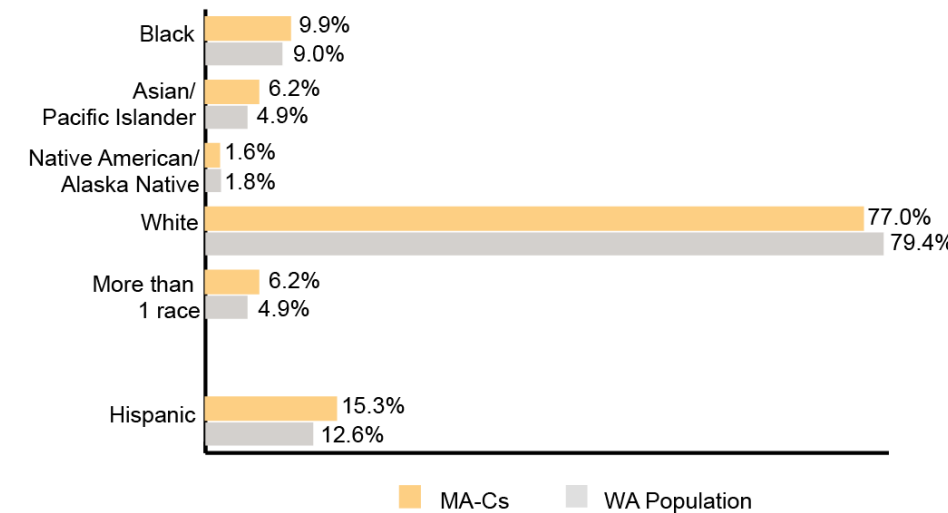
## FINDINGS: MA-Cs IN WASHINGTON

### Characteristics

#### Work Status



### Race and Ethnicity, Compared with State Population



### Education and Practice

Highest Education (any field)	MA Education	MA Education	
High school diploma or equivalent	4.2%	Public community college or technical school	54.6%
Certificate	52.9%	Private/for-profit college or technical school	41.6%
Associate degree	33.4%	Other college program (e.g., nursing school)	2.0%
Bachelor's degree	8.6%	Apprenticeship	2.0%
Post-baccalaureate/graduate (Master's or Doctorate degree)	0.9%	Military training/experience	2.6%
		Other	2.2%

Practice History	
Years practicing as an MA (mean)	9.0
Years practicing as an MA in WA State (mean)	8.2

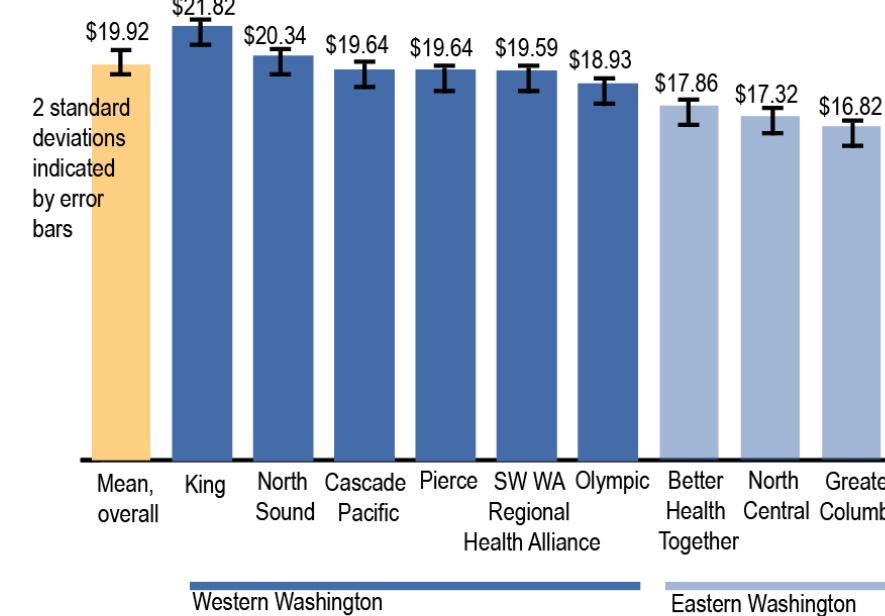
Primary Work Location	
Office associated with a hospital or health system	53.0%
Private office/clinic (solo provider/practice)	25.3%
Community health center (i.e., FQHC, free/sliding scale care)	15.3%
Urgent care center	4.7%
Other	6.7%

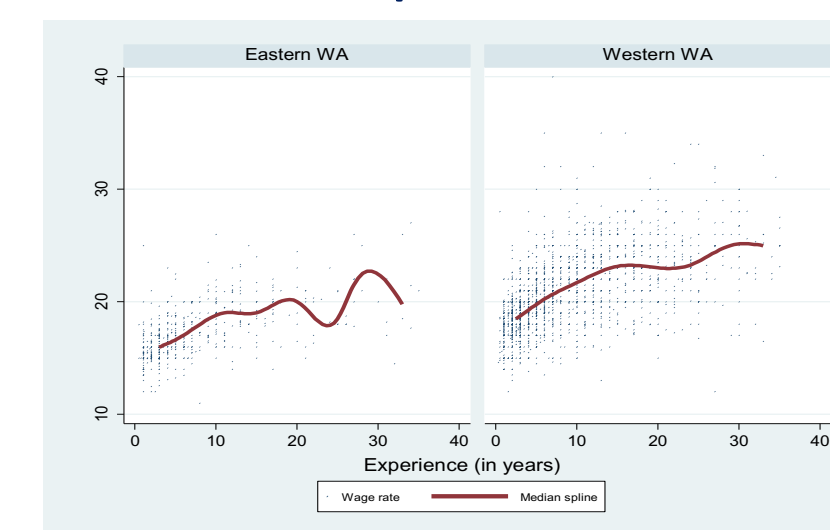
Main Medical Focus of Primary Work Location	
Primary care/Family medicine	34.6%
Pediatrics, urgent care/acute care, internal medicine, OB/Gyn, orthopedics, cardiology	Between 3-6% each
Other (including multi-specialty)	34.3%

### Wages

#### Mean hourly wage of MA-Cs in Washington, overall and by health planning region



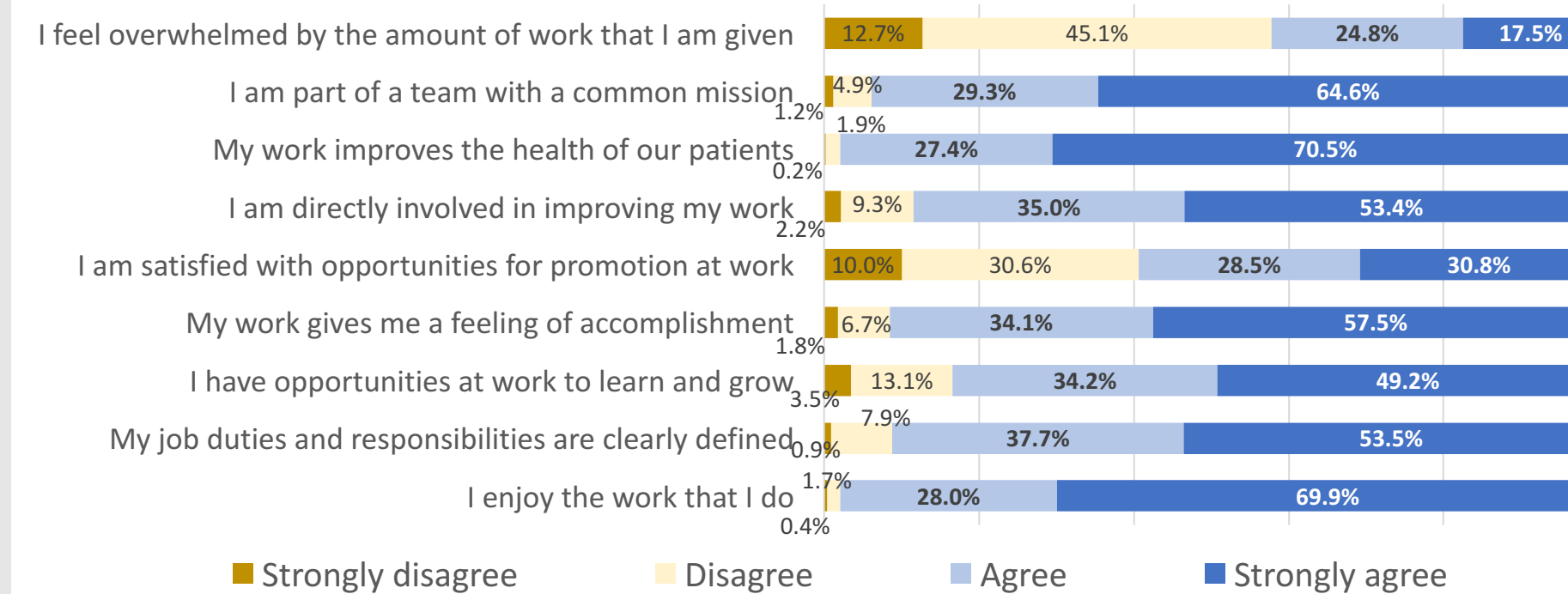
#### Wages of MAs higher in W. WA than E. WA, regardless of years of experience



Comments indicate dissatisfaction with wages (43% of open ended comments (182/423) were about low wages)

- "Medical assistants do not make enough money, I am forced to work 2 jobs and still can't afford to pay my student loans"
- "An average MA-C in Washington could not live independently let alone support a family on an MA-C salary"
- "I do not plan on continuing to work as a Medical Assistant for much longer. I feel that the amount of duties and responsibilities I perform on a daily basis is not reflected in my pay."

### Job and Career Satisfaction



### Interest in seeking training or employment in another occupation within 5 years

I plan to seek training and/or employment in another healthcare occupation in the next 5 years	56% (31% strongly agree, 25% agree)
I plan to seek employment in an occupation other than in healthcare in the next 5 years	21% (10% strongly agree, 11% agree)

#### MA-Cs more likely to seek other jobs:

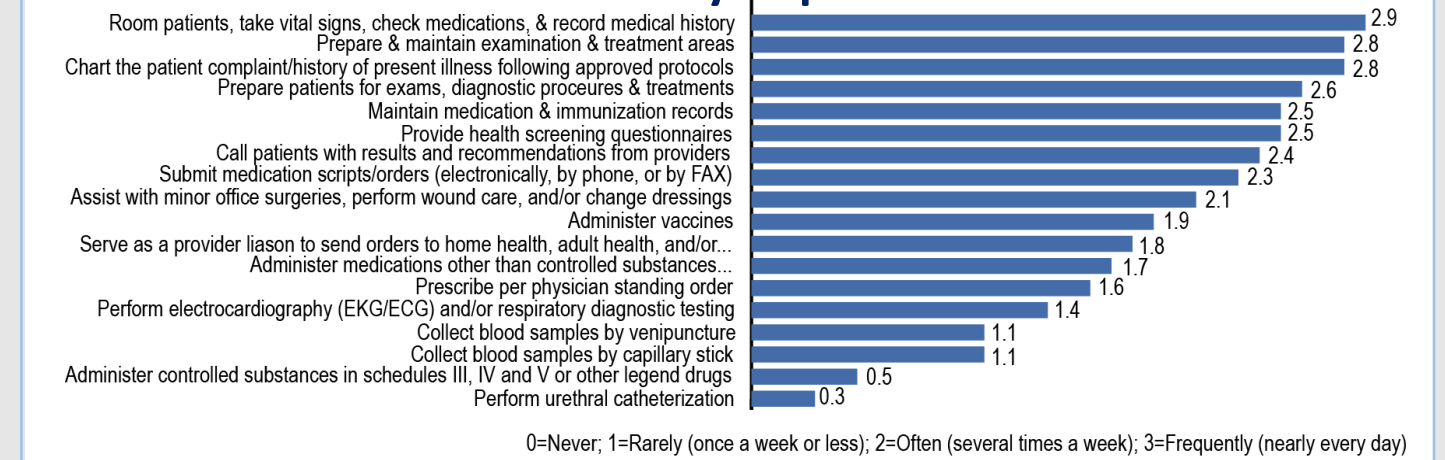
- Hispanic (p<.05), Black (p<.001), or Asian (p<.05) (compared with White)
- MA-Cs who "...feel overwhelmed by the amount of work that I am given" (p<.001)

#### MA-Cs less likely to seek other jobs:

- Those agreeing with "I am satisfied with opportunities for promotion at work" (p<.001)
- Older MA-Cs and those with more years of MA work experience (both p<.001)

### Duties and Roles

#### Patient care and clinical procedures/tasks: How often do you perform?



#### Skills and Roles

Does your job include responsibilities for any of the following roles/duties/functions? (select all that apply)	(%s will exceed more than 100%)
Case manager (e.g., diabetes, cancer)	6.0%
Cross-trained float	36.7%
Dual role translator	5.5%
Flow manager	9.9%
Medical scribe	8.8%
Patient panel manager	3.2%
Patient navigator	11.6%
Prevention counseling	7.5%
Supervisor	10.3%
Working in an integrated team care model...	22.0%

## CONCLUSIONS

- MAs in Washington are generally quite satisfied with their work, except a sizable portion dissatisfied with:
  - opportunities for professional growth,
  - workload, and
  - low pay
- With >50% indicating interest in pursuing other careers (in and outside of healthcare):
  - High MA turnover is likely unless opportunities for career advancement, workload management and salary progression are addressed by employers
- Strengthening MA career pathways to retain qualified workers may improve the stability and diversity of the workforce

### For more information

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