Continued Collaboration between the AAMA & CASAT through 2026

Since 2014, the American Association of Medical Assistants (AAMA) has worked collaboratively with the Center for the Application of Substance Abuse Technologies (CASAT) located in the School of Public Health at the University of Nevada, Reno (UNR) as part of coordinated national efforts to promote healthy pregnancy and prevent fetal alcohol spectrum disorders (FASDs). This work has been implemented through the Medical Assistant Practice Improvement Collaborative (MA-PIC) and Mountain Plains FASD Practice and Implementation Center (Mountain Plains PIC). The MA-PIC and Mountain Plains PIC have worked with the AAMA to prepare medical assistants to reduce alcohol-exposed pregnancies (AEPs) and intervene with patients who engage in excessive alcohol use. AAMA/MA-PIC and AAMA/Mountain Plains PIC partnerships were supported by cooperative agreement funding from the Centers for Disease Control and Prevention (CDC).

CDC recently awarded new funding that will allow for the continued collaboration between the AAMA and UNR through 2026. This new collaboration, known as the Medical Assistant Partnerships for Healthy Pregnancies and Families (MAP) will build on the work started by the MA-PIC and Mountain Plains PIC by developing, delivering, disseminating, and evaluating trainings and materials for medical assisting pre-service students and practitioners on how to promote alcohol- and illicit substance-free pregnancies, prevent FASDs, and support families living with FASDs. These activities will teach medical assistants to identify patients’ excessive drinking and/or substance misuse behaviors and provide health education to change those behaviors, especially among women of childbearing age to prevent AEPs and FASDs. These activities will be important to promoting primary prevention and sustained practice change by medical assistants working in a variety of care settings.

Prenatal alcohol exposure is a leading preventable cause of birth defects and developmental disabili- ties. FASDs have lifelong effects, including problems with behavior and learning as well as less frequently, physical problems. FASDs are preventable if a developing fetus is not exposed to alcohol before birth. The MAP is expanding to polysubstance use including cannabis, opioids, and stimulants, which are all associated with poor neonatal, perinatal, and maternal outcomes.
When asked about the decision to partner with the AAMA, MA-PIC Project Director, Nancy A. Roget, MS, MFT, LADC, said, “As the leading certifying and professional continuing education body for medical assistants in the United States, the AAMA has been a tremendous national collaborating partner in preparing and enhancing the role of medical assistants to routinely screen for and intervene with all patients who engage in excessive alcohol use, especially any alcohol use among people who are pregnant.”

Screening and brief intervention for patients drinking alcohol at excessive levels and/or misusing other substances is more effective when medical assistants are utilized as part of the healthcare team, especially with the skills and knowledge medical assistants have in providing patient education and prevention interventions. 1-7 As active members of the healthcare team, medical assistants can play a key role in screening for excessive alcohol use because of their:

- Frequent interaction with patients;
- Role as liaison between patient and provider;
- Familiarity with electronic medical records/patient health history;
- Ability to connect with patients culturally and linguistically;
- Scope of practice that allows them to be trained as health coaches, provide counseling and education to reinforce physician advice, and follow-up with the patient.

Research has shown that using medical assistants to screen for excessive alcohol use is more effective than provider-only care models, especially in areas where physician and other clinician shortages exist. Since physicians often lack time for alcohol screening and brief intervention, redistributing these tasks to medical assistants saves providers’ time, which in turn is beneficial to patients. 1-3, 10, 12-14 To maximize efficiency, medical assistants can conduct screening as part of the routine patient intake, thereby increasing the chance of identifying excessive drinking in patient populations. 15-17 Making the provider aware of a patient’s positive screening results facilitates follow-up and can improve integrated preventive care in healthcare teams.

AAMA Chief Executive Officer and Legal Counsel, Donald A. Balasa, JD, MBA, says the partnership demonstrates the important role medical assistants play in advancing the goals of this national health initiative. “Certified medical assistants (CMAs (AAMA)) are the key communication links between patients and providers, and are uniquely positioned to motivate patients to avoid or stop dangerous alcohol consumption. The AAMA is fully committed to this initiative, and is honored to again partner with UNR/CASAT and CDC to prevent AEPs and FASDs,” said Balasa.
About the Medical Assistant Partnership for Healthy Pregnancies and Families

MAP is based at the University of Nevada, Reno’s (UNR) Center for the Application of Substance Abuse Technologies (CASAT), which is part of the University’s School of Public Health. CASAT is a grant-funded center that develops and implements training and technical assistance products for individuals providing substance use disorder prevention, treatment, and recovery support services. UNR/CASAT was funded by CDC initially as an FASD Training Center since 2008 to impact individual- and systems-level health care practice by providing trainings for medical and allied health care professionals.

About the AAMA

The mission of the American Association of Medical Assistants (AAMA) is to provide the medical assistant professional with education, certification, credential acknowledgment, networking opportunities, scope-of-practice protection, and advocacy for quality patient-centered health care. Medical assistants are multiskilled members of the health care team who perform administrative and clinical procedures under the supervision of licensed health care providers. The CMA (AAMA) is awarded to candidates who pass the CMA (AAMA) Certification or Recertification Examination. The National Board of Medical Examiners serves as test consultant for the exam. The CMA (AAMA) credential must be recertified every 60 months by the continuing education or re-examination method in order to use the credential.

For more information about AAMA:
Visit www.aama-ntl.org

For more information about CASAT:
Visit www.casat.org

For more information about MAP:
Visit www.fasdmap.org

For more information on CDC’s FASD-related work: Visit www.cdc.gov/fasd
References


