
How Medical Assistants Can Meet the CMS Meaningful Use Requirement

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Who can enter orders into the EHR for meeting the Stages 1 and 2 meaningful use Core Objectives?



- Previous rule

- Only “licensed health care professionals” allowed to enter orders

- August 23, 2012 final rule

- “Credentialed medical assistants” also allowed to enter medication, laboratory, and radiology orders for meaningful use calculation purposes



CMS Order Entry Rule

- According to CMS rule, only “credentialed medical assistants” (as well as licensed health care professionals) are permitted to enter medication, laboratory, and radiology orders into the EHR and have such entry count toward meeting the meaningful use requirements of the Medicare and Medicaid EHR Incentive Programs.
- This CMS rule became effective January 1, 2013.
- The rule applies to all stages of the Incentive Programs.

Who are “credentialed medical assistants”?

- “Credentialing for a medical assistant must come from an organization other than the organization employing the medical assistant.”
- No “in-house” credentials

Is someone with a non-current CMA (AAMA) a “credentialed medical assistant”?

- **NO!** According to policy of the Certifying Board of the AAMA, an individual whose CMA (AAMA) is not current cannot use the credential for any purpose.
- Therefore, an individual whose CMA (AAMA) is not current is not a “credentialed medical assistant” under the CMS rule.

What about someone whose title is not “medical assistant”?

- “Must be appropriately credentialed and perform similar assistive services as a medical assistant.”
- “Must be credentialed to perform the medical assistant services by an organization other than the employing organization.”
- “Each provider must evaluate his or her own ordering workflow, including the use of CPOE, to ensure compliance with all applicable federal, state, and local law and professional guidelines.”
- For example, certified ophthalmic assistants (COAs), certified dental assistants (CDAs)



What Core Objectives must be met?

- Stage 1 Core Objective—“More than 30 percent of all unique patients with at least one medication in their medication list seen by the eligible professional (EP) have at least one medication order entered using CPOE.”
- Stage 2 Core Objective—“More than 60 percent of medication, 30 percent of laboratory, and 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using CPOE.”



Will the CMS enforce the “credentialed medical assistant” requirement?

- CMS auditors have the authority to determine whether entry of medication, laboratory, and radiology orders has been made by licensed health care professionals or credentialed medical assistants. If it is discovered that order entry was done by individuals other than licensed professionals or credentialed medical assistants, the auditors could cite this violation, and it is possible that the order entry by these individuals would not be counted toward meeting the meaningful use thresholds.



What if CMS discovers that the “credentialed medical assistant” rule has not been followed?

- All Core Objectives of the Medicare and Medicaid EHR Incentive Programs must be met in order for an eligible professional to receive the incentive payments.
- Failure to meet even one Core Objective would result in non-receipt (or forfeiture) of the entire incentive payment.
- Therefore, order entry by someone other than a credentialed medical assistant or a licensed health care professional could result in the loss of 100% of the incentive payment.



Are the Incentive Programs mandatory?

- The Incentive Programs are not mandatory. However, note the following from a CMS publication:

Medicare eligible professionals who do not meet the requirements for meaningful use by 2015 and in each subsequent year are subject to payment adjustments to their Medicare reimbursements that start at 1 percent per year, up to a maximum 5 percent annual adjustment.

Key point

- A current CMA (AAMA) meets the CMS definition of “credentialed medical assistant” and does not need anything else to be able to enter orders into the EHR and have such entry count toward meaningful use.

Thank you!

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