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# How medical assistants can meet the CMS meaningful use requirements

*This article has been adapted from Executive Director Balasa's presentation at the 26<sup>th</sup> Annual PAHCOM Conference in October.*

The Centers for Medicare and Medicaid Services (CMS) had decided that only “licensed health care professionals” would be allowed to enter orders under the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs for meaningful use calculation purposes.

However, on Aug. 13, 2012, CMS issued a final rule for the Incentive Programs stating that “credentialed medical assistants” (as well as licensed health care professionals) would be permitted—as specifically directed by the overseeing health care provider—to enter medication, radiology, and laboratory orders into the Computerized Provider Order Entry (CPOE) system and have such entry count toward meeting the meaningful use thresholds under the Incentive Programs.

Non-credentialed medical assistants are not permitted to enter orders for meaningful use calculation purposes. Only credentialed medical assistants and

licensed health care professionals are permitted to do so.

This requirement went into effect Jan. 1, 2013. It applies to entry of orders under Stage 1 as well as Stage 2 (and, eventually, Stage 3) of the Incentive Programs.

## Which medical assistants does CMS consider as meeting its “credentialed medical assistant” definition?

“Credentialing for a medical assistant must come from an organization other than the organization employing the medical assistant,” dictates CMS. In other words, “in-house” medical assisting credentials are not acceptable. The credential must be awarded by a third party.

A medical assisting credential based solely on recommendations from an employer and experience as a medical assistant does not meet the CMS requirement. A credential acceptable to CMS must require the passing of a test.

A medical assistant whose CMA (AAMA) credential is not current does not

meet the CMS requirement of a “credentialed medical assistant.”

However, not all third-party medical assisting credentials meet the CMS definition. A third-party medical assisting credential based solely on work experience, or solely on a statement by an employer or supervisor that the medical assistant is knowledgeable in electronic order entry, does not meet the CMS definition of “credentialed medical assistant.”

## What about employees with more specific titles than “medical assistant”?

CMS FAQ 9058, Aug. 20, 2013<sup>1</sup>:

If a staff member of the eligible provider is appropriately credentialed and performs similar assistive services as a medical assistant but carries a more specific title due to either specialization of their duties or to the specialty of the medical professional they assist, he or she can use the CPOE function ... and have it count towards the measure ...

Whether a staff member carries the title of medical assistant or another job title, he or she must be credentialed to perform the medical assistant services by an organization other than the employing organization.

### What Core Objectives must be met?

The Stage 1 Core Objective is as follows<sup>2</sup>:

“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.”

The Stage 2 Core Objective is as follows<sup>3</sup>:

“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.”

### Do CMS auditors have the authority to review who is entering orders into the CPOE system?

Audits of eligible professionals (EPs) by CMS have begun in limited parts of the United States. Auditors have the authority to determine whether credentialed medical assistants or licensed health care professionals are entering orders that are being counted toward meeting the above Core Objective requirements.

### What are the potential consequences for eligible professionals who do not meet this CPOE Core Objective?

Too many entries by noncredentialed medical assistants could cause the EP to not meet a Core Objective. Failure to meet any one Core Objective would result in the entire incentive payment being withheld, or being recouped.

### Are the Medicare and Medicaid Incentive Programs mandatory?

The Incentive Programs are not mandatory. However, note the following from a CMS publication<sup>4</sup>:

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.

### Do current CMAs (AAMA) meet the CMS requirement?

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. ♦

#### References

1. Frequently asked questions. Centers for Medicare and Medicaid Services. <https://questions.cms.gov/faq.php?faqId=9058>. Published August 20, 2013. Accessed September 18, 2014.
2. Centers for Medicare and Medicaid Services. Eligible professional meaningful use core measures measure 1 of 13. [http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/1\\_CPOE\\_for\\_Medication\\_Orders.pdf](http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/1_CPOE_for_Medication_Orders.pdf). Updated May 2014. Accessed September 18, 2014.
3. Centers for Medicare and Medicaid Services. Stage 2 eligible professional meaningful use core measures measure 1 of 17. [http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/Stage2\\_EPCore\\_1\\_CPOE\\_MedicationOrders.pdf](http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/Stage2_EPCore_1_CPOE_MedicationOrders.pdf). Issued October 2012. Accessed September 18, 2014.
4. Centers for Medicare and Medicaid Services. An introduction to the Medicare EHR Incentive Program for eligible professionals. EHR Incentive Program. [http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/Beginners\\_Guide.pdf](http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/Beginners_Guide.pdf). Accessed September 18, 2014.

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