Medical Assistant Credentialing Requirements for Your Client Practices

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Medical Assistant Credentialing Requirements for Your Client Practices

As of January 2013, under CMS guidelines, only credentialed medical assistants are allowed to assist in the clinical decision process and permitted to enter laboratory, medication, and radiology orders into the EHR. To meet meaningful use requirements, under the Medicare and Medicaid EHR incentive programs, medical assistants are required to be credentialed.

• Learn the Medical Assistant Credentialing requirements and how they apply to your client practices.
• Tools and solutions will be shared with participants on how to meet the CMS mandates.
• Ask questions and be better prepared to meet your client’s needs.

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Meaningful Use

The initial plan for the adoption of electronic health records through meaningful use was outlined in the HITECH Act.

The CMS Medicare and Medicaid EHR incentive programs have evolved into three stages of meaningful use with their own goals, priorities, and their own final rules.

Meaningful use means that “providers need to show they’re using certified EHR technology in ways that can be measured significantly in quality and quantity.”
Meaningful Use

Stage 1 of the CMS EHR Incentive Program

• Began in 2011
• Sets forth the basic functionalities of EHRs
• Requirements are focused on providers capturing patient data and sharing that data either with the patient or other healthcare professionals.
• Stage 1 requires the Use computerized provider order entry (CPOE) for medication orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines. There is exclusion: any EP who writes fewer than 100 prescriptions during the EHR reporting period.
• Eligible professionals, eligible hospitals, and critical access hospitals must successfully attest to two stage 1 reporting periods before moving to stage 2.
Meaningful Use

Stage 2 of the CMS EHR Incentive Program

• The earliest providers could demonstrate Stage 2 of meaningful use was in 2014.
• Eligible hospitals and critical access hospitals participate on the fiscal year and eligible professionals participate on the calendar year.
• The requirements are focused on health information exchange between providers and promote patient engagement by giving patients secure online access to their health information.
• Stage 2 requires the use of computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.

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Meaningful Use

Stage 3 of the CMS EHR Incentive Program

- Delayed until 2017 and still largely a mystery, the majority of Stage 3 measure recommendations will be updates to objectives included in stage 2 meaningful use.

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Meaningful Use
Medical Assistant Credentialing

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Meaningful Use
Medical Assistant Credentialing

• Since January 1, 2013, the “concept” of a credentialed medical assistant has been a requirement of anyone participating in the incentive program. This means that since January 1, 2013, regardless of what stage of meaningful use the provider is attesting to, medical assistants are required to be credentialed.
Meaningful Use
Medical Assistant Credentialing

- Most of us understand that medical assistants should be credentialed as part of Stage 2 Meaningful Use requirements. While this is true, did you know that the concept of a "credentialed medical assistant" is really not just a Stage 2 requirement but also a Stage 1 requirement?
Meaningful Use
Medical Assistant Credentialing

The Centers for Medicare & Medicaid Services (CMS) FAQ 7693 addresses this requirement best:

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Meaningful Use

Medical Assistant Credentialing

The Centers for Medicare & Medicaid Services (CMS) FAQ 7693 addresses this requirement best:

• "We have revised the description of who can enter orders into the EHR and have it count as CPOE and have it count for purposes of the CPOE measure. This revision is available for EHR reporting periods in 2013 and beyond regardless of what stage of meaningful use the provider is attesting to."
Meaningful Use

Medical Assistant Credentialing

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Meaningful Use
Medical Assistant Credentialing

• Credentialing for a medical assistant must come from an organization other than the organization employing the medical assistant."

• This means, any medical assistant who is not currently credentialed as a Certified Medical Assistant (CMA) or a Registered Medical Assistant (RMA) should complete the Medical Assistant Credentialing module.
Meaningful Use
Medical Assistant Credentialing

According to CMS FAQ 9058:

• "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 of CEHRT and have it count towards the measure."
Meaningful Use
Medical Assistant Credentialing

According to CMS FAQ 9058:

Healthcare professionals such as:

• Radiology Technician
• Licensed Practical Nurse (LPN) / Licensed Vocational Nurse (LVN)
• Pharmacy Technician
• Laboratory Technician
• Registered Nurse

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Meaningful Use
Medical Assistant Credentialing

• Currently 14 states either have medical assistant credentialing requirements in place, or are considering requiring medical assistants to be credentialed. This may explain why there is a great deal of focus being spend on a national standard for credentialing of medical assistants.
Meaningful Use
Medical Assistant Credentialing

Credentialed medical assistants benefit your organization by:

• Providing a reliable assurance mechanism
• More efficient use of resources
• More entries counted towards the CMS EHR incentive program
• Ensures you are meeting the national standard for credentialing of medical assistants

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Meaningful Use
Medical Assistant Credentialing

• What about the Medical Assistants without a credential – but with years of experience and recommendations? Does that meet the CMS requirements?
Meaningful Use
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• Does an associate degree, certificate, or diploma from an academic medical assisting program fall within the CMS definition of a medical assisting credential?
Meaningful Use
Medical Assistant Credentialing

• What about the Medical Assistants without a credential – but with years of experience and recommendations? Does that meet the CMS requirements?

• Does an associate degree, certificate, or diploma from an academic medical assisting program fall within the CMS definition of a medical assisting credential?

The answer to both of these questions is no.
Meaningful Use

Medical Assistant Credentialing

• CMS requires credentialing to come from an organization other than the organization employing the medical assistant. In addition, CMS requires a medical assistant to pass some sort of an examination in order to be considered a “credentialed medical assistant.” While an associate degree, certificate, or diploma demonstrates they have received some education; it doesn’t demonstrate medical assistants have completed an examination for CPOE purposes.
Medical Assistant Credentialing

Summary:

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Medical Assistant Credentialing

Summary:

• Medical Assistant Credentialing is a CMS requirement under the Meaningful Use incentive program.

• Since January 2013 has been a requirement regardless of the stage of Meaningful Use attestation.

• Required even if they have graduated from a Medical Assistant program, if credentialing was not included in the certificate.

• Credentialing must come from an organization other than the employer.
Medical Assistant Credentialing

How can Healthcare Compliance Pros (HCP) help you and your client practices achieve the CMS requirements?

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Medical Assistant Credentialing

How can Healthcare Compliance Pros (HCP) help you and your client practices achieve the CMS requirements?

• Scalable compliance programs from HCP can contain the necessary components to meet the CMS standard for MA Credentialing.
• HCP stand-alone credentialing product for practices that do not need complete compliance program.
• Resources to identify credentialing requirements for client practices.

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Information and Materials –

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