



Assessment-Based Recognition in Order Entry

CMA (AAMA) do not need the ABR-OE. The CMA (AAMA) credential meets the CMS “credentialed medical assistant” requirement because CMA (AAMA) education, training, and testing include electronic order entry. Therefore, the ABR-OE is not granted to CMAs (AAMA).

The Assessment-Based Recognition in Order Entry (ABR-OE) indicates that the holder meets the requirements of the definition of “credentialed medical assistants” under the September 5, 2012, rule of the Centers for Medicare and Medicaid Services (CMS) for the Medicare and Medicaid Electronic Health Records (EHRs) Incentive Programs (Incentive Programs).

Eligibility and application policies

Students or graduates of medical assisting programs accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) or the Accrediting Bureau of Health Education Schools (ABHES) are not eligible for the ABR-OE. Also, those who at any point in time have held the CMA (AAMA) credential (or its predecessor credential, CMA) are not eligible for the ABR-OE.

The ABR-OE is granted by the Continuing Education Board of the American Association of Medical Assistants (AAMA) to applicants who meet the following eligibility criteria and submit the required documentation accompanied with the completed application:

□ Letter of documentation

The following documentation must be attested to on corporate letterhead and signed by the applicant’s current supervising licensed health care provider:

Knowledge areas. Provide a statement of verification of the applicant’s knowledge in the following areas:

I hereby attest to the applicant’s proficiency in EHR order entry as demonstrated by the applicant’s knowledge in the following areas:

- Anatomy and physiology
- Basic laboratory values
- Critical thinking
- Electronic health records
- Health Information Portability and Accountability Act (HIPAA)
- Medical terminology
- Pharmacology

Employment experience. Provide a statement of verification that the applicant has been employed for a minimum of 24 months during the last 36 months in a health care facility under the supervision of a licensed health care provider.

□ Provider credentials

Provide a photocopy of the license of the attesting health care provider.

□ Continuing education

Provide a transcript of AAMA continuing education units (CEUs). The applicant must have successfully completed (including receiving a passing score on the post-tests) the following five, one-hour, online AAMA CEU courses:

1. Clinical Laboratory Testing
2. Disease Screening
3. Legal Aspects of Patient Care Documentation
4. Lost in Translation: Eliminate Medical Errors
5. Medical Records: A Vital Wave

Go to the AAMA Electronic Learning Center (e-LC) at <https://learning.aama-ntl.org/> to register for the courses.

□ Application and fee

The applicant must include the completed application and payment.

Expiration policy

A letter indicating that an applicant has been granted the ABR-OE will be issued to the successful applicant and will expire 24 months from the date awarded by the AAMA. (*The requirements for obtaining a new letter after expiration of the original ABR-OE will be established by July 1, 2014.*)

Usage policy

The ABR-OE is an official recognition of the holder’s qualifications to enter medication, laboratory, and radiology orders into the EHR under the CMS rule and is based on an assessment of the holder’s knowledge and experience. Holders of this ABR-OE can refer to themselves as having an assessment-based recognition in order entry that meets the CMS definition of “credentialed medical assistant,” but are not permitted to use any suffixes or initials after their names in reference to this recognition program.

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APPLICATION

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Instructions

1. Neatly print the information (in black or blue ink).
2. Include payment. The nonrefundable application fee is \$25. Applications without payment will be returned.
3. Include supporting documentation. Applications without complete documentation will be returned.
4. Keep a copy of all materials for your records.

Applicant Agreement

By virtue of submitting this application for the Assessment-Based Recognition in order entry, I verify the following:

I have read and understood the requirements and policies regarding the submission of this application, including fee and refund policy. I also agree that if any part of this application be fraudulent or materially false, it will result in forfeiture of all fees and/or rights obtained as a result of this application. Information on this form may be used for statistical, research, and member recruitment purposes; access thereto will be under the direction of the AAMA Continuing Education Board.

- I am not a student or graduate of a CAAHEP or ABHES medical assisting program. (CAAHEP/ABHES students and graduates are not eligible for the ABR-OE.)
- I have successfully completed the five required e-LC courses.

Members—AAMA ID number: _____

Nonmembers—Last four digits of SSN: _____

Last name: _____

First name: _____

Middle name/initial: _____

Address line 1: _____

Address line 2: _____

City: _____

State: _____

ZIP code + 4: _____ - _____

Home phone: (_____) _____ - _____

Cell phone: (_____) _____ - _____

Work phone: (_____) _____ - _____ Ext.: _____

E-mail: _____

Previous last name (if applicable): _____

Payment

Enclosed is my \$25 application fee (check payment method):

Money order #: _____

Cashier's/certified check #: _____

Make payable to the AAMA.

Do not send personal checks. Applications that do not include proper payment may be returned. A \$25 administrative fee will be assessed for returned checks, chargebacks, or declined charge payments.

The application fee is nonrefundable and nontransferable.



Submission requirements

The following items must be enclosed:

- Completed application
- Letter of documentation
 - Knowledge areas
 - Work experience
- Photocopy of providers license
- Transcript of continuing education units
- Application fee

Mail supporting documentation, completed application, and payment to:

**AAMA Continuing Education Dept.
Attention: ABR-OE
20 N. Wacker Dr., Ste. 1575
Chicago, IL 60606**

E-mail: ContinuingEducation@aama-ntl.org

Phone: 800/228-2262, ext. 774

Website: <http://www.aama-ntl.org>

Allow 60 days for the application to be reviewed and processed.



**AMERICAN ASSOCIATION
OF MEDICAL ASSISTANTS**