



The American College of Medical Scribe Specialists, a 501(c)(6) Non-Profit Governance Organization, is the nation's certification body complying with personnel certification for minimum requirements through Certified Electronic Health Records Technology with CMS, regulated through Centers for Medicare & Medicaid Services, MACRA, CEHRT personnel requirements, to advance healthcare in real time at the point of care through Certified Medical Scribe Specialists. Certified Medical Scribe Specialists work under the jurisdiction of the licensed physician's, or mid-level providers license. All clinicians (i.e., MD/DO, CRNP/PA-C) utilizing medical scribes must certify staff.

ACMSS builds America's robust patient-centered care models. The CMSS credential houses all clinical, non-clinical, advanced clinical documentation skill sets, including Computerized Provider Order Entry (CPOE) and Clinical Decision Support (CDS) clinicians need, or will need, through minimally attested and federally compliant personnel. The CMSS personnel assist with real-time clinical documentation and skill sets in ongoing transformation found through MACRA.

CMS recognizes CMSS personnel for Meaningful Use CEHRT attestations, measure development and measure compliance entry, found through Certified Medical Scribe Specialists (CMSS), in addition to assisting clinicians in meeting both short- and long-term clinical care goals, objectives, patient centricity and patient safety found through CEHRT and MACRA compliance objectives.

ACMSS advocates on behalf of the nation, clinicians, CMSS/CMSA certified personnel, education standards, and the entire medical scribe industry to create America's robust, patient safe, patient-centric healthcare system.

#### **What are the categories related to Medical Scribes?**

- Based upon experience and completion of Medical Scribe Certification and Aptitude Test (MSCAT) Assessments, there are 4 categories related to Medical Scribes:
  - Certified Medical Scribe Specialist (CMSS)
  - Certified Medical Scribe Apprentice (CMSA)
  - Medical Scribe (MS)
  - Virtual Scribe (VS)

#### **What is a Certified Medical Scribe Specialist (CMSS)?**

- A Certified Medical Scribe Specialist (CMSS) is a credential issued by the The American College of Medical Scribe Specialists (ACMSS). A CMSS serves as a clinical assistant to the

licensed physician or mid-level provider ( i.e., Physician Assistant, PA-C; Nurse Practitioner; CRNP)

- Certified Medical Scribe Specialists are trained and continuously assessed. A person holding the CMSS credential has met 200 hours of unassisted clinical workload documentation or has completed a 50-hour clinical training program.
- A CMSS is responsible for real-time transcribing of physician notes, organization of objective health care data, enhancement of the electronic health record, and point-of-service collections and patient tracking.
- A CMSS meets both pre-clinical and clinical training requirements, has mastered MSCAT certification, and maintains certification with 3 hours of continuing education annually and payment of the annual certification renewal fee.
- The minimum requirements for a CMSS includes a high school diploma (or GED) plus 200 hours of clinical experience.
- If you have less than 200 hours of clinical employment experience, you will be recognized as a Certified Medical Scribe Apprentice (CMSA). When 200 hours are fulfilled, full award of the CMSS credential will be provided.
- If you possess certification or licensure status as a Licensed Practical Nurse, Registered Nurse, Paramedic, Certified Medical Assistant, Registered Medical Assistant or graduate from a clinical training, you will only need to successfully complete 50 hours of clinical experience and will have full recognition of CMSS.
- The CMSS credential is focused on nurses, pre-med students, and other aspiring allied healthcare personnel who aspire to medical careers requiring higher education. Medical workers, or students who do not aspire to positions requiring higher education, do not reflect the same caliber, depth, and professional trajectory of healthcare.
- Note: for applicants with no knowledge or experience related to healthcare, additional training programs are available at an additional cost.

**What is Certified Medical Scribe *Apprentice* (CMSA)?**

- A Certified Medical Scribe Apprentice (CMSA) is an ancillary staff member that is an assistant to the licensed physician or mid-level provider.
- A CMSA is an individual that has successfully passed MSCAT certification, and either lacks the 200 hours of clinical experience or has not graduated from a medical scribe program with the 50-hour clinical training built in.

- When the minimum hours of experience have been achieved and the CMSA submits the required hours of attestation, he or she is then credentialed as a Certified Medical Scribe Specialist (CMSS).
- A CMSA meets pre-clinical training requirements, has successfully passed MSCAT certification, and maintains recertification with 3 hours of continuing education annually.

### **What is a Medical Scribe?**

- A Medical Scribe, different than those of Certified Medical Scribe Specialist practitioner designations, are a non-clinical ancillary staff personnel who functions in a role like that of a Certified Medical Scribe Apprentice (CMSA). The central difference is that a scribe lacks the standardized training, certification, and continual education afforded to a Certified Medical Scribe Specialist (CMSS).
- Scribes are regulated by the Centers for Medicare & Medicaid Services, recognized for Meaningful Use by Physicians or mid-level providers using Certified Medical Scribe Specialists. Accordingly, the function, skill level, and experience varies greatly between hospitals and scribe programs.
- The American College of Medical Scribe Specialists sets minimal performance standards in collaboration with the Centers for Medicare & Medicaid Services and Meaningful Use (MU) criteria.

### **What is a Virtual Medical Scribe?**

- A Virtual Medical Scribe is a non-clinical off-site assistant who documents remotely with the use of visual and audio technology. Given the remote access, a VMS may work from any location worldwide

### **What credential does ACMSS offer?**

- ACMSS offers the “Certified Medical Scribe Specialist” (CMSS) credential. A person holding the CMSS credential is certified to have the required education and training required by the Centers for Medicare & Medicaid Services to serve as a “credentialed medical assistant” to meet requirements for electronic health record incentive payments under federal law.

### **How are persons holding the CMSS credential more valuable than assistants or scribes who lack the credential?**

- A medical provider who uses non-credentialed medical assistants or scribes will be unable to use those personnel in attesting compliance with the Medicare and Medicaid EHR (Electronic Health Records) Incentive Programs. CMSS credential holders are qualified to perform the whole breadth and depth of all medical and EHR-related workflows.

### **About Certified Medical Scribe Specialist Training, Assessment, Certification and Renewals**

The *Medical Scribe Certification & Aptitude Test* (MSCAT) certifies the medical scribes breadth of knowledge required by Centers for Medicare & Medicaid for advancing the knowledge, scope and roles needed for physicians' duties and responsibilities of clinical personnel, in accordance with advancing MACRA and stated objectives. Certified Medical Scribe Specialists assist licensed clinicians at the point of care.

Individuals who successfully pass MSCAT meet core objectives required in meeting CMS MACRA measures, objectives, and requirements. Certified Medical Scribe Specialists earn the 'CMSS' credential, clinically assisting the clinician. Individuals who do not meet the clinical prerequisites are required to sit for the MSCAT, attesting to the Certified Medical Scribe Apprentice 'CMSA' credential.

*NOTE: Those personnel already certified or licensed (RN/LVN/CMA/RMA/EMT-P) may sit directly for the CMSS licensure program with 50 hours of prior clinical experience.*

**MACRA:** Individuals must be certified and credentialed through the *Medical Scribe Certification & Aptitude Test* (MSCAT), thus complying with CMS, as attested through the Certified Medical Scribe Specialist (CMSS) clinical duties and credential. A crosswalk of duties are available to licensed physicians/administrators only, in adherence with CMS compliance requirements and MACRA and measure development. All clinicians need to certify scribe assistive personnel in meeting and advancing requirements, as set forth by MACRA.

The Certification examination contains psychometric clinical workflow scenarios, in addition to standardized medical terminology, HIPAA, medicolegal risk mitigation, visit-level assignments, knowledge of computer skills and function of an electronic health record. All topics are covered in [MSCAT Compliance Training Program](#). Psychometric clinical examination consists of multiple choice, multiple-multiple, true-false, and fill-in questions. Successful candidates must pass with an 80% or greater. Annual re-certification is required through \$85 compliance fee and issuance of a 'live' CMS compliant 12-month certificate/credential award. All certified individuals must maintain 3 hours of Continuing Medical Education (CME), in addition to licensure fee.

#### **What is Included in the Clinical Training Manual?**

- Fundamental Role of Certification Medical Scribe Specialists
- Knowing the Difference Between Medical Transcriptionists and Certified Medical Scribe Specialists
- Medicolegal
  - *HIPAA for Scribes* Clinical Training & Operations
  - Patient Safety Act and Rule
  - Minimum Necessary Requirement Rule
  - The Breach Notification Rule
  - HITECH Act
  - MACRA
- Outcomes Reporting Requirements
  - PQRS: Physician Quality Reporting System

- VBP: Value Based Purchasing
  - HCAHPS: Hospital Consumer Assessment of Healthcare Providers and Systems
- Clinical Documentation and Coding
- Internet Security
- Computerized Provider Order Entry
- Clinical Medical Terminology, Words and Phraseology
  - Abdomen
  - Back
  - Cardiovascular
  - Head, Eyes, Ears, Nose, Throat
  - Kinesiology
  - Neck
  - Neuro
  - Oncology
  - Radiology
  - Respiratory
  - Surgery and Procedures
  - Dermatology
  - Ophthalmology
  - Outpatient Services
  - Urgent Care
  - Other Common Medical Terms
- Medical Decision Making and E/M Coding
  - MDMs Four Levels
  - Documentation Requirements for MDM
- Ambulatory Patient Care Workflow and Office Processes
- Primary Care
  - Hypertension
  - Diabetes
  - Health Maintenance for Adults
  - Cough
  - Rash
  - Sore Throat
  - Geriatric Care
  - Abdominal Pain
  - Urinary Tract Infection
- Outpatient Care
- Healthcare Teams and Communications
- Coding for Evaluation and Management (E&M) in the ED
  - The three key components needed when billing for an Evaluation & Management (E/M) service that was rendered are the history, examination, and medical decision making (MDM). The MDM piece is the final component of an E/M patient visit. It is the E/M component in which licensed physicians, or healthcare providers, discuss the plan of management of the health concerns of a patient.

- Hospitalists and Hospital Care
- Hospitalist E&M Coding
- MSCAT Preparedness
- The American College of Medical Scribe Specialists
- MSCAT Certification: (CMSA), (CMSS)

**What are the Scribe Specialist Credential Issues Regarding Medical Practices and Institutions?**

- ALL personnel entering electronic information must be certified, in line with minimum skills necessary to enter caliber and breadth of CEHRT Federal regulatory compliance and personnel necessary for Meaningful Use and MACRA ongoing initiatives and advancement.
- A medical provider who uses non-credentialed medical assistants or scribes will be unable to use those personnel in attesting compliance with the Medicare & Medicaid EHR Quality Payment Programs.
- For additional information on electronic medical record documentation, please refer to other CMS requirements such as the Medicare physician fee schedule as well as FAQ 19061 (<https://questions.cms.gov/faq.php?id=5005&faqId=19061>).

**May a provider, on their own, issue credentialing for compliance with the Medicare and Medicaid Quality Payment Program?**

- No – Providers cannot internally certify under the law.
- The MACRA final rule issued in October 2015 provides that an assistant may be credentialed to perform the duties of a medical assistant only by a third-party credentialing body.
- The nationally recognized CMSS credential from ACMSS meets that third-party certification requirement.

**May medical providers delegate work in the EHR, including order entry, to a person without the required CMSS credential?**

- No – If the provider wants to receive incentive payments, the provider must attest to compliance with the EHR requirements. The final rule requires that providers seeking to qualify for can delegate entry of EHR only to credentialed persons. Documentation and Personnel Compliance attestations are subject to audit and proof of compliance. Under MIPS, providers are required to fulfill measures under the Advancing Care Information category for a period of 90 days.

**Why should a person holding a CMSS credential be considered more valuable than assistants or scribes who lack the credential?**

- CMSS credential holders are qualified to perform the whole breadth and depth of all medical and EHR-related workflows.

**What CMSS certification records need to be maintained**

- ACMSS provides each licensed physician with secure account management and access to appropriate documentation compliance. CMS has asked Physicians and Practice

Administrators to retain a copy of CMSS Compliance Certificate on file for Attestation, just as they would any other documents in case of compliance audits.

**What does CMS request for EHR audit compliance:**

- A copy of your CMS/MLN certificate, or documentation of the contact hours spent in the training
- CMS Meaningful Use Personnel Audit Compliance Document(s)
- In meeting EHR compliance with CMS, ACMSS will request copies of documents for verification of the CMEs listed on your renewal form.

**May providers delegate work in the EHR, including order entry, to a person without the required CMSS credential?**

- No – If the provider wants to receive incentive payments, the provider must attest to full compliance with the EHR requirements. The final rule regarding the Medicare and Medicaid EHR Payment Program requires that providers seeking to qualify for EHR incentive payments cannot to delegate entry of EHR only to credentialed persons. All personnel must be certified for federal regulatory guidance and requirements.

**May a provider on its own issue credentialing for compliance with the Medicare and Medicaid Payment Program?**

- No – The MACRA final rule issued in October 2015 provides that an assistant is credentialed to perform the duties of a medical assistant by a credentialing body other than the employing provider. Providers cannot internally certify under the law, and the CMSS credential from ACMSS meets that third-party certification requirement.

**CMS Documentation Mandate:**

CMS has asked that each provider or practice retain a copy of the 'CMSS' Specialist crosswalk and certification document in their files, just as they would retain documentation outlining their individual approach and method, as well as staffing protocols for audit purposes.

ACMSS keeps on file for Practices secure crosswalk, available to Physicians and Practice Administrators only.

Accounts must remain in good standing with ACMSS through paid annual re-certification and licensure personnel requirements met, annual recertification renewals, and minimum Continuing Scribe Education, and Continuing Medical Education, keeping issued CMSS credentials and licensure active and valid.

Some of the Clinical and Non-Clinical Tasks covered by the CMSS credential include:

- Edit medical history
- Performing secretarial and administrative clerical tasks
- Prepare, maintain, and research Electronic Medical Records
- Schedule and Receive Patients

- Clinical/administrative duties

Additional expanded approach methods, both Clinical and Non-Clinical crosswalk of duties, are available to Physicians, Practice Administrators, and Corporate Administrators through paid Certification/licensure bundles, and met secure attestations.

**Summary of Certification Requirements:**

- CMS audit compliant documentation required of Physician/Administrators/Individuals
- 12-month issuance of 'live' CMS certification and compliance documentation
- Meaningful Use CEHRT personnel identification for CMSS credential holders
- Industry standardized MSCAT Clinical Training/Resource Manual
- Industry Standardized *HIPAA for Scribes* Clinical Training & Certification/Assessment
- Live ACMSS Webinars
- Continuing Scribe Education (CSE) Units
- Continuing Medical Education (CME) Units
- CMSS internal e-distribution communiques: new and trending across healthcare
- Full scope CMSS crosswalk and credential duties implementation
- Implementation protocols for MACRA law, focused on stage 3 CMS compliance and regulatory criteria
- Physician/CMSS Resource library
- Physician/CMSS Compliance administration

**VOLUME DISCOUNTS/AGREEMENTS:** ACMSS offers volume-discounts across all specialties across healthcare. Contact ACMSS Leadership for volume-purchase review and agreement(s). Agreements are across healthcare/academic institutions. Contact ACMSS Business Development Team for customized review.

**MACRA LAW STANDARDIZED CERTIFICATION PACKAGES:**

- ACMSS is a recognized CMS Stakeholder that provides national accreditation services using criteria established by Centers for Medicare & Medicaid Services (CMS) for MACRA
- The MACRA final rule issued in October 2015 provides that an assistant may be credentialed to perform the duties of a medical assistant only by a third-party credentialing body.

\*Effective January 1, all accounts include:

- 1st-year Certification & Compliance Clinical Training Manual
- MSCAT Clinical Specialty Certification
- Eligibility pathway of credential(s): CMSS/CMSA
- Standardized MSCAT Clinical Training/Resource Manual
- Standardized *HIPAA for Scribes* Clinical Training & Certification/Assessment

*\* REQUIREMENTS: Re-certification and compliance fees are annual and will renew automatically. All individuals will receive a notice of upcoming renewal at which time rec-ertifiers have the option to cancel **prior** to renewal. Upon renewal payment date, all renewals are final for the year. Re-certification and compliance fees are required by Governing*

*Board of ACMSS, in meeting ongoing CMS compliance, regulations, and MACRA law objective requirements.*

*\*Volume re-certification purchases are applied to Individuals through in-account management process, Practice Administrator(s), Corporate Administrators, and/or licensed Physician(s) apply to eligible personnel, meeting CMS requirements.*

### **REQUIRED CERTIFICATION COMPLIANCE, RECERTIFICATION REQUIREMENTS (Year 2+):**

Accounts must maintain ANNUAL Re-certification and 3 hours of Continuing Medical Education in a 1-year period. Re-certification Renewals include a new 'live' 12-month issued CMS Compliance certificate(s), maintaining active and valid CMSS credentials for account verification, and for CMS audit purposes, meeting MACRA law objectives and requirements, as set forth by ACMSS Governing Board.

### **What You Should Know about Pricing:**

- Each MSCAT (including Training, Assessment and Certification) is sold individually for \$285 US.  
The first-year program through ACMSS includes all materials. Subsequent years require recertification compliance, enabled through the \$85/individual professional licensure and certification cost, in addition to completing 3 Continuing Medical Education (CME) hours annually.
- Program includes:
  - Current CMS/HIPAA/HITECH, MACRA Quality Payment Program clinical training
  - MSCAT Assessment (allowing for 3 attempts) and
  - Issuance of CMSS Certification/Credentials for the 1st Year
  - Volume Discount programs are available

### **ACMSS Site and Enterprise License Packages**

Annual Site and Enterprise Licenses include a 12-month government compliance issued CMS Certification & Compliance Program package for up to 100 individuals, registered under 1 educational or corporate user; to be used within one year of purchase.

Cost: \$15,000 for up to 100 individuals.

Additional Site Licenses can be purchased by the same corporate or educational user, to be used in conjunction with initial Site License within the same year.

Cost: \$10,000 for up to 100 additional individuals.

All individuals completing the CMS Certification & Compliance Program will be required to purchase a license renewal and complete 3 hours of CME annually.

Scribe Corporations, who purchased one or more Site Licenses, must also purchase pre-paid blocks of re-certifications for their certified personnel; Blocks of 50 or more Pre-paid re-certifications will be managed quarterly with the submission of an active certified personnel roster from the Scribe Corporation. These prepaid blocks can be purchased at a reduced rate of \$45/individual.

**\*\*Active** Board of Directors can apply for an Annual Unlimited Site License.

Cost: \$15,000; this preferential package is subject to a 3- year contract, which includes Annual blocks of Prepaid Re-Certifications.

**REINSTATING LAPSED CERTIFICATIONS:** Individuals need to maintain requirements for valid certification and credentials. Contact Support at [support@theacmss.org](mailto:support@theacmss.org).