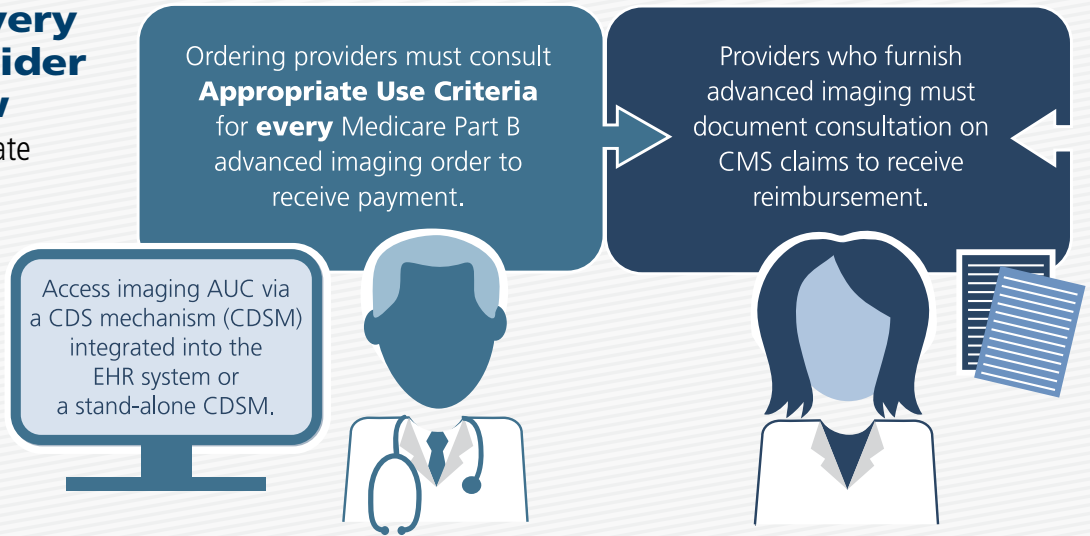


## Here's what every Medicare provider needs to know

about the CMS Appropriate Use Criteria Program created in response to provisions contained in the Protecting Access to Medicare Act (PAMA).



## What does the CMS AUC program mean to you?

In response to the PAMA mandate, the Centers for Medicare and Medicaid Services (CMS) established the Appropriate Use Criteria (AUC) Program that will require physicians and other providers to consult AUC developed by a qualified provider-led entity (PLE) prior to ordering outpatient imaging services for Medicare patients.

- An ordering provider must consult AUC for Medicare Part B advanced imaging orders (including CT, MRI, nuclear medicine and PET scans) with some exceptions
- Providers who furnish this advanced imaging must document each consultation on the CMS claim in order to receive reimbursement for their services to include: a unique CDSM vendor G code and CMS-specified modifiers related to consultation results or, if applicable, exemptions
- Providers can access imaging AUC either via a qualified CDSM integrated into an electronic health record system or a stand-alone qualified CDSM
- In the future, CMS will review the interactions to determine “outliers” — referring providers with low AUC adherence rates — who will be subject to additional prior authorization processes for the exams they order

**CDS automation of evidence-based guidelines enhances quality of care, fosters shared decision making with patients and lowers imaging costs.**

## When does PAMA go into effect?

2020 and 2021 are an educational and operations testing period for the Medicare AUC Program.

Radiologists and referring providers should be working together to implement AUC consultation strategies to ensure appropriate workflows are in place when reimbursement for advanced imaging is affected, starting Jan. 1, 2022.

Without a documented consult, rendering providers will not receive Medicare payment for the procedure after the current educational and operations testing period ends on Dec. 31, 2021.

## Why should you act now?

The current education and operations testing period allows time for facilities to integrate the AUC consultation into their workflows to ensure the required consultation information is included on CMS claims in preparation for the Jan. 1, 2022 AUC program's start date.

AUC program participation is currently a high-weighted **Improvement Activity** for radiologists and referring providers participating in the CMS Merit-based Incentive Payment System (MIPS) program.

## Why clinical decision support?

The AUC program is an alternative to CMS requiring pre-authorization for all advanced imaging — which could pave the way for other payers to eliminate this burdensome step. The result? Easy access to AUC can help keep evidence-based decision making between physicians and patients, as unlike “hard stop” prior authorization, AUC consultation allows physicians to choose the best test for patients based on their individual circumstances.

Imaging CDS technology can help identify opportunities for quality improvement initiatives and spark collaboration between radiologists and referring providers around improvements in value-based imaging.

“ I’m not always certain that I’m ordering the correct study, especially when it comes to imaging that may require one or more types of contrast. With CDS, I am quite confident that when I need to request a prior authorization, I have good data to back up my choice of imaging. ”

Molly Craven, DO, Family Physician  
Brookside Family Medicine  
Traverse City, MI

## ACR Guidance

In June 2016, CMS named the American College of Radiology® (ACR®) as one [qualified PLEs](#) for the imaging AUC program. This means referring providers can consult [ACR Appropriateness Criteria® \(AC\)](#) to fulfill impending PAMA requirements. The ACR AC content is accessible via the [CareSelect Imaging™\\_CDS](#) qualified CDSM.

The ACR introduced the Clinical Decision Support Registry in 2019, that enables review of imaging exam-ordering patterns to pinpoint areas of best practices as well as areas in need of improvement.

## Where can you learn more?

- [Clinical Decision Support Resources from the ACR | \*\*acr.org/cds\*\*](#)
- [ACR Clinical Decision Support Registry | \*\*https://www.acr.org/CDSR\*\*](https://www.acr.org/CDSR)
- [AUC Program Information from CMS Website | \*\*https://go.cms.gov/2QyJAQt\*\*](https://go.cms.gov/2QyJAQt)

### Questions?

#### Contact:

ACR AUC: [PAMA-AUC@acr.org](mailto:PAMA-AUC@acr.org)