How PAMA Affects Orders for Imaging

ACR®
AMERICAN COLLEGE OF RADIOLOGY
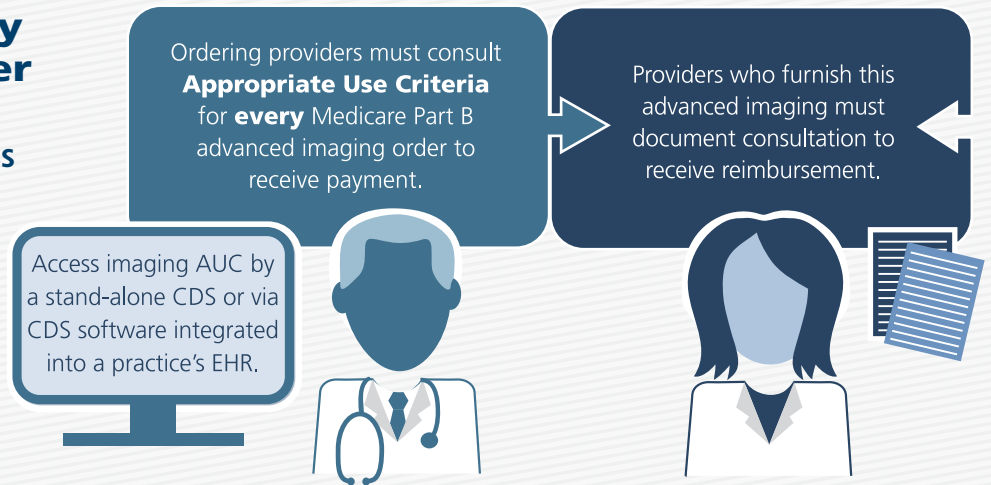QUALITY IS OUR IMAGE

Here's what every Medicare provider needs to know

about the **Protecting Access to Medicare Act (PAMA)**. Implementing **clinical decision support** (CDS) technology today can help practices reap the benefits of better patient care and increased efficiency.

Ordering providers must consult **Appropriate Use Criteria** for **every** Medicare Part B advanced imaging order to receive payment.

Access imaging AUC by a stand-alone CDS or via CDS software integrated into a practice's EHR.

Providers who furnish this advanced imaging must document consultation to receive reimbursement.

> "Ultimately, we need to do what's right for our patients. Our CDS system allows us to practice in a way that uniformly confirms that we're ordering the most appropriate diagnostic study and enhancing patient safety."
>
> Robert A. Czincila, DO, Chief of Emergency Medicine
> Einstein Medical Center
> Philadelphia, PA

What does PAMA mean to you?

Under PAMA, the Centers for Medicare and Medicaid Services (CMS) will require physicians and other providers to consult appropriate use criteria (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 **every** Medicare Part B advanced imaging order (including CT, MRI, nuclear medicine and PET scans). Each claim will require evidence of consultation in order for it to be paid.
- Providers who furnish this advanced imaging must document each consultation in order to receive reimbursement for their services.
- Providers can access imaging AUC either by a stand-alone CDS system or via CDS software integrated into a practice's electronic health record system.
- In the future, CMS will review the interactions to determine "outliers" — referring providers who have low adherence rates to AUC and 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?

The PAMA program starts with a voluntary reporting period from **July 2018 to December 2019**.

Formal requirements for consultation and data submission are scheduled to begin with a one-year educational and testing period on January 1, 2020. Starting on this date, CMS will only pay claims that include the necessary evidence of AUC consultation. During the first year of the program, AUC consultation is required; however, CMS will not impose penalties on furnishing providers nor use the data to determine outliers.

Why should you act now?

The voluntary reporting period allows time for organizations to integrate the AUC consultation into their workflow to ensure payment in preparation for the January 2020 start date.

Early adopters of the Medicare AUC program are eligible to receive credit in the **Improvement Activities** and **Promoting Interoperability** performance categories of the Merit-based Incentive Payment System (MIPS) program.

Why clinical decision support?

CDS 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? CDS can help keep decision making between physicians and patients.

In June 2016, CMS named the American College of Radiology (ACR®) as one of several **qualified PLEs** for imaging AUC. This means referring providers can consult **ACR Appropriateness Criteria® (AC)** to fulfill impending PAMA requirements.

The ACR AC is easily accessible at the point of care using the **CareSelect Imaging™ CDS**, which provides evidence-based guidelines to help providers order the most appropriate imaging for specific clinical conditions.

> **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

How can you get started with CDS?

To familiarize referring providers and radiologists with accessing AUC and using CDS ahead of the PAMA mandate, the ACR developed a no-cost tool: the Radiology Support, Communication and Alignment Network (**R-SCAN™**).

R-SCAN is a collaborative action plan that brings radiologists and referring clinicians together to improve imaging appropriateness through the use of CDS. R-SCAN is also approved by CMS for multiple improvement activities under MIPS.

Where can you learn more?

- Imaging 3.0 Case Study: CDS at Einstein Medical Center | **acr.org/aheadcurve**
- Clinical Decision Support Resources from the ACR | **acr.org/cds**
- ACR Appropriateness Criteria | **acr.org/ac**
- CareSelect Imaging/ACR Select | **nationaldecisionsupport.com/careselect-imaging**
- How to Get Started With R-SCAN | **rscan.org/how-to-guide**

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