



# Clinical Decision Support

## *Lunch & Learn*

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# Agenda

- Acronyms
- Background/history of legislation for Clinical Decision Support
- Impact on Physician's Offices
- Details of Clinical Decision Support
- Demo of AIM solution
- Questions

# Acronyms to Know

- CDS: Clinical Decision Support
- AUC: Appropriate Use Criteria
- CDSM: Clinical Decision Support Mechanism
- PLE: Provider-led Entity



# What is Appropriate Use Criteria (AUC)?

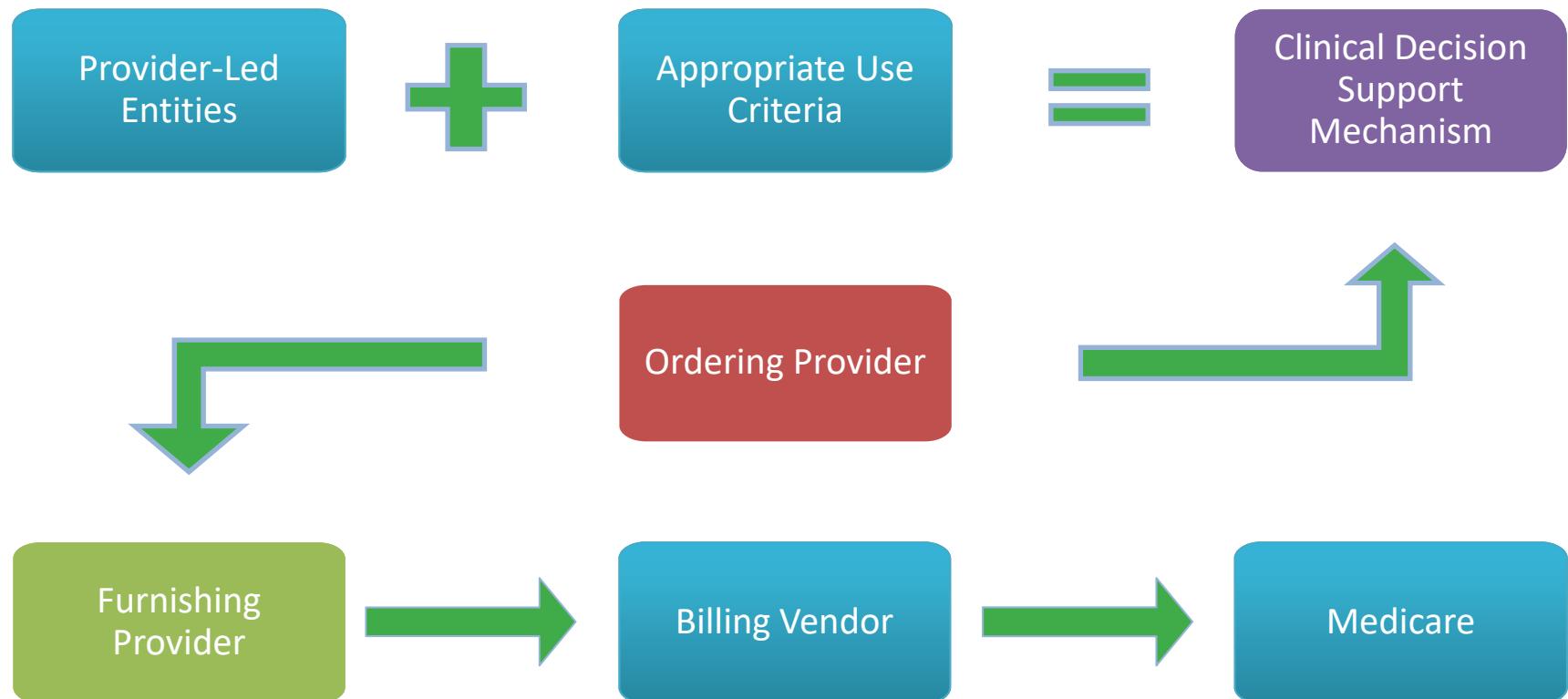
- Criteria developed by national professional medical specialty societies or PLEs
- Used to assist in making appropriate treatment decisions; evidence-based





# What are Provider-Led Entities (PLE)?

- National professional medical specialty society or other organization comprised primarily of providers who predominantly provide direct patient care.
- American College of Radiology
- Massachusetts General Hospital, Department of Radiology
- Society for Nuclear Medicine and Molecular Imaging



**This is NOT required for Medicare Advantage Plans**



# Background

- Protecting Access to Medicare Act (PAMA) of 2014
  - Provision for mandatory use of appropriate use criteria (AUC) for advanced diagnostic imaging
- CY 2016 rulemaking process defined:
  - Initial program components
  - Applicable AUC and process for development
  - Provider-led entities (PLE)



# Background

- CY 2017 rulemaking process defined:
  - Requirements for clinical decision support mechanisms (CDSM) to become qualified
  - Applicable payment systems
    - Medicare Physician Fee Schedule
    - Ambulatory Surgical Center payment system (ASC)
    - Hospital Outpatient Prospective Payment System (HOPPS)
  - Outlier ordering professionals



# Background

- CY 2018 rulemaking process defined:
  - Program implementation date: 1/1/2020
  - Broad claims processing instructions
    - Ordering professionals responsibility vs. furnishing professional
    - “educational and operations testing year”
    - Voluntary reporting period
      - QQ modifier
      - 1/1/2018-12/31/2019



# Background

- CY 2019 rulemaking process defined:
  - Reconfirmed program implementation date: 1/1/2020
  - Additional applicable setting
    - Independent diagnostic testing facility (IDTF)
  - Clarified reporting requirements
  - Established policy for significant hardship



# Impact on Physicians?

## **WHAT DOES IT MEAN TO ME?**

# Role of Physician's Office

- Role of referring provider
  - Utilize Qualified CDSM to retrieve AUC number for all advanced imaging studies (CT, MR, Nuc Med, PET) **on patients with Medicare** (not required for Medicare Advantage plans)
  - Report AUC number to furnishing provider
  - Abide by regulations to avoid outlier ordering professional status



# Details of Clinical Decision Support

## **HOW DOES IT WORK?**

## Details of CDS

- The “CDS Five Rights” concept
  - the right information (evidence-based guidance, response to clinical need)
  - to the right people (entire care team – including the patient)
  - through the right channels (e.g., EHR, mobile device, patient portal)
  - in the right intervention formats (e.g., order sets, flow-sheets, dashboards, patient lists)
  - at the right points in workflow (for decision making or action)



# Details of CDS

- Differences from prior authorization
  - Occurs at the point of care
  - No FTE's sitting on the phone
  - No "hard stop"
  - An educational tool for physicians and patients



# Details of CDS

- Applicable studies
  - CT
  - MRI
  - PET
  - Nuclear medicine



## Details of CDS

- Applicable settings
  - Physician's office
  - Hospital outpatient department (includes ED)
    - Emergency services when provided under non-emergency conditions
  - Ambulatory surgical center
  - Independent diagnostic testing facility



# What Does CMS Believe are the Benefits?

- CMS estimate of savings
  - Limited information overall
  - CMS approximates one-third of imaging procedures are inappropriate
  - CMS approximates upwards of \$990,000,000 savings per year
- Potential benefits for Medicare beneficiaries per CMS
  - CDSM alerting to obsolete tests
  - Advanced diagnostic imaging may produce inaccurate results based on patient medications
  - Potential decrease in medical errors
  - CDSM could identify situations of repeated testing



# How to Report AUC Consultations to CMS

- CMS will publish G-codes
  - Will communicate which CDSM used
- Modifiers
  - Will communicate whether the service ordered would or would not adhere to AUC, or does not apply
- Ordering provider NPI



# Demo AIM Portal Module



# Questions?



# Thank You!