

SAVE THE DATE

MetroCare Annual Meeting Wednesday, October 23, 2019
Chickasaw Country Club 6:00-8:00 PM

Appropriate Use Criteria Affect Majority of Medicare Providers

If you order advanced imaging services, or furnish the technical or professional component for Medicare patients, this new law becomes mandatory for you on January 1, 2020.

ORDERING PROVIDERS:

If you order advanced imaging services (CT, MRI, PET, nuclear medicine scans) for your traditional Medicare Part B patients (outpatients-including ED patients):

You must consult a CDSM (clinical decision support mechanism) for appropriate use criteria (AUC) to support your decision to order.

You may disagree with your CDSM and order the procedure on your own judgement, but you must report the G code that indicates the name of your CDSM and the result of the AUC consult. The G code will be automatically generated by your CDSM for your referral to the furnishing entity.

For 2020, this is mandatory, but will not result in a penalty to the radiologist for performing without the CDSM consult if you are noncompliant.

Beginning January 1, 2021, the radiologist/facility will not be paid if you do not send the proper G code from your consultation to them with your order.



FURNISHING PROVIDERS:

If your facility performs the technical component of CT, MRI, PET or nuclear imaging

OR

If you are a provider who performs the professional component (reads/interprets) for Medicare Part B (traditional Medicare outpatient)

You must report on your Medicare claim form:

1. NPI of the ordering provider
2. G code for the CDSM that the ordering provider consulted and reported to you with their order
3. QQ modifier to indicate consultation of the CDSM

This will become mandatory on January 1, 2020.

Beginning January 1, 2021, you will not be paid for performing either the technical or professional component of these services if you do not report the above information on your Medicare Part B claims.

What is a CDSM and How does it Work?

A CDSM (clinical decision support mechanism) is an interactive software tool, approved and certified by CMS, with criteria developed and reviewed by provider-led entities and based on medical evidence/consensus of medical experts in that field.

The CDSM may be integrated in the EHR of the consulting (ordering) provider, or it may exist as a stand alone HIPAA secure web portal to which you log in and manually enter your patient's medical information to obtain the consultation.

The CDSM is required to generate a report containing:

1. G codes specific to that CDSM that also document whether the service ordered adheres to AUC, does not adhere, or is not applicable to the service ordered.

2. The name and NPI of the ordering professional

3. A unique identifier for each consultation for auditing purposes

We urge you to start the CDSM conversation now with your software vendor. As with many software changes, this may take some time and possible workflow changes for your office. Ordering providers must begin consulting January 1, 2020.

MIPS Improvement Activities: CDSM Consultation is a High Priority Measure

If you are an ordering provider of advanced imaging (CT, MRI, PET, nuclear med) for Medicare patients, you may attest to consultation of the CDSM as a high profile Improvement Activity for MIPS for this year for the 90 day period of October 1-Dec 31, 2019. Link to QPP measure: [click here](#)

Consulting the software vendor for your EHR may reveal an existing CDSM already integrated in your system that they may activate for your use, or prompt their recommendation of an available compatible CDSM that they can install for you.

Alternatively, some of these CDSMs have a portal option that you may access to manually enter patient information for the CDSM consultation. You may choose this option if your EHR is not compatible with any approved CDSM or if you do not want the CDSM to make recommendations outside the scope of this specific initiative.

We urge you to start the CDSM conversation now with your software vendor, even if you are not attesting for the MIPS activity. As with many software changes, this may take some time and possible workflow changes for your office. Ordering providers must begin consulting on January 1, 2020.

We Are Here to Assist You

A dedicated team of professionals is committed to assuring MetroCare physicians have the tools and resources to achieve success with the changes required by transition to value-based healthcare.

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