



Novitas Solutions Presents: Understanding the Appropriate Use Criteria for Advanced Diagnostic Testing

Arkansas Chapter Healthcare Financial
Management Association Conference
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Acronym List



| Acronym | Definition |
|---------|-------------------------------------------|
| AUC | Appropriate Use Criteria |
| CDSM | Clinical Decision Support Mechanism |
| CMS | Centers for Medicare and Medicaid |
| EHR | Electronic Health Records |
| HCPCS | Healthcare Common Procedure Coding System |
| NPI | National Provider Identifier |
| NUBC | National Uniform Billing Committee |
| PAMA | Protecting Access to Medicare Act |
| PLE | Provider-Led Entities |

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Today's Presentation



- Agenda:
 - Background
 - Definitions and Purpose
 - Appropriate Use Criteria (AUC) Program
 - AUC Billing Requirements
- Objectives:
 - Review the AUC program for Advanced Diagnostic Testing
 - Discuss new definitions and purpose of the program
 - Explore the billing requirements when reporting AUC

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Background

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Protecting Access to Medicare Act (PAMA)



- Background:
 - The [Protecting Access to Medicare Act \(PAMA\) of 2014, Section 218\(b\)](#), established a new program to increase the rate of appropriate advanced diagnostic imaging services furnished to Medicare beneficiaries
 - Advanced diagnostic imaging services include:
 - ✓ Services defined in [Section 1834 \(e\)\(1\)\(B\)](#) of the Social Security Act (the Act):
 - Computed tomography (CT)
 - Positron emission tomography (PET)
 - Nuclear medicine
 - Magnetic resonance imaging (MRI)

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Program Dates



- Voluntary participation:
 - July 1, 2018, through December 31, 2019
- Education and Operations Testing period:
 - Expected to last one year (January 1, 2020 – December 31, 2020)
 - CMS has extended the testing period to December 31, 2021
- Program implementation:
 - Excepted January 1, 2022
 - Information regarding the ordering professional's consultation with the Clinical Decision Support Mechanism (CDSM), or exception to such consultation, must be appended to the furnishing professional's claim in order for that claim to be paid

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AUC for Advanced Diagnostic Imaging – Voluntary Participation and Reporting Period - Claims Processing Requirements – HCPCS Modifier QQ



- [MM10481](#):
 - Effective: July 1, 2018
 - Voluntary participation and reporting period July 1, 2018 – December 31, 2019
- Overview:
 - When ordering an advanced imaging service, the provider will be required to consult a qualified CDSM
 - A consultation must take place for an applicable imaging service ordered by an ordering professional that would be furnished in an applicable setting and paid under an applicable payment system
 - The CDSM will provide the ordering professional with a determination
 - During the voluntary period, the furnishing professional and facility may append a new modifier to the CPT code on the claim to denote AUC consultation occurred:
 - ✓ Modifier QQ - Ordering professional consulted a qualified CDSM for this service and the related data was provided to the furnishing professional

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AUC for Advanced Diagnostic Imaging –
Education and Operation Testing Period –
Claims Processing Requirements



- [MM11268](#)
 - Effective: January 1, 2020 – December 31, 2021
 - Education and Operation Testing period is expected to last for two years
- Overview:
 - During CY 2020 and CY 2021, CMS expects ordering professionals to begin consulting qualified CDSMs and providing information to the furnishing practitioners and providers for reporting on their claim
 - Situations in which furnishing practitioners and providers do not receive AUC-related information from the ordering professional can be reported by modifier MH:
 - ✓ MH - Unknown if ordering professional consulted a CDSM for this service, related information was not provided to the furnishing professional or provider
 - Even though claims will not be denied during this Educational and Operations Testing Period, inclusion is encouraged

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Appropriate Use Criteria (AUC) for Advanced
Diagnostic Imaging- Approval of Using the K3
Segment for Institutional Claims



- [SE20002](#):
 - Implementation Date: January 1, 2020
- Key Points:
 - Guidance for processing claims for certain institutional claims that are subject to the AUC program for advanced diagnostic imaging services
 - The K3 segment will be used to report line level ordering professional information on institutional claims

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Definitions and Purpose

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Appropriate Use Criteria (AUC)

- Definition:
 - **AUC** is criteria only developed or endorsed by national professional medical specialty societies or other provider-led entities (PLEs), so ordering and furnishing professionals can make the most patient-appropriate treatment decision for the specific clinical condition
 - To the extent possible, criteria must be evidence based
- Purpose:
 - CMS will use data collected from the program to identify outlier ordering professionals who will become subject to prior authorization
 - Information on outlier methodology and prior authorization is not yet available
- Additional Information:
 - [Appropriate Use Criteria Program](#)
 - [Appropriate Use Criteria for Advance Diagnostic Imaging Fact Sheet](#)

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Provider-Led Entities (PLEs)



- Background:
 - A PLE is a national professional medical specialty society or other organization that is comprised primarily of providers or practitioners who, either within the organization or outside of the organization, predominantly provide direct patient care
 - Once a PLE is qualified, the AUC developed, modified or endorsed by the entity are considered specified applicable AUC
- Purpose:
 - Qualified PLEs develop AUC
 - May modify or endorse AUC developed by another qualified PLE
 - PLEs that develop their own AUC may endorse the AUC of another qualified PLE:
 - ✓ This creates a larger, more comprehensive library of available AUC

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PLE Process



- In developing or modifying AUC, PLEs must:
 - Use an evidence-based peer-review process
 - Comprised of an Interdisciplinary team:
 - ✓ At least seven members
 - ✓ Publicly transparent process for identifying and disclosing potential conflicts of interest for their members
 - Publish all AUC on their websites and identify the applicable priority clinical area for each set or individual criterion
 - Label each key point in a criterion as “evidence-based” or “consensus-based”
 - Indicate the strength of evidence for each key point
 - Publicly post their process for AUC development or modification to their website
 - Review each criterion at least every year and update them as needed
 - Disclose external parties to the PLE when involved in the AUC development process

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Qualified PLE



- To become a qualified PLE:
 - Entities must apply to CMS
 - CMS qualifies PLEs for five (5) years
 - Applications and subsequent reapplications must document adherence to the requirements
- Detailed information:
 - Requirements and application process to become a qualified PLE:
 - ✓ [42 Code of Federal Regulations \(CFR\) 414.94](#) (c)
 - For a current list of qualified PLEs:
 - ✓ [Provider Led Entities](#)

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Clinical Decision Support Mechanism (CDSM)



- Definition:
 - CDSM is an interactive, electronic tool for use by clinicians that communicates AUC information to the user and assists them in making the most appropriate treatment decision for a patient's specific clinical condition:
 - ✓ Tools may be within or independent from certified electronic health record (EHR) technology
 - ✓ Qualified CDSMs must meet certain requirements and have specific capabilities
- Purpose:
 - The CDSM will provide the ordering professional with a determination of whether that order:
 - ✓ Adheres to AUC,
 - ✓ Does not adhere to AUC, or
 - ✓ If there is no AUC applicable in the CDSM consulted

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CDSM Requirements



- Qualified CDSMs must:
 - Identify and make AUC and supporting documentation available from qualified PLEs
 - Contain AUC that address all common and important clinical scenarios within all priority clinical areas
 - Be capable of incorporating AUC from more than one qualified PLE
 - Have processes in place to update, modify, or remove AUC under specific timelines
 - Meet privacy, storage, and security standards under applicable provisions of law

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CDSM Requirements (Continued)



- Provide ordering professionals aggregate feedback on consultations:
 - For each consultation, qualified CDSMs must:
 - ✓ Determine and generate documentation on whether the service ordered:
 - Would adhere to AUC
 - Would not adhere to AUC
 - Whether the AUC consulted was not applicable to the service ordered
 - ✓ Include the name and National Provider Identifier (NPI) of the ordering professional
 - ✓ Include a unique consultation identifier

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Qualified CDSMs



- To become a qualified CDSM:
 - Developers must apply to CMS
 - CMS qualifies CDSMs for five (5) years
 - Applications and subsequent reapplications must document adherence to the requirements and listed in the regulation
 - Send applications to ImagingAUC@cms.hhs.gov by January 1st
 - CMS will post qualified CDSMs to their website:
 - ✓ All qualified CDSMs must re-apply every five years
 - ✓ Applications must be received by January 1 during the fifth year of their approval
- For more information on the application process to become a qualified CDSM:
 - ✓ [42 Code of Federal Regulations 414.94\(g\)](#)
 - For a current list of qualified CDSMs
 - ✓ [Clinical Decision Support Mechanisms](#)

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Providers



- Definitions:
 - Furnishing provider - is the organization or health system that furnishes and bills Medicare for the ordered service provided to the beneficiary
 - Ordering provider - is the individual who orders an item or service (e.g., laboratory diagnostic tests or imaging services) that will be furnished and billed by another provider or supplier (e.g., laboratory, imaging center)
- Purpose:
 - The ordering professional will be required to consult a qualified CDSMs and provide information to the furnishing practitioners and providers for reporting on their claims

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Priority Clinical Areas



- Definition:
 - Priority clinical areas are clinical conditions, diseases, or symptom complexes and associated imaging services CMS identifies through annual rulemaking and in consultation with stakeholders
- Purpose:
 - In establishing priority clinical areas, CMS considers how common and widespread a condition, disease, or symptom complex is, the variation of image ordering, and the strength of evidence supporting particular imaging services
 - CMS also considers the relevance to the Medicare population
- Note: Upon full program implementation, AUC consultation is required for all advanced diagnostic imaging services, not just those within the priority clinical areas

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Priority Areas



- CMS identified the following eight priority areas that may be used in the determination of outlier ordering professionals in the future:
 - Coronary artery disease (suspected or diagnosed)
 - Suspected pulmonary embolism
 - Headache (traumatic and non-traumatic)
 - Hip pain
 - Low back pain
 - Shoulder pain (to include suspected rotator cuff injury)
 - Cancer of the lung (primary or metastatic, suspected or diagnosed)
 - Cervical or neck pain
- The list may be updated and can be found:
 - [Priority Clinical Areas](#)

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AUC Program

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Program Requirements

- When an advanced imaging service is ordered for a Medicare beneficiary, the ordering professional will be required to consult a qualified CDSM
- The CDSM will provide the ordering professional with a determination of whether that order:
 - Adheres to AUC,
 - Does not adhere to AUC, or;
 - If there is no AUC applicable in the CDSM consulted
- When fully implemented, a consultation must take place for any applicable imaging service ordered by an ordering professional that would be furnished in an applicable setting and paid under an applicable payment system and information related to the consultation must be appended to claims

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Applicable Settings



- An AUC consultation must occur for advanced diagnostic imaging services that are performed in:
 - Physician's office
 - Hospital outpatient department (including an emergency department)
 - Ambulatory surgical center (ASC)
 - Independent diagnostic testing facility (IDTF)
 - Any other provider-led outpatient setting CMS determines appropriate
- The applicable setting is where the imaging service is furnished, not the setting where the imaging service is ordered
- Note: CMS clarified that AUC does not apply to MD waiver hospitals

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Applicable Payment Systems



- The setting the service is furnished in determines which payment system CMS uses to pay a properly documented claim for advanced diagnostic imaging services
- Applicable payment systems include:
 - Physician Fee Schedule (PFS)
 - Hospital Outpatient Prospective Payment System
 - Ambulatory surgical centers (ASCs)

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Educational and Operations Testing Period



- During this phase (January 1, 2020 – December 31, 2021), claims will not be denied for failing to include:
 - AUC-related information
 - Misreporting AUC information on non-imaging claims
- CMS expects ordering professionals to begin consulting qualified CDSMs and providing information to the furnishing practitioners and providers for reporting on their claims
- Even though claims will not be denied during this Educational and Operations Testing Period, inclusion is encouraged

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AUC Exceptions



- CMS may make the following AUC reporting requirements exceptions for:
 - Emergency services, when provided to patients with certain emergency medical conditions (as defined in Section 1867(e)(1) of the Act)
 - An applicable imaging service ordered for an inpatient and for which payment is made under Part A
 - Ordering professionals, when experiencing a significant hardship including:
 - ✓ Insufficient internet access
 - ✓ EHR or CDSM vendor issues
 - ✓ Extreme and uncontrollable circumstances
- Questions regarding this program may be submitted to the CMS Imaging AUC resource mailbox at ImagingAUC@cms.hhs.gov

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Overview for 2020 & 2021



- Beginning January 1, 2022, you must use a qualified CDSM and report AUC consultation information on the professional and facility claims for the service
- Claims for advanced diagnostic imaging services will need to include the following information:
 - The ordering professional's name and NPI
 - Which CDSM was consulted (there are multiple qualified CDSMs available)
 - Whether the service ordered would or would not adhere to consulted AUC or whether consulted AUC was not applicable to the service ordered
- As the ordering professional, you may delegate the AUC consultation to clinical staff acting under your direction if you do not personally perform the AUC consultation yourself

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AUC Billing Requirements

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AUC Reporting Requirements



- Furnishing provider reports:
 - CPT, HCPCS, or C-code for advanced diagnostic imaging
 - Line item HCPCS modifier to describe either the level of adherence to AUC or an exception to the program:
 - ✓ Report on the same line as the advanced diagnostic imaging code
 - ✓ Modifier references:
 - Quality Reporting Incentive Programs Modifiers ([JH](#)) ([JL](#))
 - Advanced Diagnostic Imaging AUC Modifiers ([JH](#)) ([JL](#))
 - Line item G-codes to identify the qualified CDSM consulted:
 - ✓ Report on a separate line when reporting modifiers ME, MF or MG:
 - Date of the related Advanced Diagnostic Imaging service
 - Nominal charge, e.g., a penny, for institutional claims
 - ✓ Note: Multiple G-codes on a single claim can be reported

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Advanced Diagnostic Imaging – Code List One



- Magnetic Resonance Imaging (MRI)/Magnetic Resonance Angiography (MRA):
 - 70336, 70540, 70542, 70543, 70544, 70545, 70546, 70547, 70548, 70549, 70551, 70552, 70553, 70554, 70555, 71550, 71551, 71552, 71555, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72157, 72158, 72159, 72195, 72196, 72197, 72198, 73218, 73219, 73220, 73221, 73222, 73223, 73225, 73718, 73719, 73720, 73721, 73722, 73723, 73725, 74181, 74182, 74183, 74185, 75557, 75559, 75561, 75563, 75565, 76498, 77046, 77047, 77048, 77049
- Computerized Tomography (CT):
 - 70450, 70460, 70470, 70480, 70481, 70482, 70486, 70487, 70488, 70490, 70491, 70492, 70496, 70498, 71250, 71260, 71270, 71275, 72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133, 72191, 72192, 72193, 72194, 73200, 73201, 73202, 73206, 73700, 73701, 73702, 73706, 74150, 74160, 74170, 74174, 74175, 74176, 74177, 74178, 74261, 74262, 74712, 74713, 75571, 75572, 75573, 75574, 75635, 76380, 76497
- Single-Photon Emission Computed Tomography (PET):
 - 76390

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Advanced Diagnostic Imaging – Code List Two



- Nuclear Medicine:
 - 78012, 78013, 78014, 78015, 78016, 78018, 78020, 78070, 78071, 78072, 78075, 78099, 78102, 78103, 78104, 78110, 78111, 78120, 78121, 78122, 78130, 78135, 78140, 78185, 78191, 78195, 78199, 78201, 78202, 78215, 78216, 78226, 78227, 78230, 78231, 78232, 78258, 78261, 78262, 78264, 78265, 78266, 78267, 78268, 78278, 78282, 78290, 78291, 78299, 78300, 78305, 78306, 78315, 78350, 78351, 78399, 78414, 78428, 78429, 78430, 78431, 78432, 78433, 78434, 78445, 78451, 78452, 78453, 78454, 78456, 78457, 78458, 78459, 78466, 78468, 78469, 78472, 78473, 78481, 78483, 78491, 78492, 78494, 78496, 78499, 78579, 78580, 78582, 78597, 78598, 78599, 78600, 78601, 78605, 78606, 78608, 78609, 78610, 78630, 78635, 78645, 78650, 78660, 78699, 78700, 78701, 78707, 78708, 78709, 78725, 78730, 78740, 78761, 78799, 78800, 78801, 78802, 78803, 78804, 78811, 78812, 78813, 78814, 78815, 78816, 78830, 78831, 78832, 78835, 78999
- C-Codes:
 - C8900, C8901, C8902, C8903, C8905, C8908, C8909, C8910, C8911, C8912, C8913, C8914, C8918, C8919, C8920, C8931, C8932, C8933, C8934, C8935, C8936

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AUC Modifiers List One



- A list of AUC modifiers can be found in [MM11268](#)
- Emergency or Hardship Modifiers:
 - Ordering professional is not required to consult a clinical decision support mechanism due to:

| Modifier | Description |
|----------|------------------------------------------------------------------------------------------------------|
| MA | Service being rendered to a patient with a suspected or confirmed emergency medical condition |
| MB | The significant hardship exception of insufficient internet access |
| MC | The significant hardship exception of electronic health record or CDSM vendor issues |
| MD | The significant hardship exception of extreme and uncontrollable circumstances |

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AUC Modifiers List Two



| Modifier | Description |
|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ME | The order for this service adheres to the appropriate use criteria in the CDSM consulted by the ordering professional |
| MF | The order for this service does not adhere to the appropriate use criteria in the qualified CDSM consulted by the ordering professional |
| MG | The order for this service does not have appropriate use criteria in the CDSM consulted by the ordering professional |
| MH | Unknown if ordering professional consulted a CDSM for this service, related information was not provided to the furnishing professional or provider |
| QQ | Ordering professional consulted a qualified CDSM for this service and the related data was provided to the furnishing professional (effective date: 7/1/18) |

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Modifiers ME, MF or MG



- When reporting modifier ME, MF, or MG on the Advanced Diagnostic Imaging Services:
 - Claim line should contain a G-code (on a separate claim line) to report which qualified CDSM was consulted
 - Multiple G codes on a single claim is acceptable
 - G-Codes range from G1000 through G1023

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G-Codes



- G-Codes are used to report which qualified CDSM was consulted:
 - They do not have associated payment rates:
 - ✓ They are not payable codes
 - ✓ Used for reporting purposes only
 - ✓ Nominal charge, e.g., a penny, for institutional claims
- No-pay G-code line-item use the following message:
 - Claim Adjustment Reason Code:
 - ✓ 246 -This non-payable code is for required reporting only
 - Reason and Remark Code:
 - ✓ N620 Alert - This procedure code is for quality reporting/informational purposes only
- Information regarding G-codes can be found in [MM11268](#)
- CMS lists current qualified CDSMs and the corresponding G-code:
 - [Clinical Decision Support Mechanisms](#):
 - ✓ Those with an * have a free tool available

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Current CDSM and Corresponding G-codes List One



| G-Code | CDSM Mechanism Name |
|--------|----------------------------------------------------------|
| G1001 | eviCore healthcare's Clinical Decision Support Mechanism |
| G1002 | MedCurrent OrderWise™ |
| G1003 | Medicalis Clinical Decision Support Mechanism |
| G1004 | National Decision Support Company CareSelect™* |
| G1005 | National Imaging Associates RadMD |
| G1006 | Test Appropriate CDSM* |
| G1007 | AIM Specialty Health ProviderPortal®* |
| G1008 | Cranberry Peak ezCDS |
| G1009 | Sage Health Management Solutions Inc. RadWise® |
| G1010 | Stanson Health's Stanson CDS |
| G1011 | CDSM, qualified tool not otherwise specified |

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Current CDSM and Corresponding G-codes List Two



| G-Code | CDSM Mechanism Name |
|--------|---------------------------------------------------|
| G1012 | AgileMD |
| G1013 | EvidenceCare Imaging Advisor |
| G1014 | InveniQA Semantic Answers in Medicine |
| G1015 | Reliant Medical Group |
| G1016 | Mechanism Speed of Care |
| G1017 | HealthHelp |
| G1018 | INFINX |
| G1019 | LogicNets |
| G1020 | Curbside Clinical Augmented Workflow |
| G1021 | E*HealthLine Clinical Decision Support Mechanism |
| G1022 | Intermountain Clinical Decision Support Mechanism |
| G1023 | Persivia Clinical Decision Support |

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Part B Billing Requirements

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Part B CMS-1500 Claim Form or Electronic Equivalent – Item 17



- Item 17 and 17b:
 - Ordering providers name and NPI

| | | | |
|------------------------------------------------|--|------|-----|
| 17. NAME OF REFERRING PROVIDER OR OTHER SOURCE | | 17a. | |
| | | 17b. | NPI |

Item 17 - Code qualifier for ordering provider

| | | |
|-------|-------|-------------------------|
| 2420E | NM101 | DK = Ordering physician |
|-------|-------|-------------------------|

Item 17 - Name of the Ordering Provider

| | | |
|-------|-------|-------------------------------|
| 2420E | NM102 | 1 = Entity Type qualifier |
| | NM103 | Ordering provider last name |
| | NM104 | Ordering provider first name |
| | NM105 | Ordering provider middle name |

17b - Enter the 10-digit NPI of the ordering provider

| | | |
|-------|-------|--------------------------|
| 2420E | NM108 | XX = CMS NPI qualifier |
| | NM109 | NPI of ordering provider |

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Part B CMS-1500 Claim Form or Electronic Equivalent – Item 24D



- Item 24D:
 - Modifier on the advanced diagnostic imaging services
 - G-code if using modifier ME, MF or MG

| 24. A. DATE(S) OF SERVICE | | B. PLACE OF SERVICE | C. EMG | D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) | | E. DIAGNOSIS POINTER |
|---------------------------|----|---------------------|--------|----------------------------------------------------------------------|----------|----------------------|
| From | To | | | CPT/HCPCS | MODIFIER | |
| MM | DD | YY | MM | DD | YY | |

| | | | | | | |
|--|--|--|--|-------|----|--|
| | | | | 73718 | ME | |
| | | | | G1005 | | |

Item 24D - should contain the Advanced Diagnostic Imaging Service and one of the G-codes on a separate line to report which qualified CDSM was consulted. Multiple G-codes on a single claim is acceptable

| | | |
|------|---------|---------------------------|
| 2400 | SV101-1 | Service ID qualifier = HC |
| | SV101-2 | Procedure Code |

G-codes should only be reported when using modifiers ME, MF or MG

Item 24D - should contain one of the program modifiers on the same line as the CPT code for the advanced diagnostic imaging service

| | | |
|------|---------|----------|
| 2400 | SV101-3 | Modifier |
|------|---------|----------|

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Part A Billing Requirements

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Qualified CDSM - Specific HCPCS Not Yet Available



- Electronic claim:
 - 2400 — SERVICE LINE:
 - ✓ LX01: Assigned Number (Depends on claim service line #)
 - ✓ SV201: Service Line Revenue Code 0359
 - ✓ SV202-1: Product/Service ID Qualifier HC
 - ✓ SV202-2: Product/Service ID G1011
 - ✓ SV202-7: Description CDSM (*insert Name of CDSM*)
 - ✓ SV203: Line Item Charge Amount .01
 - ✓ SV204: Unit or Basis for Measurement Code UN
 - ✓ SV205: Service Unit Count 1
 - ✓ DTP01: Date/Time Qualifier 472
 - ✓ DTP02: Date Time Period Format Qualifier D8
 - ✓ DTP03: Date Time Period 20200115
 - Reported as:
 - ✓ LX*#~SV2*0359*HC:G1011:;;;;CDSM (*insert Name of CDSM*)*.01*UN*1~DTP*472*D8*20200115~
- For paper claims, contact the [NUBC](#) for billing instructions to report HCPCS G1011

I N N O V A T I O N I N A C T I O N

46

Reporting the Ordering Professional's NPI on Institutional Claims



- Reporting the ordering professional's NPI on institutional claims:
 - Use the K3 segment with following values in electronic claims:
 - ✓ **AUC** represents the program
 - ✓ **LX** represents the service line followed by the service line number reported in LX01
 - ✓ **DK** represents the Ordering Professional identifier followed by the Ordering Professional's NPI
 - For paper claims, contact the [NUBC](#) for billing instructions for reporting the ordering professional's NPI.
- Ordering Professional NPI is the same for multiple service lines:
 - Each service must be reported as a separate service line in the K301
- Examples:
 - Reporting 1 Ordering Professional NPI:
 - ✓ K3*AUCLX1DK111111111~
 - Reporting 5 Ordering Professional NPIs:
 - ✓ K3*AUCLX1DK111111111LX11DK999999999LX22DK111111111LX433DK22222222~K3*AUCLX444DK444444444~

I N N O V A T I O N I N A C T I O N

47

Multiple Consultations of the Same CDSM



- Report the qualified CDSM G-codes with the same revenue code as the Advanced Diagnostic Imaging service or in the revenue center that ends in "9" for the Advanced Diagnostic Imaging service:
 - Examples:
 - ✓ A CDSM G-code for a CT scan order for the head could be reported with either Revenue Code 0351 (CT SCAN/HEAD), which is the same as the imaging service, or Revenue Code 0359 (CT SCAN/OTHER)
 - ✓ A CDSM G-code on a MRI order for the head could be reported with either Revenue Code 0611 (MRI/BRAIN), which is the same as the imaging service, or 0619 (MRT/OTHER)

I N N O V A T I O N I N A C T I O N

48

Multiple Consultations of the Same CDSM - Same Revenue Code Series



- Option one:
 - 1 line would be reported rolling up all the CDSM queries into 1 revenue code ending in "9" just 1 time with multiple units
 - 0351 test 1 unit
 - 0352 test 1 unit
 - 0359 CDSM 2 units
- Option two:
 - Every specific revenue code that had a CDSM queried, would be reported with the exact same revenue code
 - 0351 test 1 unit
 - 0351 CDSM 1 unit
 - 0352 test 1 unit
 - 0352 CDSM 1 unit

I N N O V A T I O N I N A C T I O N

49

Multiple Consultations of the Same CDSM – Different Revenue Code Series



- Option one:
 - 1 line would be reported rolling up all the CDSM queries into 1 revenue code ending in "9" just 1 unit for each CDSM query
 - 0351 test 1 unit
 - 0359 CDSM 1 unit
 - 0611 test 1 unit
 - 0619 CDSM 1 unit
- Option two:
 - Every specific revenue code that had a CDSM queried, would be reported with the exact same revenue code
 - 0351 test 1 unit
 - 0351 CDSM 1 unit
 - 0611 test 1 unit
 - 0611 CDSM 1 unit

I N N O V A T I O N I N A C T I O N

50

Multiple Consultations of the Same CDSM – Different Revenue Code Series – CPT Codes One With Contrast and One Without Contrast



- Example of 2 separate CPT codes used for the same service where one had with contrast and one had without contrast for the same specific Revenue Code:
 - 0351 test 1 unit with contrast
 - 0351 test 1 unit without contrast
 - 0351 CDSM 2 units
 - 0611 test 1 unit with contrast
 - 0611 test 1 unit without contrast
 - 0611 CDSM 2 units

I N N O V A T I O N I N A C T I O N

51

Claim Example 1



Example 1: An Emergency Room Claim - CT is being rendered to a patient with a suspected or confirmed emergency medical condition, for the MRI there is no suspected or confirmed emergency medical condition.

| 10 BIRTHDATE | 11 SEX | 12 DATE | 13 HR | 14 TYPE | 15 SRC | 16 DHR | 17 STAT | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 ACOT | 30 STATE |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------|---------------|----------------|------------------|------------------------|---------|----|----|----|----|----|----|----|----|----|----|----|---------|----------|
| 31 OCCURRENCE CODE 32 OCCURRENCE DATE 33 OCCURRENCE CODE 34 OCCURRENCE DATE 35 OCCURRENCE CODE 36 OCCURRENCE DATE 37 OCCURRENCE CODE 38 OCCURRENCE DATE 39 OCCURRENCE CODE 40 OCCURRENCE DATE 41 OCCURRENCE CODE 42 OCCURRENCE DATE 43 OCCURRENCE CODE 44 OCCURRENCE DATE 45 OCCURRENCE CODE 46 OCCURRENCE DATE 47 OCCURRENCE CODE 48 OCCURRENCE DATE 49 OCCURRENCE CODE 50 OCCURRENCE DATE 51 OCCURRENCE CODE 52 OCCURRENCE DATE 53 OCCURRENCE CODE 54 OCCURRENCE DATE 55 OCCURRENCE CODE 56 OCCURRENCE DATE 57 OCCURRENCE CODE 58 OCCURRENCE DATE 59 OCCURRENCE CODE 60 OCCURRENCE DATE 61 OCCURRENCE CODE 62 OCCURRENCE DATE 63 OCCURRENCE CODE 64 OCCURRENCE DATE 65 OCCURRENCE CODE 66 OCCURRENCE DATE 67 OCCURRENCE CODE 68 OCCURRENCE DATE 69 OCCURRENCE CODE 70 OCCURRENCE DATE 71 OCCURRENCE CODE 72 OCCURRENCE DATE 73 OCCURRENCE CODE 74 OCCURRENCE DATE 75 OCCURRENCE CODE 76 OCCURRENCE DATE 77 OCCURRENCE CODE 78 OCCURRENCE DATE 79 OCCURRENCE CODE 80 OCCURRENCE DATE 81 OCCURRENCE CODE 82 OCCURRENCE DATE 83 OCCURRENCE CODE 84 OCCURRENCE DATE 85 OCCURRENCE CODE 86 OCCURRENCE DATE 87 OCCURRENCE CODE 88 OCCURRENCE DATE 89 OCCURRENCE CODE 90 OCCURRENCE DATE 91 OCCURRENCE CODE 92 OCCURRENCE DATE 93 OCCURRENCE CODE 94 OCCURRENCE DATE 95 OCCURRENCE CODE 96 OCCURRENCE DATE 97 OCCURRENCE CODE 98 OCCURRENCE DATE 99 OCCURRENCE CODE | | | | | | | | | | | | | | | | | | | | |
| 42 REV. CD | 43 DESCRIPTION | 44 HCPCS / RATE / UNIT | 45 SERV. DATE | 46 SERV. UNITS | 47 TOTAL CHARGES | 48 NON-COVERED CHARGES | 49 | | | | | | | | | | | | | |
| 0352 | DK3876543210 | 74261 MA | 010120 | 1 | 1000 00 | | 1 | | | | | | | | | | | | | |
| 0450 | EMERG ROOM | 99285 | 010120 | 1 | 2000 00 | | 2 | | | | | | | | | | | | | |
| 0612 | DK0123456789 | 72148 ME | 010120 | 1 | 1500 00 | | 3 | | | | | | | | | | | | | |
| 0612 | MRI/SPINE | G10xx | 010120 | 1 | 01 | | 4 | | | | | | | | | | | | | |

CT Ordering professional is not required to consult a clinical decision support mechanism for CT.

CDSM consulted for MRI and order adheres to the criteria.

I N N O V A T I O N I N A C T I O N

52

Claim Example 2

[illegible]

I N N O V A T I O N I N A C T I O N

53

Claim Example 3



| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 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75 | | | | | | | | | | | | 76 | | | | | | | | | | | | 77 | | | | | | | | | | | | 78 | | | | | | | | | | | | 79 | | | | | | | | | | | | 80 | | | | | | | | | | | | 81 | | | | | | | | | | | | 82 | | | | | | | | | | | | 83 | | | | | | | | | | | | 84 | | | | | | | | | | | | 85 | | | | | | | | | | | | 86 | | | | | | | | | | | | 87 | | | | | | | | | | | | 88 | | | | | | | | | | | | 89 | | | | | | | | | | | | 90 | | | | | | | | | | | | 91 | | | | | | | | | | | | 92 | | | | | | | | | | | | 93 | | | | | | | | | | | | 94 | | | | | | | | | | | | 95 | | | | | | | | | | | | 96 | | | | | | | | | | | | 97 | | | | | | | | | | | | 98 | | | | | | | | | | | | 99 | | | | | | | | | | | | 100 | | | | | | | | | | | | 101 | | | | | | | | | | | | 102 | | | | | | | | | | | | 103 | | | | | | | | | | | | 104 | | | | | | | | | | | | 105 | | | | | | | | | | | | 106 | | | | | | | | | | | | 107 | | | | | | | | | | | | 108 | | | | | | | | | | | | 109 | | | | | | | | | | | | 110 | | | | | | | | | | | | 111 | | | | | | | | | | | | 112 | | | | | | | | | | | | 113 | | | | | | | | | | | | 114 | | | | | | | | | | | | 115 | | | | | | | | | | | | 116 | | | | | | | | | | | | 117 | | | | | | | | | | | | 118 | | | | | | | | | | | | 119 | | | | | | | | | | | | 120 | | | | | | | | | | | | 121 | | | | | | | | | | | | 122 | | | | | | | | | | | | 123 | | | | | | | | | | | | 124 | | | | | | | | | | | | 125 | | | | | | | | | | | | 126 | | | | | | | | | | | | 127 | | | | | | | | | | | | 128 | | | | | | | | | | | | 129 | | | | | | | | | | | | 130 | | | | | | | | | | | | 131 | | | | | | | | | | | | 132 | | | | | | | | | | | | 133 | | | | | | | | | | | | 134 | | | | | | | | | | | | 135 | | | | | | | | | | | | 136 | | | | | | | | | | | | 137 | | | | | | | | | | | | 138 | | | | | | | | | | | | 139 | | | | | | | | | | | | 140 | | | | | | | | | | | | 141 | | | | | | | | | | | | 142 | | | | | | | | | | | | 143 | | | | | | | | | | | | 144 | | | | | | | | | | | | 145 | | | | | | | | | | | | 146 | | | | | | | | | | | | 147 | | | | | | | | | | | | 148 | | | | | | | | | | | | 149 | | | | | | | | | | | | 150 | | | | | | | | | | | | 151 | | | | | | | | | | | | 152 | | | | | | | | | | | | 153 | | | | | | | | | | | | 154 | | | | | | | | | | | | 155 | | | | | | | | | | | | 156 | | | | | | | | | | | | 157 | | | | | | | | | | | | 158 | | | | | | | | | | | | 159 | | | | | | | | | | | | 160 | | | | | | | | | | | | 161 | | | | | | | | | | | | 162 | | | | | | | | | | | | 163 | | | | | | | | | | | | 164 | | | | | | | | | | | | 165 | | | | | | | | | | | | 166 | | | | | | | | | | | | 167 | | | | | | | | | | | | 168 | | | | | | | | | | | | 169 | | | | | | | | | | | | 170 | | | | | | | | | | | | 171 | | | | | | | | | | | | 172 | | | | | | | | | | | | 173 | | | | | | | | | | | | 174 | | | | | | | | | | | | 175 | | | | | | | | | | | | 176 | | | | | | | | | | | | 177 | | | | | | | | | | | | 178 | | | | | | | | | | | | 179 | | | | | | | | | | | | 180 | | | | | | | | | | | | 181 | | | | | | | | | | | | 182 | | | | | | | | | | | | 183 | | | | | | | | | | | | 184 | | | | | | | | | | | | 185 | | | | | | | | | | | | 186 | | | | | | | | | | | | 187 | | | | | | | | | | | | 188 | | | | | | | | | | | | 189 | | | | | | | | | | | | 190 | | | | | | | | | | | | 191 | | | | | | | | | | | | 192 | | | | | | | | | | | | 193 | | | | | | | | | | | | 194 | | | | | | | | | | | | 195 | | | | | | | | | | | | 196 | | | | | | | | | | | | 197 | | | | | | | | | | | | 198 | | | | | | | | | | | | 199 | | | | | | | | | | | | 200 | | | | | | | | | | | | 201 | | | | | | | | | | | | 202 | | | | | | | | | | | | 203 | | | | | | | | | | | | 204 | | | | | | | | | | | | 205 | | | | | | | | | | | | 206 | | | | | | | | | | | | 207 | | | | | | | | | | | | 208 | | | | | | | | | | | | 209 | | | | | | | | | | | | 210 | | | | | | | | | | | | 211 | | | | | | | | | | | | 212 | | | | | | | | | | | | 213 | | | | | | | | | | | | 214 | | | | | | | | | | | | 215 | | | | | | | | | | | | 216 | | | | | | | | | | | | 217 | | | | | | | | | | | | 218 | | | | | | | | | | | | 219 | | | | | | | | | | | | 220 | | | | | | | | | | | | 221 | | | | | | | | | | | | 222 | | | | | | | | | | | | 223 | | | | | | | | | | | | 224 | | | | | | | | | | | | 225 | | | | | | | | | | | | 226 | | | | | | | | | | | | 227 | | | | | | | | | | | | 228 | | | | | | | | | | | | 229 | | | | | | | | | | | | 230 | | | | | | | | | | | | 231 | | | | | | | | | | | | 232 | | | | | | | | | | | | 233 | | | | | | | | | | | | 234 | | | | | | | | | | | | 235 | | | | | | | | | | | | 236 | | | | | | | | | | | | 237 | | | | | | | | | | | | 238 | | | | | | | | | | | | 239 | | | | | | | | | | | | 240 | | | | | | | | | | | | 241 | | | | | | | | | | | | 242 | | | | | | | | | | | | 243 | | | | | | | | | | | | 244 | | | | | | | | | | | | 245 | | | | | | | | | | | | 246 | | | | | | | | | | | | 247 | | | | | | | | | | | | 248 | | | | | | | | | | | | 249 | | | | | | | | | | | | 250 | | | | | | | | | | | | 251 | | | | | | | | | | | | 252 | | | | | | | | | | | | 253 | | | | | | | | | | | | 254 | | | | | | | | | | | | 255 | | | | | | | | | | | | 256 | | | | | | | | | | | | 257 | | | | | | | | | | | | 258 | | | | | | | | | | | | 259 | | | | | | | | | | | | 260 | | | | | | | | | | | | 261 | | | | | | | | | | | | 262 | | | | | | | | | | | | 263 | | | | | | | | | | | | 264 | | | | | | | | | | | | 265 | | | | | | | | | | | | 266 | | | | | | | | | | | | 267 | | | | | | | | | | | | 268 | | | | | | | | | | | | 269 | | | | | | | | | | | | 270 | | | | | | | | | | | | 271 | | | | | | | | | | | | 272 | | | | | | | | | | | | 273 | | | | | | | | | | | | 274 | | | | | | | | | | | | 275 | | | | | | | | | | | | 276 | | | | | | | | | | | | 277 | | | | | | | | | | | | 278 | | | | | | | | | | | | 279 | | | | | | | | | | | | 280 | | | | | | | | | | | | 281 | | | | | | | | | | | | 282 | | | | | | | | | | | | 283 | | | | | | | | | | | |

INNOVATION IN ACTION

54

Claim Example 4



| | | | | | | | |
|--------------------|--|--------------------------------|--|--------------------|--|--------------------|--|
| 1 | | 2 | | 3a PAT. CONT. # | | 4 TYPE OF BILL | |
| | | | | 5 MED. RES. # | | 0131 | |
| 5 FED. TAX NO. | | 6 STATEMENT COVERS PERIOD FROM | | 7 THROUGH | | | |
| | | 01012020 | | 01012020 | | | |
| 8 PATIENT NAME | | | | 9 PATIENT ADDRESS | | | |
| | | | | | | | |
| 10 BIRTHDATE | | 11 SEX | | 12 DATE | | 13 HR | |
| | | | | | | | |
| 14 TYPE | | 15 SRC | | 16 DHR | | 17 STAT | |
| | | | | | | | |
| 18 | | 19 | | 20 | | 21 | |
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| 22 | | 23 | | 24 | | 25 | |
| | | | | | | | |
| 26 | | 27 | | 28 | | 29 ACCT | |
| | | | | | | 30 STATE | |
| 31 OCCURRENCE CODE | | 32 OCCURRENCE DATE | | 33 OCCURRENCE CODE | | 34 OCCURRENCE DATE | |
| | | | | | | | |
| 35 | | 36 | | 37 | | 38 | |
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| 39 | | 40 | | 41 | | 42 | |
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| 59 | | 60 | | 61 | | 62 | |
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| 63 | | 64 | | 65 | | 66 | |
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| 123 | | 124 | | 125 | | 126 | |
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| 127 | | 128 | | 129 | | 130 | |
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| 131 | | 132 | | 133 | | 134 | |
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| 135 | | 136 | | 137 | | 138 | |
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| 139 | | 140 | | 141 | | 142 | |
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| 143 | | 144 | | 145 | | 146 | |
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| 151 | | 152 | | 153 | | 154 | |
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| 171 | | 172 | | 173 | | 174 | |
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| 175 | | 176 | | 177 | | 178 | |
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| 255 | | 256 | | 257 | | 258 | |
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| 259 | | 260 | | 261 | | 262 | |
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| 291 | | 292 | | 293 | | 294 | |
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| 307 | | 308 | | 309 | | 310 | |
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| 311 | | 312 | | 313 | | 314 | |
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| 327 | | 328 | | 329 | | 330 | |
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| 331 | | 332 | | 333 | | 334 | |
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| 335 | | 336 | | 337 | | 338 | |
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| 339 | | 340 | | 341 | | 342 | |
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| 343 | | 344 | | 345 | | 346 | |
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| 347 | | 348 | | 349 | | 350 | |
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| 351 | | 352 | | 353 | | 354 | |
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| 355 | | 356 | | 357 | | 358 | |
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| 359 | | 360 | | 361 | | 362 | |
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| 363 | | 364 | | 365 | | 366 | |
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| 367 | | 368 | | 369 | | 370 | |
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| 371 | | 372 | | 373 | | 374 | |
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| 375 | | 376 | | 377 | | 378 | |
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| 379 | | 380 | | 381 | | 382 | |
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| 383 | | 384 | | 385 | | 386 | |
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| 387 | | 388 | | 389 | | 390 | |
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| 391 | | 392 | | 393 | | 394 | |
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| 395 | | 396 | | 397 | | 398 | |
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| 399 | | 400 | | 401 | | 402 | |
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| 403 | | 404 | | 405 | | 406 | |
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| 407 | | 408 | | 409 | | 410 | |
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| 411 | | 412 | | 413 | | 414 | |
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| 415 | | 416 | | 417 | | 418 | |
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| 419 | | 420 | | 421 | | 422 | |
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| 423 | | 424 | | 425 | | 426 | |
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| 427 | | 428 | | 429 | | 430 | |
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| 431 | | 432 | | 433 | | 434 | |
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| 435 | | 436 | | 437 | | 438 | |
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| 439 | | 440 | | 441 | | 442 | |
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| 443 | | 444 | | 445 | | 446 | |
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| 447 | | 448 | | 449 | | 450 | |
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| 451 | | 452 | | 453 | | 454 | |
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| 467 | | 468 | | 469 | | 470 | |
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| 471 | | 472 | | 473 | | 474 | |
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| 483 | | 484 | | 485 | | 486 | |
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| 487 | | 488 | | 489 | | 490 | |
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| 491 | | 492 | | 493 | | 494 | |
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| 495 | | 496 | | 497 | | 498 | |
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| 503 | | 504 | | 505 | | 506 | |
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| 507 | | 508 | | 509 | | 510 | |
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| 511 | | 512 | | 513 | | 514 | |
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Claim Example 6



| | | | | | | | |
|----------------|--|-------------------|--|-----------------|--|----------------------------------------------------------|--|
| 1 | | 2 | | 3a PAT. CNTL. # | | 4 TYPE OF BILL | |
| | | | | 3b MED. REC. # | | 0131 | |
| 5 | | 6 | | 7 | | | |
| 9 PATIENT NAME | | 9 PATIENT ADDRESS | | 5 FED. TAX NO. | | 6 STATEMENT COVERS PERIOD FROM 01012020 THROUGH 01012020 | |
| 10 BIRTHDATE | | 11 SEX | | 12 DATE | | 13 HR. 14 TYPE 15 SRC | |
| 16 DHR | | 17 STAT | | 18 | | 19 | |
| 20 | | 21 | | 22 | | 23 | |
| 24 | | 25 | | 26 | | 27 | |
| 28 | | 29 | | 30 | | 31 | |
| 32 | | 33 | | 34 | | 35 | |
| 36 | | 37 | | 38 | | 39 | |
| 40 | | 41 | | 42 | | 43 | |
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Claim Example 10



Example 10: An Outpatient Hospital Claim - Multiple services ordered same Ordering provider, different CDSM.

Claim Example 1

CDSM Modifier - Multiple services ordered same Ordering Provider, different CDSM.

| 42 REV. CD. | 43 DESCRIPTION | 44 HCPCS / RATE | 45 ME | 46 SERV. DATE | 46 SERV. UNITS | 47 TOTAL CHARGES | 48 NON-COVERED CHARGES | 49 |
|-------------|----------------|-----------------|-------|---------------|----------------|------------------|------------------------|----|
| 0351 | DK9876543210 | 70450 | ME | 010120 | 1 | 1000 00 | | |
| 0359 | CT SCAN/OTHER | G10xb | | 010120 | 1 | 01 | | |
| 0612 | DK9876543210 | 72148 | ME | 010120 | 1 | 1500 00 | | |
| 0619 | MRT OTHER | G10xa | | 010120 | 1 | 01 | | |

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Claim Example 11



Example 11: An Outpatient Hospital Claim - Multiple services ordered different Ordering provider, different CDSMs.

CDSM Modifier - Multiple services ordered different Ordering Provider, different CDSMs.

| 42 REV. CD. | 43 DESCRIPTION | 44 HCPCS / RATE | 45 ME | 46 SERV. DATE | 46 SERV. UNITS | 47 TOTAL CHARGES | 48 NON-COVERED CHARGES | 49 |
|-------------|----------------|-----------------|-------|---------------|----------------|------------------|------------------------|----|
| 0351 | DK9876543210 | 70450 | ME | 010120 | 1 | 1000 00 | | |
| 0359 | CT SCAN/OTHER | G10xa | | 010120 | 1 | 01 | | |
| 0612 | DK0123456789 | 72148 | ME | 010120 | 1 | 1500 00 | | |
| 0619 | MRT OTHER | G10xb | | 010120 | 1 | 01 | | |

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Ultimate Goal for 2022



- Full program implementation is expected January 1, 2022
- At that time, information regarding the ordering professional's consultation with CDSM, or exception to such consultation, must be appended to the furnishing professional's claim in order for that claim to be paid
- Ultimately, PAMA requires that the program results in prior authorization for ordering professionals that are identified as having outlier-ordering patterns
- Before the prior authorization component of this program begins, there will be notice and comment rulemaking to develop the outlier methodology
- Subsequent Change Requests (CRs) will follow at a later date that will continue AUC program implementation

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Any Questions?



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Thank You for Attending!



- Please visit our [Calendar of Events](#) for upcoming webinars
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