

Best Practice Advisory

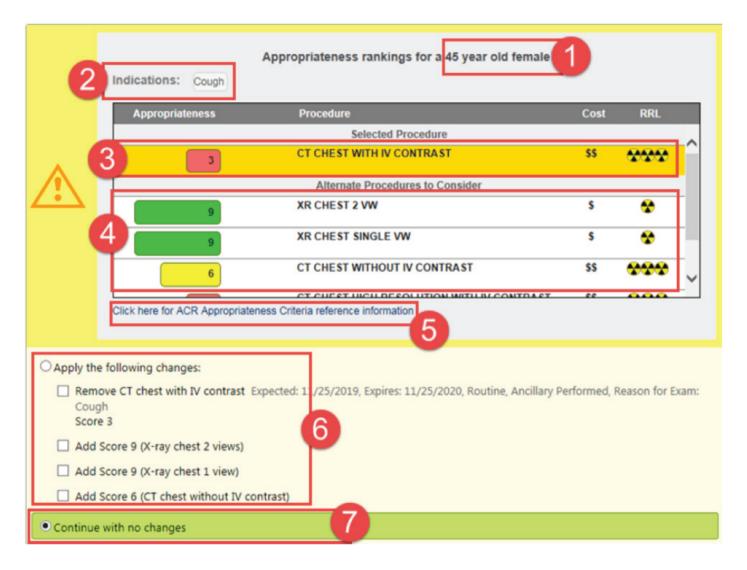
TIP SHEET



Appropriate Use Criteria (AUC) for Imaging

GUIDELINES

A **Best Practice Advisory (BPA)** will fire if the selected indication and procedure combination yields a marginally appropriate or low appropriateness score.



Informational Section

- 1. Patient age and gender used for your decision score
- 2. Indication you chose
- 3. Original procedure selected with its appropriateness score
- 4. Alternative procedures for your consideration, displayed by score from highest to lowest
- 5. Hyperlink navigates to literature explaining the rationale behind the appropriate use criteria

Actionable Section

- 6. If appropriate, Remove your original order and Add one of the suggested procedures.
- 7. By default, no alternate exams are selected and you may Continue with no changes to the original procedure.

In adherence to the Centers for Medicare & Medicaid Services (CMS) Appropriate Use Criteria (AUC) program, Erlanger Health System will begin implementing a one-year educational and operations testing period beginning January 1, 2020. This period will provide you, the provider, as well as our team time to conform to the new CMS requirement that will begin January 1, 2021 for those under Medicare Part B.

When ordering advanced imaging services covered under the AUC program, ordering professionals will be required to consult a qualified Clinical Decision Support Mechanism (CDSM) to provide a determination of whether the order adheres to AUC, or if the AUC consulted, was not applicable.

Examples of services covered under the AUC program include:

- Computed Tomography
- Positron emission tomography
- Nuclear medicine
- Magnetic resonance imaging

Exceptions to the requirement include:

- The ordering professional having a significant hardship, such as
 - Insufficient Internet access
 - EHR or CDSM vendor issues
 - Extreme or uncontrollable circumstances
- Situations in which the patient has an emergency medical condition
- An applicable imaging service ordered for an inpatient and for which payment is made under Part A.

Please note there are new fields within the Outpatient Imaging Physician Order Form that you will need to complete prior to ordering imaging for patients with Medicare Part B.

Orders may be submitted two ways:

Through Epic via the EpicCare Link

- OR -

Self-register for Open Access - https://openaccess.careselect.org/registration

The Centers for Medicare and Medicaid Services will begin rejecting claims, beginning January 1, 2021, that do not contain the AUC consultation code or misreport AUC information on non-imaging claims.

For more information, including the appropriate use criteria for advanced diagnostic imaging resources, visit **erlanger.org/imaging**.







Ordering Advanced Imaging Studies

Targeted Users: EpicCare Link Ordering Users

As of 1/1/20, CMS guidelines require all advanced imaging studies to consult a gualified Clinical Decision Support Mechanism (CDSM). A CDSM is an interactive, electronic tool for use by clinicians that communicates Appropriate Use Criteria (AUC) information to the user and assists them in making the most appropriate treatment decision for a patient's specific clinical condition during the patient's workup.

EpicCare Link interfaces with National Decision Support Company CareSelect to provide these tools. Use this tip sheet to walk you through filling out and interacting with AUC information.

Ordering Screen—Reason for Exam

You will see the Reason for Exam section for any advanced imaging exam requiring an AUC score.



- 1. To fill out the **Reason for Exam** indication, you may either:
 - a. Expand the section(s) of Indications for Exam and select one of the indication checkboxes.

▼ Common Indications for Exam		
Aortic disease, nontraumatic	Aortic dissection, post repair,	Chest wall pain
Cough	Dyspnea, chronic	PE suspected, high pretest pr
PE suspected, intermediate pr	PE suspected, low pretest prob	☐ Pleural effusion
Pneumonia	Respiratory illness, acute (Ag	☐ Shortness of breath
Oncology Indications for Exam		
Trauma Indications for Exam		

b. Use the magnifying lens to open a search dialogue • Reason for exam: Search for a matching indication in the search box, or scroll to view all available, and then click an indication to select it.





- c. Searching tips:
 - Use single word searches
 - Don't include punctuation
 - Rely on the least specific term
 - Synonyms are available, including: ICD-10 codes, medical acronyms, and anatomic site or general condition terms ("neoplasm," "mass," "swelling," or "pain")
- d. If no available indications match, search for and use the **No Indication** Found-To Be Reviewed by Radiology indication.

TIP SHEET

DOther Reasons		
✓ No Indication Found-To		
Be Reviewed by		
Radiology		

2. Additional free text information should be entered in the Pertinent Clinical Info question.



- 3. Fill out the rest of the order as per normal. When you sign your order, the system automatically sends information to CareSelect for scoring.
 - a. If the imaging exam is appropriate or unscored for the selected indication, no further action is needed. The order will be signed and shows in Erlanger's workqueues for scheduling.
 - b. If the imaging exam is marginally appropriate or of low utility for the selected indication, you will receive a Best Practice Advisory (BPA) to review.
- 4. Review the BPA (see informational page #3) and select the appropriate follow-up action.
 - a. If you've decided to keep the original exam, you will continue with signing the exam as per normal.
 - b. If you've decided to order an alternate exam, you will need to complete any required components of the new procedure and then sign the order.
 - Order priority and some order questions will be carried forward
 - Some order questions and comments will need to be re-answered
 - Expected date, expiration date, order class, and order status do NOT pull forward. These will need to be updated if the default values were changed on the original order.
 - c. If there are no alternatives provided for a low-scoring exam, it is recommended to avoid imaging for the patient or to seek a more appropriate Reason for Exam.