

Qualified Clinical Decision Support Mechanisms as of June 2018

AIM Specialty Health ProviderPortal®*

Applied Pathways CURION™ Platform

Cranberry Peak ezCDS

eviCore healthcare's Clinical Decision Support Mechanism

MedCurrent OrderWise™

Medicalis Clinical Decision Support Mechanism

National Decision Support Company CareSelect™*

National Imaging Associates RadMD

Sage Health Management Solutions Inc. RadWise®

Stanson Health's Stanson CDS

Test Appropriate CDSM*

Clinical Decision Support Mechanisms with Preliminary Qualification as of June 2018

Cerner CDS mechanism

Evinance Decision Support

Flying Aces Speed of Care Decision Support

Infinx CDSM

LogicNets' Decision Engines

New Century Health's CarePro

Reliant Medical Group CDSM

*Free Tool Available



Clinical Decision Support

Preparing for appropriate imaging and accountability through the use of clinical decision support tools and close collaboration.

Beginning January 1, 2020, the Centers for Medicare and Medicaid Services (CMS) will begin requiring all Medicare Part B advanced diagnostic imaging requests to carry a code signifying that the ordering medical professional consulted a qualified Clinical Decision Support mechanism (CDSM). The imaging providers must also report the CDSM consultation on their Medicare claims.²

Advanced Radiology is committed to being a trusted partner in caring for your patients. We take seriously our role in assuring a smooth transition to the use of CDSM, for ourselves and our referring practices. With that responsibility in mind, we will be providing valuable monthly information, beginning with this issue, that will help you understand CDS and guide you through the process of selecting a clinical decision support mechanism (CDSM).

integrating it into your practice, and using it to enhance your patient/doctor relationships. Beginning with this issue, we will provide answers to key questions about the upcoming transition to CDS, including:

- What is CDS?
- What is the timeline for its implementation?
- How will my practice benefit from using CDS?
- What steps should I take to transition my practice to CDS?
- Where can I find resources to help my practice with implementation?
- How should I involve my patients in the use of CDS?

"In the drive to reduce inappropriate imaging and deliver better care at lower costs, it is imperative for physicians who order imaging and for radiologists to forge a strong, collaborative partnership. Avoiding unnecessary care begins by following evidence-based recommendations for which tests and procedures are most appropriate for each patient's clinical situation. Such recommendations can be found in published guidelines or embedded in clinical decision support (CDS) tools. Avoiding unnecessary care continues with a consultative partnership with radiologists who can help us determine the right test for our patients at the right time. As members of the multi-disciplinary care team, radiologists are integral to the appropriate imaging decision-making process."¹

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1. Jason L. Hom, MD, How (and Why) to Get Your Colleagues on Board with CDS, <https://acrbulletin.org/acr-bulletin-may-2016/515-board-cds-radiology>. Accessed March 2019; 2. MLM Factsheet, December 2018; 3. Haines, G. Rebecca, MSM, CAE; Sowers, Linda G. Clinical Decision Support and Diagnostic Imaging, Steps Forward, American Medical Association, 2017.

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What is Clinical Decision Support (CDS)?

Clinical Decision Support (CDS) enables clinicians to demonstrate to patients and payers that they are ordering appropriate imaging tests. CDS employs technology and appropriate use criteria (AUC) to promote sound clinical judgment and patient safety by providing immediate access to risk factors that support shared decision-making, such as radiation dose, cost information and more.

Clinical Decision Support Mechanisms (CDSMs) are decision support tools that empower the ordering clinician—in collaboration with radiologists—to choose the right imaging test at the right time and for the right reasons.³

Well-designed CDSMs that are embedded in electronic medical record (EMR) systems can play a valuable role in decision-making at the point of care. Several studies have already demonstrated their value in reducing

inappropriate imaging. Avoiding unnecessary care begins by following evidence-based recommendations for which tests and procedures are most appropriate for each patient's clinical situation.¹

Under the Protecting Access to Medicare Act (PAMA), An ordering provider must consult AUC for every Medicare Part B advanced imaging order (including CT, MRI, Nuclear Medicine and PET scans), and include proof of consultation with each order. Proof of consultation consists of a code generated by the CDSM. 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.

Furnishing providers like Advanced Radiology, must document that code in order to receive reimbursement.

Appropriateness	Procedure	Cost	RRL
8	CT, head, w iv contrast	\$\$	⚠️⚠️⚠️
8	CT, angiography, head-neck, w iv contrast	\$\$\$\$	⚠️⚠️⚠️
8	CT, head, wo iv contrast	\$\$	⚠️⚠️⚠️
8	MR, angiography, head-neck, wo iv contrast	\$\$\$\$	⚠️⚠️⚠️
8	MR, angiography, head-neck, wo/w iv contrast	\$\$\$\$	⚠️⚠️⚠️
8	MR, head, wo iv contrast	\$\$\$	⚠️⚠️⚠️

Sample screen from ACRSelect, a CDSM tool developed by the National Decision Support Company in conjunction with the American College of Radiology (ACR).

What is the timeline for implementation of CDS?



July 2018 to December 2019: Voluntary Reporting Period

The voluntary reporting period allows time for organizations to verify the accuracy of reported claims data to ensure payment in preparation for the January 2020 start date.



January 2020 to December 2020: Educational and Operations Testing

Requirements for consultation and data submission are scheduled to begin with a one-year educational and testing period. During the first year of the program, consultation is required; however, CMS will not impose penalties on furnishing providers, nor use the data to determine outliers.



January 2021: Reimbursement Denials Begin

Beginning January 1, 2021, CMS will only pay claims that include the necessary evidence of AUC consultation. If you order Medicare Part B advanced diagnostic imaging services (MR, CT, Nuclear Medicine, or PET), you must consult Appropriate Use Criteria (AUC) through a qualified Clinical Decision Support Mechanism (CDSM). You must also provide the information to furnishing professionals and facilities. They in turn must report AUC consultation information on their Medicare claims.



January 2023 or 2024: Outliers Identified

Up to 5% of ordering providers will be identified as outliers and required to obtain per-authorization when ordering advanced diagnostic imaging services for their Medicare patients.