

IMPORTANT CDS MILESTONES:



July 2018 - December 2019: Voluntary Reporting Period



January 2020 - December 2020: Educational and Operations Testing



January 2021: Reimbursement Denials Begin



January 2023 or 2024: Outliers Identified



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1. AMA Steps Forward: Clinical Decision Support and Diagnostic Imaging, 2017.

2. Moyer, A and Salovey, P. Patient participation in treatment decision making and the psychological consequences of breast cancer surgery. Womens Health. 1998, Summer; 4(2): 103-16.

3. Street, RL Jr. and Voigt, B. Patient participation in deciding breast cancer treatment and subsequent quality of life. Med Decis Making. 1997, Jul-Sep; 17(3): 298-306. DOI: 10.1177/0272989X9701700306

4. Haynes, RB, McKibbon, KA and Kanani, R. Systematic review of randomised trials of interventions to assist patients to follow prescriptions for medications. Lancet. 1996, August 10; 348(9024): 383-6. DOI: 10.1016/S0140-6736(96)01073-2

5. Kraal, JJ, Van den Akker-Van Marle, ME, Abu-Hanna, A, Stut, W, Peek, N and Kemps, HM. Clinical and cost-effectiveness of home-based cardiac rehabilitation compared to conventional, centre-based cardiac rehabilitation: results of the FIT@Home study. Eur J Prev Cardiol. 2017; 24(12): 1260-73. DOI: 10.1177/2047487317710803

6. The Patient-Centered CDS Learning Network, <https://pccds-lrn.org/node/276>, Accessed 8/27/19.

7. Say, R. Shared Decision Making. Patient Involvement in Clinical Practice BMJ Quality & Safety 2002; 11:297-298.

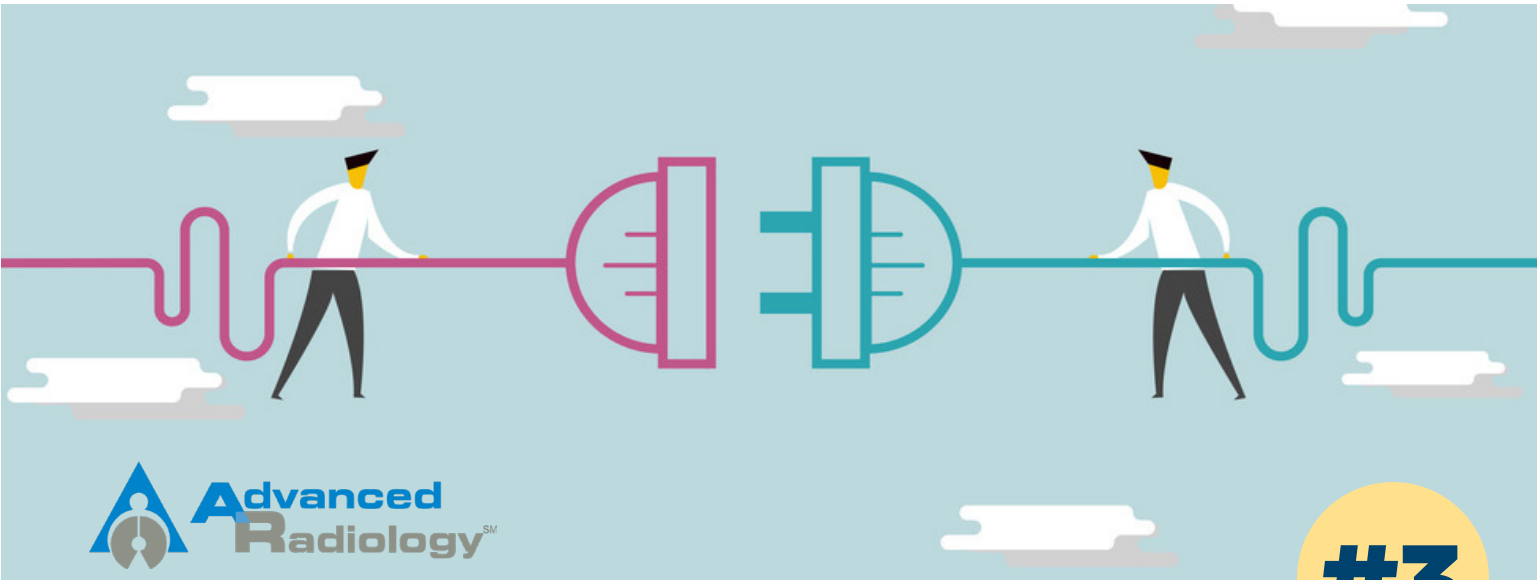
8. American Medical Association, Steps Forward. Clinical Decision Support and Diagnostic Imaging, 2017.

9. <https://healthit.ahrq.gov/ahrq-funded-projects/current-health-it-priorities/clinical-decision-support-cds/chapter-1-approaching-clinical-decision/section-2-overview-cds-five-rights>, Accessed 8/27/19.

10. Centers for Medicare and Medicaid Services, eHealthUniversity, CLINICAL DECISION SUPPORT: More Than Just 'Alerts' Tipsheet, September 2014.

11. American Medical Association, AMA Wire, November 10, 2016.

12. <https://www.healthleadersmedia.com/innovation/5-ways-health-systems-can-use-clinical-decision-support-tool-provide-better-care>. Accessed 8/27/19.



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 the Educational and Operations Testing period for Clinical Decision Support (CDS). Ordering providers will be asked to include a code on all Medicare Part B advanced diagnostic imaging requests signifying that they have consulted a qualified Clinical Decision Support Mechanism (CDSM). The imaging providers must also report the CDSM consultation on their Medicare claims.

When the testing period ends and reimbursement denials begin (currently scheduled for January 1, 2021), a clinical decision consult must be documented via a CMS-qualified clinical decision support mechanism. Without a documented consult, rendering providers will not receive Medicare

payment for the procedure, and may begin returning or denying orders from non-compliant ordering providers.

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 CDS, for our referring practices and ourselves. With that responsibility in mind, we will continue to provide valuable information to help you understand CDS and guide you through the process of selecting a CDSM, integrating it into your practice, and using it to enhance your patient/doctor relationships.

In this issue, we provide examples of how CDS can improve patient care and relationships...

“You may encounter a patient who insists upon a certain imaging study that is of questionable utility. CDS scores indicating a test is not likely appropriate should trigger a discussion with the patient. To assist you in your patient discussions, CDS tools include literature reviews with evidence supporting the given score.

Training yourself and your care team members, including nurses, nurse practitioners and medical assistants, on how the CDS tool arrives at a particular appropriateness score will empower everyone to explain to the patient what the decision means and why it was made.”

Empowering Patients

Patient participation is a complex concept that arose from the widespread consumer movement of the 1960s. The birth of healthcare “consumerism” affirmed the patient’s right to safety, the right to be informed, the right to choose, and the right to be heard. Patient participation is increasingly recognized as crucial to the redesign of healthcare processes and is advocated as a means to improve patient safety. The concept has been successfully applied to various areas of patient care, such as decision-making and the management of chronic diseases.

Patient-related factors, such as acceptance of the new patient role, lack of medical knowledge, lack of confidence, comorbidity, and various sociodemographic parameters, all affect willingness to participate in the health care process. Among health care professionals, the acceptance and promotion of patient participation are influenced by other issues, including the desire to maintain control, lack of time, personal beliefs, type of illness, and training in patient-caregiver relationships.²

Challenges and Benefits of Patient Involvement

Overuse and inappropriate use of many imaging tests may cause harm by unnecessarily exposing patients to excess radiation; they can also influence patient outcomes when incidental findings are present, and can increase health care costs. Ordering appropriate imaging tests—particularly when facing time pressure constraints and when the evidence to support the decision is not easily accessed—can be challenging for many physicians.

Given a widely recognized need for improved care quality, safety, and value, no other stakeholder has more at risk than the patient. Empowering patients to control, or at least be involved in aspects of their care, goes a long way to improving care quality. Research findings support this: compared with patients that do not, patients who participate in medical decisions tend to report more satisfaction with their care², enjoy a better quality of life³, and are adherent to recommendations⁴ with greater satisfaction.⁵

Physicians need appropriate tools to help patients understand the rationale for ordering,



delaying, or not performing a test. Clinical Decision Support (CDS) harnesses technology to promote sound clinical judgment and provides immediate access to radiation dose, cost information and other risks (false positives or incidental findings) that support shared decision making.

Providing patients with evidence and explanations of Clinical Decision Support can directly involve individual patients in their health-related decisions and actions by leveraging reliable and timely evidence from research findings.⁶ Attractive to patients, policy makers and clinicians alike, research has suggested Involving patients in making decisions about their medical care may go further than enhancing autonomy by improving outcomes, decreasing treatment costs, and increasing compliance and satisfaction.⁷

CDS tools for imaging empower the ordering clinician—in collaboration with radiologists—to choose the correct imaging test at the right time and for the right reasons.⁸

Patient’s “Rights”

The “CDS Five Rights” concept⁹ provides a best practice framework that may be helpful when considering CDS options appropriate for your practice. The CDS Five Rights concept states that in order to provide benefits, CDS interventions must provide:

- #1 the right information**
evidence-based, suitable to guide action, pertinent to the circumstance
- #2 to the right person**
considering all care team members: clinicians, patients, and caretakers
- #3 in the right format**
an alert, order set, or reference information to answer a clinical question
- #4 through the right channel**
an EMR, personal health record, the Internet or a mobile device
- #5 at the right time**
at a time of decision, action, or need

Effective CDS must be relevant to those who can act on the information, in a way that supports completion of the right action.¹⁰

We encourage our referring physicians to actively discuss imaging appropriateness with patients and begin making decisions about imaging orders together. Patients are more likely to accept and undergo a test once they understand why it is recommended. Once you gain familiarity with CDS through your use of a CDSM, you will feel more comfortable discussing appropriate imaging with your patients.¹¹

CDS Resources and Information

Helpful information on clinical decision support education, implementation, and training are abundant and available free of charge. Here are just a few sources:

About Clinical Decision Support:

The American College of Radiology
<https://www.acr.org/Clinical-Resources/Clinical-Decision-Support>

Introducing Your Practice to CDS:

The Office of the National Coordinator for Health Information Technology (ONC)
<https://www.healthit.gov/topic/safety/clinical-decision-support>

American Medical Association EdHub™
<https://edhub.ama-assn.org/collections/5589/clinical-decision-support>

The Healthcare Information and Management Systems Society (HIMSS)
<https://www.himss.org/library/clinical-decision-support>

A CASE STUDY IN PATIENT ENGAGEMENT

HealthLeaders spoke to two health systems who shared their experiences using a CDSM: Louis Krenn, MD, chief medical information officer and family physician at CoxHealth in Springfield, Missouri, and Ron Elfenbein, MD, an emergency physician at Anne Arundel Medical Center in Annapolis, Maryland.

Both Krenn and Elfenbein say the tools have changed the way they interact with patients. Patients often search their symptoms or conditions online and arrive in the office or ED convinced they know what’s wrong with them, the physicians say.

Both doctors agree that sharing images or information on a screen that validates their professional diagnosis is sometimes more convincing to today’s patients. Krenn says the clinical decision support mechanism engages patients in the process and provides reassurance to the patients that they have been diagnosed correctly.¹²