



THE CMS APPROPRIATE USE CRITERIA PROGRAM

The provider's handbook

PART 1

Why CMS created the Appropriate Use Criteria Program



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If you traced the origin of the Medicare Appropriate Use Criteria (AUC) Program, you'd encounter hundreds of trends, figures, reports, editorials, and assessments of past clinical decision support initiatives. Their focus spans patient safety, the affordability and accessibility of care, the surge in technology, and more. But, if you unpacked each trend and figure and unraveled each report, you'd uncover one common thread--the overuse of advanced imaging.

Often publicized, clinically inappropriate imaging is widespread, and it's especially

acute within the Medicare population. For every 100 Medicare beneficiaries 65 years or older, more than 50 CT scans, 50 ultrasonography scans, 15 MRI scans, and 10 positron emission tomography scans, or 125 examinations total, are performed annually. CMS estimates that approximately one third of these may be unnecessary.

As central as overutilization is to the program's formation, several supporting storylines are also worth knowing to better understand the importance of the program.

How the program benefits the health care system



Protects patients from unnecessary radiation exposure

Of the 37 diagnostic tests identified by the American College of Physicians as potentially overused, 13 of these are related to advanced imaging. As the guardians of patients' health, providers' concerns about overutilization make sense. Inappropriate imaging is associated with serious medical risks, including harmful radiation exposure (CT scans are responsible for between 2 and 5 percent of all cancers in the U.S.), "incidentalomas" that lead to more unnecessary care, and notable patient anxiety.

The elderly, including those under the Medicare fee-for-service umbrella, which the CMS program targets, are especially sensitive to these risks.

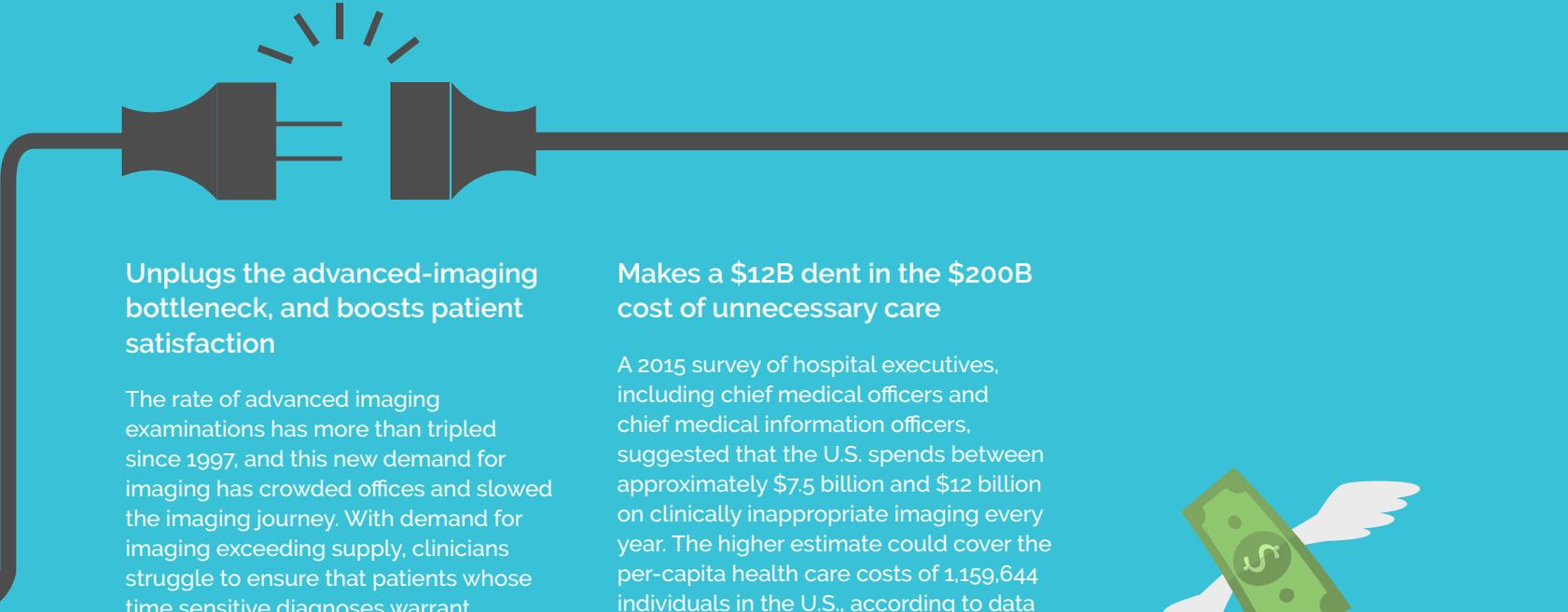
Equips clinicians with reliable AUC that target high-volume services

Clinicians and administrators have lauded Choosing Wisely, the American Board of Internal Medicine

Foundation's campaign to spur conversations between providers and patients about unnecessary care. But five years in, its limits are becoming clearer.

A Health Affairs study reported that despite awareness campaigns, only 25 percent of practices knew about the campaign in 2017, up a meager four points since 2014. But the program can disappoint even when physicians are aware of and rely on it. Choosing Wisely offers recommendations on overutilized low-value practices, but the recommendations' authors, mainly medical societies, lacked a consistent development approach, resulting in guidelines that may not focus on the most overutilized low-value care, including advanced imaging.





Unplugs the advanced-imaging bottleneck, and boosts patient satisfaction

The rate of advanced imaging examinations has more than tripled since 1997, and this new demand for imaging has crowded offices and slowed the imaging journey. With demand for imaging exceeding supply, clinicians struggle to ensure that patients whose time sensitive diagnoses warrant examination are given highest priority

The harm of delayed care due to bottlenecks is even more acute in safety net settings and in rural America, where resources are limited but the incidence of chronic diseases, like cancer, tend to be higher.*

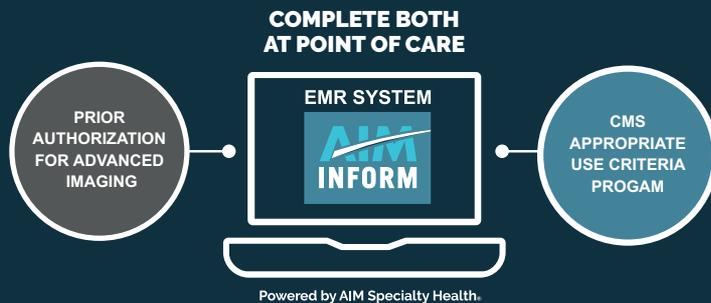
Makes a \$12B dent in the \$200B cost of unnecessary care

A 2015 survey of hospital executives, including chief medical officers and chief medical information officers, suggested that the U.S. spends between approximately \$7.5 billion and \$12 billion on clinically inappropriate imaging every year. The higher estimate could cover the per-capita health care costs of 1,159,644 individuals in the U.S., according to data from CMS, and within six years, exceed the \$69 billion CVS paid to acquire Aetna, Inc.



For more than 25 years, AIM Specialty Health has helped ensure that advanced imaging aligns with medical evidence. Through our AIM Inform solution, a CMS qCDSM, we now help health systems and other provider organizations comply with the CMS AUC program and commercial payer preauthorization within the EMR systems they use every day.

*Source: Choosing Wisely™ Turns 5, With Mixed Results - Medscape - Oct 25, 2017



Integrated into EMR systems, AIM Inform allows providers to complete prior authorization for advanced imaging and comply with the CMS Appropriate Use Criteria Program from a single source.

AIM Inform eliminates the need for providers to use separate systems to fulfill prior authorization and CMS program requirements.

To learn more:

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