



## AMERICAN SOCIETY FOR GASTROINTESTINAL ENDOSCOPY

**Patient access to care is threatened by policies that create barriers to care, including those that arbitrarily cut Medicare payments to providers to achieve savings targets. Payment policies must reflect the cost of providing care specific to site of service. Congress must take steps to preserve patient access to care now and in the future.**

### MEDICARE'S APPROPRIATE USE CRITERIA PROGRAM — HALT AND REVISIT

#### ISSUE OVERVIEW:

The Protecting Access to Medicare Act of 2014 establishes a program requiring clinician adherence to Appropriate Use Criteria (AUC) for advanced imaging services. The number of clinicians affected by the program is vast, crossing almost every medical specialty, including gastroenterology, and primary care. CMS has proposed January 1, 2019 as the Program's effective date.

The AUC Program is independent of the Quality Payment Program (QPP) and its necessity, along with the cost and administrative burden it will impose upon clinicians, is questionable. AUC consultation is inherent within the Merit-Based Incentive Payment System (MIPS) and alternative payment models (APMs), both which hold clinicians accountable for quality and patient outcomes, as well as for resource use, including the use of diagnostic tests and procedures.

#### LEGISLATIVE ASK:

**Support legislative action to halt and revisit the necessity and value of the Medicare AUC Program for advanced diagnostic imaging.**

#### Why the AUC Program is more regulatory red tape:

- Every health care professional who orders an advanced diagnostic imaging test must consult AUC using a clinical decision support mechanism (CDSM) that has been qualified by CMS.
- Every health care professional who furnishes an advanced diagnostic imaging test must report on the consulting of AUC by the ordering professional.
- CMS is proposing a combination of G-codes and HCPCS modifiers that furnishing professionals will need to report for every single advanced diagnostic imaging test included on a Medicare claim form. Furnishing professionals who do not report a G-code for AUC consultation will not be paid for the advanced diagnostic imaging test provided.
- The AUC Program sets up a complex exchange of communication of AUC consultation information between the ordering professional to the furnishing professional.
- Nearly 60 percent of respondents to a recent study conducted by the Association for Medical Imaging Management estimate it will cost \$75,000 or more to implement a CDSM.