Physicians are seeking relief from regulations and mandates that drive up the cost of health care and impede the delivery of care without measurable benefits to patients. In fact, simplifying the health care system by eliminating regulatory burdens allows physicians to spend time providing care to patients rather than on administrative tasks.

**MEDICARE’S APPROPRIATE USE CRITERIA PROGRAM**

**ISSUE OVERVIEW:** The Protecting Access to Medicare Act (PAMA) of 2014 establishes a program promoting the use of 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 established January 1, 2020 as the Program’s effective start date.

The AUC Program is independent of the Quality Payment Program (QPP) and its necessity is questionable given the cost and administrative burden it will impose upon clinicians. 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.

**LEGISLATIVE ASK:**

ASGE seeks modification to the law to afford clinicians maximum flexibility in the use of AUC in the least administratively burdensome manner possible while meeting the intent of PAMA to ensure appropriate imaging through enhanced education of ordering professionals and support for clinicians in achieving high-value performance in MIPS or APMs.

Why the AUC Program Imposes a Regulatory Burden:

— The Medicare AUC Program applies to every clinician who orders or furnishes an advanced diagnostic imaging test, with exceptions for emergency and inpatient services.

— A 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. CMS has estimated that 579,687 ordering professionals will be subject to this program.

— A health care professional who furnishes an advanced diagnostic imaging test must report on the consulting of AUC by the ordering professional. Furnishing professionals who do not report the consultation of AUC by the ordering professional will not be paid for the test provided.

— The AUC Program sets up a complex exchange of communication of AUC consultation information between the ordering professional to the furnishing professional.

— There is no mechanism to link the consultation of AUC with quality of care and patient outcomes.