

Imaging Appropriate Use Claims Requirement 6.08

Release(s)

6.08 pp 42

Overview

Within Order Management (OM) and Medical Practice Management (MPM) providers have the ability to perform an imaging appropriateness check through integration with the National Decision Support Company (NDSC). Imaging appropriateness scores can also be entered manually through the Scheduling to Order link in Community Wide Scheduling (CWS) and in Imaging and Therapeutic Services (ITS). Orders entered outside of the MEDITECH EHR may utilize a different Clinical Decision Support Mechanism (CDSM). This setup guide outlines the workflows for vendor g-codes, adherence and exception modifiers, and covers the associated MIS and Revenue Cycle Management setup.

MEDITECH Applications

- Community Wide Scheduling (CWS)
- Emergency Department Management (EDM)
- Medical Practice Management (MPM)
- Management Information Systems (MIS)
- Imaging and Therapeutic Services (ITS)
- Order Management (OM)
- Revenue Cycle Management (RCG)

MEDITECH's Recommended Workflow

Procedure adheres to Appropriate Use Criteria

The provider accesses the Orders button and places an AUC-eligible procedure. Upon saving, the NDSC User Interface (UI) launches. The response to the *reason for exam* field seeds the indication list and the provider selects the clinical indication.

Clinical > Emergency Department Tracker > Order Management > Orders > National Decision Support Company User Interface

The screenshot displays the Meditech AUC Viewer interface. At the top, patient information is shown: WATERS, DORIS, 75, Female, 10/22/1944, U#: D000005775, A#: E00000015631. Below this, the ordering provider is Meditech, Joseph, and the location is ED. The main section is titled 'Clinical Decision Support for IA CT head/brain wo con'. A search bar labeled 'Search for a Reason for Exam' contains the text 'Head Trauma'. Below the search bar, a button labeled 'Head trauma, mod-severe' is highlighted. To the left, a list of results focused on 'Head Trauma' (12) is shown, with 'Head trauma, mod-severe' selected. To the right, the 'Appropriateness for a 75 Year Old Female' is displayed. Under 'Requested Exam', the exam 'IA CT head/brain wo con' is shown with a score of 9, indicated by a green bar. Below the score, there are four dollar signs (\$\$\$\$) and three radiation symbols. Buttons for 'Confirm & Order' and 'Cancel Order' are present. Under 'Appropriate Exams', the exam 'HEAD CT W/O CONTRAST' is shown with a score of 9, also indicated by a green bar and four dollar signs (\$\$\$\$). A 'Replace & Order' button is present. The interface is titled 'Appropriate Use Criteria Desktop' in the browser window.

Based on the clinical indication selected, the *CT head/brain wo con order* receives a score of 9; indicating that it is an appropriate exam. The provider saves the order.

The Claim Modifier of ME is appended to the order as this procedure 'Adheres to Appropriate Use Criteria'. The G-Code G1004 is applied identifying the CDSM as the NDSC.

Clinical > Emergency Department Management > Orders > Order > View AUC Details

Physician Care Manager - HIM Dept: AHIM (MTUNV608/T6.0.8F/T6.0.8F.US) - Meditech,Joseph Jr (Papale,Michael) [EDT]

Waters,Doris
75 F
REG ER ED A-CA

5ft 5in 135lb BSA:1.67m² BMI:22.5kg/m²
Allergy/Adv: No Known Allergies

E00000015631 D000005775
T00006524

Imaging Appropriate Use Criteria

Claim Modifier	ME - Adheres to AUC
Vendor G-code	G1004
Vendor Name	Natl Dec Supp Co (NDSC)
ID	5253485
Appropriateness Score	9
Override Reason	

Clinical Indication

Head trauma, mod-severe

Diagnosis Code

Problem **Free Text**

*Start Date Today
Start Time 3:14 pm
*Freq Urgent

AUC Add Favorite Back Next Submit

My Notices
Patient Lists
Next Patient
Find Patient
Select Visits
Refresh EMR
Summary
Review Visit
Notes
Problem List
New Results
Clinical Panels
Vital Signs
I & O
Medications
Laboratory
Microbiology
Blood Bank
Reports
Patient Care
Notes
Orders
Amb Orders
Mar
Discharge Plan
Document
Sign
Clinical Data
Preferences

Procedure Does Not Adhere to Appropriate Use Criteria

The provider clicks the Orders button and places an AUC-eligible procedure. Upon saving, the NDSC UI launches. The response to the *reason for exam* field seeds the indication list and the provider selects the clinical indication.

Clinical > Emergency Department Management > Order Management > Orders > National Decision Support Company User Interface

WATERS,DORIS 75 Female 10/22/1944 U#: D000005775 A#: E00000015631
REG ER Ordering Provider: Meditech, Joseph Location: ED

Cancel IA CT head/brain w con

Clinical Decision Support for
IA CT head/brain w con

Search for a Reason for Exam

dizziness

Dizziness, non-specific

Results focused on dizziness (6) Reset

- ☐ Dizziness, arrhythmia or new vasoactive medication
- ☐ Dizziness, dehydration or hypotension
- ☒ Dizziness, non-specific
- ☐ Dizziness, persistent/recurrent, cardiac or vascular cause suspected
- ☐ Vertigo, central
- ☐ Vertigo, peripheral

Appropriateness for a 75 Year Old Female

— Requested Exam —

IA CT head/brain w con

1

Confirm & Order Cancel Order

— Other Alternative Exams —

BRAIN MRI W/O CONTRAST

2

Replace & Order

HEAD CT W/O CONTRAST

Based on the clinical indication selected, the CT head/brain w con order receives a score of 1 indicating that it's not appropriate. The provider chooses to order the exam anyway, and answers the override reason screen. The Claim Modifier of MF is appended to the order as this procedure 'Does Not Adhere to Appropriate Use Criteria.' The G-Code G1004 is applied; identifying the CDSM as the NDSC.

Clinical > Emergency Department Management > Orders > Order > View AUC Details

Physician Care Manager - HIM Dept: AHIM (MTUNV608/T6.0.8F/T6.0.8F.US) - Meditech, Joseph Jr (Papale, Michael) [EDT]

Waters, Doris 75 F 5ft 5in 135lb BSA: 1.67m² BMI: 22.5kg/m² E00000015631 D000005775 T00006524
REG ER ED A-CA Allergy/Adv: No Known Allergies

Imaging Appropriate Use Criteria

Claim Modifier	MF - Does Not Adhere to AUC
Vendor G-code	G1004
Vendor Name	Natl Dec Supp Co (NDSC)
ID	5283062
Appropriateness Score	1
Override Reason	Consulted with Radiology

Clinical Indication

Dizziness, non-specific

Diagnosis Code

Problem **Free Text**

*Start Date Today

Start Time 2:33 pm

*Freq Stat

AUC Add Favorite Back Next Submit

My Notices

Patient Lists

Next Patient

Find Patient

Select Visits

Refresh EMR

Summary

Review Visit

Notices

Problem List

New Results

Clinical Panels

Vital Signs

I & O

Medications

Laboratory

Microbiology

Blood Bank

Reports

Patient Care

Notes

Orders

Amb Orders

Mar

Discharge Plan

Document

Sign

Clinical Data

Preferences

No AUC Available (No Match/No Score/No Content/Unmapped)

There are four situations where an order receives an MG modifier as there is no AUC available for the order. These scenarios are:

- Provider selects 'I can't find a match' as none of the clinical indications match their reason for ordering the exam.
- The exam and indication combination produces *No Score*. This means that the Provider Led Entities do not have a consensus on whether this procedure is appropriate or not for the selected indication.
- The exam is known to NDSC (mapped), but there is no appropriateness content for the exam on the NDSC side.
- The exam is not known to NDSC (unmapped). As NDSC maps new/edited procedures on a bi-yearly basis, there is a potential for AUC-eligible orders to be unknown to NDSC when ordered.
 - In these situations, an error is presented to the user: *procedure not mapped to CDSM*, and the MG modifier is applied. Once the new or edited exams are mapped by NDSC, the proper modifier is applied based on the score.

Clinical > Emergency Department Management > Order Management > Orders > National Decision Support Company User Interface

The screenshot displays the National Decision Support Company (NDSC) User Interface. At the top, patient information is shown: WATERS, DORIS, 75, Female, 10/22/1944, U#: D000005775, A#: E00000015631. Below this, the ordering provider is Meditech, Joseph, and the location is ED. The main section is titled 'Clinical Decision Support for IA CT wrist LT w con'. A search bar contains the text 'wrist pain'. To the right of the search bar, a red box highlights a message that says 'I Can't Find a Match'. Below the search bar, there is a list of results focused on 'wrist pain' (23). The list includes various conditions such as 'Soft tissue infection suspected, wrist, initial exam', 'Wrist pain, carpal tunnel syndrome suspected, neg xray', 'Wrist pain, ganglion cyst suspected, neg xray', 'Wrist pain, gout suspected', 'Wrist pain, infection suspected', 'Wrist pain, inflammatory arthritis suspected, neg xray', 'Wrist pain, initial exam', 'Wrist pain, lateral/radial, neg xray', 'Wrist pain, medial/ulnar, neg xray', and 'Wrist pain, occult fracture suspected, nondiagnostic xray'. Each item has a checkbox next to it.

In all situations where there is no AUC available, the order receives an MG modifier.

Clinical > Emergency Department Management > Orders > Order > View AUC Details

Physician Care Manager - HIM Dept: AHIM (MTUNV608/T6.0.8F/T6.0.8F.US) - Meditech, Joseph Jr (Papale, Michael) [EDT]

Waters, Doris
75 F
REG ER ED A-CA

5ft 5in 135lb BSA: 1.67m² BMI: 22.5kg/m²
Allergy/Adv: No Known Allergies

E00000015631 D000005775
T00006524

Imaging Appropriate Use Criteria

Claim Modifier	MG - No AUC Available
Vendor G-code	G1004
Vendor Name	Natl Dec Supp Co (NDSC)
ID	5304653
Appropriateness Score	No Score
Override Reason	
No Match Comment	[No Feedback Comment Given]

Diagnosis Code

Problem Free Text

*Start Date Today
Start Time 8:47 am
*Freq Urgent
Stop Date
Stop Time
Count

AUC Add Favorite Back Next Submit

My Notices
Patient Lists
Next Patient
Find Patient
Select Visits
Refresh EMR
Summary
Review Visit
Notes
Problem List
New Results
Clinical Panels
Vital Signs
I & O
Medications
Laboratory
Microbiology
Blood Bank
Reports
Patient Care
Notes
Orders
Amb Orders
Mar
Discharge Plan
Document
Sign
Clinical Data
Preferences

Additional Notes

- *No Content* exams do not require the user to interact with the NDSC UI. In the background, the vendor, g-code, and MG modifier are automatically applied. The Appropriateness field displays *No Score*.
- For a *No Score* exam, the user interacts with the NDSC UI to allow selection of a Clinical Indication, in case that changes the score. Once one is selected, if there is no score, *No Score* displays in the Appropriateness field.

Extreme & Uncontrollable Circumstances

CMS allows an exception to reporting AUC in the event of extreme and uncontrollable circumstances. A parameter can be set by facility to temporarily bypass AUC checking for all patients and exams. In this situation, providers are not launched to the AUC overlay, and the MD modifier is applied to the order in the background. The facility is then removed from the parameter when the extreme or uncontrollable circumstance has passed.

Clinical > Emergency Department Management > Physician Care Manager > Order Management > Orders > View AUC Details

Physician Care Manager - HIM Dept: AHIM (MTUNV608/T6.0.8F/T6.0.8F.US) - Meditech, Joseph Jr (Papale, Michael) [EDT]

Waters, Doris
75 F
REG ER ED A-CA

5ft 5in 135lb BSA: 1.67m² BMI: 22.5kg/m²
Allergy/Adv: No Known Allergies

E00000015631 D000005775
T00006524

Edit Order

Order	Start/Stop	Status
IA CT head/brain w con Stat	Tue Aug 11 14:51	New

*Reason For Exam

Imaging Appropriate Use Criteria

*Claim Modifier **MD - Uncontrolled Circumstance**

Vendor G-code
Vendor Name
ID
Appropriateness Score
Override Reason

Diagnosis Code

Problem Free Text

AUC Add Favorite Back Next Submit Meeting

CMS allows an exception to reporting AUC for patients with certain emergency medical conditions. See [Section 1867\(e\)\(1\)](#) of the Act for further clarification on what is considered an emergency medical condition. ED priorities can be defined in the M-AT Parameters as ED Priority Exceptions.

Clinical > Emergency Department Tracker > Physician Care Manager > Order Management > Orders > View AUC Details

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Last Updated: August 25, 2020

Manual Entry

The manual entry screen has two new fields to allow the user to select the g-code and the claim modifier.

Ancillary > Imaging > Technologist Desktop > New Order

RAD.N - Technologist Desktop - A/MAIN/DI (MTUNV608/T6.0.8N/T6.0.8N.US) - Meditech,Roger III,MD

Waters, Doris
75 F
REG ER ED A-CA

None E00000015631 D000005775
T00006524

Allergy/Adv: No Known Allergies

Orders OV Order ID

User MT Meditech,Roger III,MD
Order Status Logged
Patient E00000015631 WATERS,DORIS

Technologist
ER Doctor PDEROCHEA Cameron,John
*Order Doctor PDEROCHEA Cameron,John

Arrival Time
Source

	Category	*Procedure	Procedure Name	*Priority	Quantity	*Date	Time	Series
1	IACT	IAHEADWO	IA CT head/brain wo ...	R	1	T 08/18		
2								
3								

Category Screen Procedure Screen

Reason For Exam Pain

Last: IACT order: IA CT head/brain wo con, 07/29/20 at Main Site (Logged)

View Profile View Insurance Edit Copies To Series Info Patient Data **Manual AUC** Launch AUC Close Save

Worklist Find Patient New Order Modify Order View Detail Performing Record Exam Exam Codes Charge/Credit Questionnaire Findings Copies To Edit Batch Follow-Up EMR <F11> Laboratory Images Patient Data Record Inquiry Schedule History Change Dept Change Site Preferences

The user selects the applicable *Claim Modifier* and *Vendor G-Code* from the group response look-ups (as shown below). After selecting the *Vendor G-Code*, the vendor name is automatically populated. The *ID*, *Appropriateness*, *Score*, and *Override Reason* fields are unchanged and are entered by the user, if provided. These are not required fields.

If the *Claim Modifier* selected is one of the Exception modifiers (MA, MB, MC, MD), the *Vendor G-Code* is not required. If no AUC is provided with the order, the modifier of MH is applied and the *Vendor G-Code* is not required. *Vendor G-Code* is required for the modifiers of ME (Adheres to AUC), MF (Does not Adhere to AUC), and MG (No AUC Available).

Additional Note

When the *Vendor G-Code* G1011 'Clinical Decision Support Mechanism, qualified tool not otherwise specified' is selected, the *Vendor Name* field is editable. The user can enter a *Vendor Name* or choose "This is a new vendor."

Ancillary > Imaging > Technologist Desktop > New Order > Imaging AUC

The screenshot displays the 'RAD.N - Imaging AUC' window. At the top, patient information for 'Waters, Doris' (75 F) is shown, including 'REG ER EDA-CA' and 'Allergy/Adv: No Known Allergies'. The window is divided into several sections. The 'Orders' section is active, showing 'OV Order ID'. The 'Worklist' section on the right lists various tasks like 'Order', 'Order', 'Detail', 'ning', 'Exam', 'Codes', '/Credit', 'onnaire', 's', 'To', 'tch', 'Up', 'F11>', 'tory', 'Data', 'Inquiry', 'ile', 'Change Dept', 'Change Site', and 'Preferences'. The 'User' section on the left lists 'User', 'Order St', and 'Patient'. The 'Technolo' section lists 'ER Docto' and '* Order Do'. The 'ID' section lists '1 IAC', '2', and '3'. The 'Reason' section is visible. The 'Last: IACT order: IA CT head/brain wo con, 07/29/20 at Main Site (Logged)' is displayed at the bottom. The 'View Profile', 'View Insurance', 'Edit Copies To', 'Series Info', 'Patient Data', 'Manual AUC', and 'Launch AUC' buttons are at the bottom. The 'Close' and 'Save' buttons are at the bottom right. The 'Cancel' and 'Save' buttons are at the bottom right of the 'Orders' section. The 'Claim Modifier' is 'ME' and 'Adheres to AUC'. The 'Vendor G-Code' is 'G1004' and the 'Vendor Name' is 'Natl Dec Supp Co (NDSC)'. The 'Appropriateness Score' and 'Override Reason' fields are empty.

RAD.N - Technologist Desktop - A/MAIN/DI (MTUNV608/T6.0.8N/T6.0.8N.US) - Meditech,Roger III,MD

Waters, Doris
75 F
REG ER EDA-CA
Allergy/Adv: No Known Allergies

E00000015631
None

D000005775
T00006524

Orders OV Order ID

RAD.N - Imaging AUC

User
Order St
Patient

Technolo
ER Docto
* Order Do

1 IAC
2
3

Reason

*Claim Modifier ME Adheres to AUC

*Vendor G-Code G1004

*Vendor Name Natl Dec Supp Co (NDSC)

ID
Appropriateness
Score
Override Reason

Cancel Save

Last: IACT order: IA CT head/brain wo con, 07/29/20 at Main Site (Logged)

View Profile View Insurance Edit Copies To Series Info Patient Data Manual AUC Launch AUC

Close Save

Worklist
Order
Order
Detail
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Exam
Codes
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Up
F11>
tory
Data
Inquiry
ile
Change Dept
Change Site
Preferences

Monitoring Utilization & Deficiencies

The Imaging AUC Deficiency report was enhanced to include utilization information as well as deficiencies. Selection criteria includes:

- Service date range
- Restrict to categories
- Restrict to facility
- Restrict to registration types
- Restrict to financial classes
- Restrict to provider(s)
- Include orders with specific modifier(s) or no modifiers
- Restrict to AUC entry type
 - **CDSM:** Orders placed in MEDITECH using the NDSC integrated solution
 - **Manual entry:** Orders placed outside of MEDITECH where AUC values are manually entered on the order
 - **Exception:** Orders where AUC was bypassed due to significant hardship
 - **Other Vendor:** Orders placed in an Other Vendor system interfaced into MEDITECH with AUC values
 - **Entered without AUC:** Orders eligible for AUC-checking where the provider did not complete the AUC consultation.

Clinical > Reports > Ordering> Imaging AUC Deficiency and Utilization Report

M AUC Deficiency and Utilization Report - HIM Dept: AHIM/Facility: A (MTUNV608/T6.0.8F/T6.0.8F,US) - Meditech,Joseph Jr (Papale,Michael) [EDT]

*From Service Date 08/01/20
*Thru Service Date 08/11/20

Restrict to Category
Imaging Appropriateness US
Imaging Appropriateness XR
Imaging Appropriateness MRI
Imaging Appropriateness

Restrict to Facility

Restrict to Registration Type

Restrict to Financial Class

Restrict to Provider

Include Orders With No Modifier ☒ Yes ☐ No ☐ Only

Restrict to AUC Modifier

☒ Restrict to AUC Entry Type
☒ CDSM
☐ Manual Entry
☒ Exception
☐ Other Vendor
☐ Entered without AUC

OK ? [Icons]

Clinical > Reports > Imaging AUC Deficiency and Utilization Report

Meditech T6.08 (MAT TB PARAMS) Imaging Appropriate Use Criteria Deficiency and Utilization Report										Page: 1 of 3			
1 Meditech Circle										Date: 06/11/20 3:46 pm			
Westwood, MA										User: Meditech1, Roger			
Service Dates: 06/12/20 - 06/11/20													
Service										Patient			
Date	Time	Category	CM Order Number	Status	Order Doctor	Order Source	Facility	Modifier	AUC Entry Type	Name	Status	Account #	Unit #
06/12/20	11:00 am	IAC.T.RAD.N	200612-110211330	Logged	Earp, Kevin	PROVIDER	A	MC	Exception	HART, ALEX	MCR	E00000015494	D000006222
UNMAIPPED, IAC.T.RAD.N										09/16/1945	REG ER	E00000015494	D000006222
Errors: Procedure not mapped to CDEM													
06/12/20	8:21 pm	IAC.T.RAD.N	200612-202220828	Logged	Parker, Sarah	PROVIDER	A	ME	CDEM	Parker, Dolley	ADM IN	E00000008453	D000002315
IAC.T.RAD.N										01/23/78	ADM IN	E00000008453	D000002315
06/12/20	8:21 pm	IAC.T.RAD.N	200612-202220828	Logged	Parker, Sarah	PROVIDER	A	ME	CDEM	Parker, Dolley	ADM IN	E00000008453	D000002315
IAC.T.RAD.N										01/23/78	ADM IN	E00000008453	D000002315
06/14/20	6:02 pm	IAC.T.RAD.N	200614-180116394	Logged	Earp, Kevin	PROVIDER	A	ME	Exception	VALEN, ROMAN	MCR	E00000015507	D000006234
IAC.T.RAD.N										08/08/1940	ADM IN	E00000015507	D000006234
06/14/20	6:04 pm	IAC.T.RAD.N	200614-180116442	Logged	Earp, Kevin	PROVIDER	A	ME	Exception	VALEN, ROMAN	MCR	E00000015507	D000006234
IAC.T.RAD.N										08/08/1940	ADM IN	E00000015507	D000006234
06/14/20	6:04 pm	IAC.T.RAD.N	200614-180116492	Logged	Earp, Kevin	PROVIDER	A	ME	Exception	VALEN, ROMAN	MCR	E00000015507	D000006234
IAC.T.RAD.N										08/08/1940	ADM IN	E00000015507	D000006234
06/15/20		IAC.T.RAD.N	200615-102901598	Logged	Barrows, Cindy	PROVIDER	A	ME	CDEM	BARROWS, CDEM	BC	E00000008064	D000002078
IAC.T.RAD.N										05/15/1967	ADM IN	E00000008064	D000002078
06/15/20	10:48 am	IAC.T.RAD.N	200615-105040061	Logged	Barrows, Cindy	WRITTEN	A	ME	CDEM	BARROWS, CDEM	BC	E00000008064	D000002078
IAC.T.RAD.N										05/15/1967	ADM IN	E00000008064	D000002078
06/15/20	1:33 pm	IAC.T.RAD.N	200615-134221639	Logged	Barrows, Cindy	PROVIDER	A	ME	CDEM	BARROWS, CDEM	BC	E00000008064	D000002078
IAC.T.RAD.N										05/15/1967	ADM IN	E00000008064	D000002078
06/17/20		IAC.T.RAD.N	200617-155138454	Logged	Barrows, Cindy	PROVIDER	A	ME	CDEM	Wong, Melaine CM	MCR	E00000015423	D000006175
IAC.T.RAD.N										05/05/1950	ADM IN	E00000015423	D000006175
06/17/20		IAC.T.RAD.N	200617-160412314	Logged	Barrows, Cindy	PROVIDER	A	MC	CDEM	Wong, Melaine CM	MCR	E00000015423	D000006175
IAC.T.RAD.N										05/05/1950	ADM IN	E00000015423	D000006175
06/17/20	11:01 am	IAC.T.RAD.N	200617-111909139	Logged	Meditech1, Roger	PROVIDER	A	MC	CDEM	Wong, Melaine CM	MCR	E00000015423	D000006175
IAC.T.RAD.N										05/05/1950	ADM IN	E00000015423	D000006175

Setup

MIS Clinical Parameters

Query fields for *Claim Modifier* and *Vendor G-Codes* are available in the list of CDSM queries. New queries for the *Claim Modifier* and *Vendor G-Code* should be created and added to the fields to facilitate the manual entry of AUC values. Once defined, the query mnemonics cannot be changed. If necessary, edits can be made to the group responses. The [AUC Claims Processing Requirements Guide](#) available on CMS.gov can be referenced for details on the vendor g-codes and Adherence Modifier values.

The *Extreme Circumstances Bypass AUC* parameter was added to allow for the significant hardship exception of extreme and uncontrollable circumstances. This field looks to the MIS Facility Dictionary, and is restricted to acute facilities. When a facility is defined in the parameter, AUC-checking is bypassed for that facility, and the MD modifier and descriptor are automatically added to the order. This functionality applies to users with access to Check CDSM only.

Info Systems > MIS > Dictionaries > MIS Parameters (M-AT)

MIS Parameters (M-AT) - HIM Dept: AHIM (MTUNV608/T6.0.8F/T6.0.8F.US) - Meditech, Joseph Jr (Papale, Michael) [EDT]

Last Edit: 07/24/20 10:34 am

General Direct Clinical Acceptable Use

Default Patient's Facility for Referral Lookup Yes

Imaging Appropriate Use Criteria

CDSM - Queries

Claim Modifier	CDSMCL
Vendor G-code	CDSMVENG
Vendor Name	CDSMVENN
ID	CDSM.ID
Appropriateness	CDSM.APPROP
Score	CDSM.SCORE
Override Reason	CDSM.REASON

Reason For Exam - Queries

.MM1D
.R3K0100D
DC.TEXT

Extreme Circumstances Bypass AUC

B Facility

Clinical Facility

A Facility
B Facility
LTC

Imaging Appropriate Use Criteria

Enable for Applications

ITS

History Cancel Save ? ? ? ? ?

A new ED Priority Exceptions parameter was added to allow for the Emergency Exception. This field is available to be defined for acute facilities and looks to the ED Priority Dictionary. When an ED priority is defined, the AUC check is suppressed and the MA modifier and descriptor are automatically added to the AUC-eligible order. This applies to users with access to Check CDSM as well as users without access to Check CDSM.

Info Systems > MIS > Dictionaries > MIS Parameters (M-AT)

The screenshot shows the 'MIS Parameters (M-AT)' window. The title bar indicates the user is 'Meditech, Joseph Jr (Papale, Michael)' and the last edit was on '07/24/20 10:34 am'. The window contains several sections for configuration:

- DC.TEXT**: A dropdown menu.
- Extreme Circumstances Bypass AUC**: A list with 'B Facility' selected.
- Clinical Facility**: A list with 'A Facility', 'B Facility', and 'LTC'.
- Imaging Appropriate Use Criteria**: A section with three sub-sections:
 - Enable for Applications**: A list with 'ITS' and 'OM'.
 - Include Registration Types**: A list with 'BAR Nonpatient', 'Clinical', and 'Emergency Dept'.
 - Include Financial Classes**: A list with 'Blue CrossX', 'Medicare', and 'Other Insurance'.
- ED Priority Exceptions**: A list with 'Emergent' and 'Critical' selected. This section is highlighted with a red box.

At the bottom of the window, there is a 'History' button and a 'Cancel' button. On the right side, there are buttons for 'View', 'Edit', and 'Report'. At the bottom right, there are icons for 'Cancel', 'Save', and a help icon.

MIS Group Response Query

New Group Response or Optional queries should be created for claim modifiers, vendor g-code, and vendor name in the Query and Group Response Dictionaries. The examples below were sourced from CMS.gov and abbreviations were applied where needed.

Modifier Query

A new group response query for modifier should be created. The group response entries are defined based on the adherence modifiers provided by CMS.

Info Systems > MIS > Dictionaries > Customer Defined > Group Response Dictionary

Group Response Dictionary - HIM Dept: AHIM (MTUNV608/T6.0.8F/T6.0.8F.US) - Meditech, Joseph Jr (Papale, Michael) [EDT]

CDSMCL - CDSM Claim Modifier Last Edit: 03/31/20 3:54 pm

Main Elements

Element Mnemonic	*Element Name	Rank	Value	Normal
MA	Emergent Condition			
MB	Insufficient Internet			
MC	EHR/CDSM Issue			
MD	Uncontrolled Circumstance			
ME	Adheres to AUC			

+ X

Element Long Name

Descriptor Text

Mnemonic E & M Coding Bullet Name

Document Comment Text

History Cancel Save ? [Icons]

Vendor G-Code Query

A new group response query should be created for vendor G code. The group response entries are defined based on the vendor G codes provided by CMS.

Info Systems > MIS > Dictionaries > Customer Defined > Group Response Dictionary

Group Response Dictionary - HIM Dept: AHIM (MTUNV608/T6.0.8F/T6.0.8F.US) - Meditech, Joseph Jr (Papale, Michael) [EDT]

CDSMVENG - CDSM Vendor G-Code Last Edit: 04/15/20 1:46 pm

Main Elements

Element Mnemonic	*Element Name	Rank	Value	Normal
G1001	eviCore Healthcare			
G1002	MedCurrent			
G1003	Medicalis			
G1004	Natl Dec Supp Co (NDSC)			
G1005	Natl Imaging Assoc			

+ X

Element Long Name

Descriptor Text

Mnemonic E & M Coding Bullet Name

Document Comment Text

History Cancel Save ? [Icons]

In the case where the CDSM vendor is not provided or does not appear on the list of vendor g-codes, the g-code of G1011 can be applied and the vendor name can be entered, or the response: "this is a new AUC vendor" can be chosen.

Vendor Name (Unspecified G-Code/Vendor)

A new optional group response query should be created for Vendor name. The optional query allows users to free text in the vendor name or choose “this is a new vendor” from the associated group response.

Info Systems > MIS > Dictionaries > Customer Defined > Group Response Dictionary

The screenshot shows a web application window titled "Group Response Dictionary - HIM Dept: AHIM (MTUNV608/T6.0.8F/T6.0.8F.US) - Meditech,Joseph Jr (Papale,Michael) [EDT]". The main content area is titled "CDSMVENO - CDSM Vendor Name (Opt)" and shows a "Last Edit: 03/31/20 3:58 pm". The interface includes a "Main" button and an "Elements" button. A table with the following columns is visible: "Element Mnemonic", "*Element Name", "Rank", "Value", and "Normal". The first row contains the value "1" in the "Element Mnemonic" column and "This is a new Vendor" in the "*Element Name" column. Below the table, there are input fields for "Element Long Name", "Descriptor Text", "Mnemonic", and "E & M Coding Bullet Name". A "Document Comment Text" section with a list of input fields is also present. On the right side, there are buttons for "View", "New", "Edit", and "Report". At the bottom, there are "Cancel" and "Save" buttons, along with a "History" button and a set of icons.

Element Mnemonic	*Element Name	Rank	Value	Normal
1	This is a new Vendor			

Revenue Cycle: Required AUC Setup

Prior to any setup in Revenue Cycle, it should be confirmed that the CDSM G-Code and vendor name queries were created in MIS and attached to the MIS Clinical Parameters per the previously mentioned setup.

Customer Defined Screen

Define the claim modifier, vendor g-code and vendor name queries that were defined in the MIS Image Appropriateness Dictionary on a BAR TXNS type Customer Defined Screen (CDS).

Note: Vendor name is only needed if reporting g-code G1011.

Info Systems > MIS > Dictionaries > Custom Defined Data > Screens (NPR) > MIS Enter/Edit MIS Customer Defined Screen Dictionary

MIS - Enter/Edit MIS Customer Defined Screen Dictionary (MTUNV608/D6.08N/S6.0.8N) - Meditech,Roger III MD

BARAUC - BAR AUC QUERIES Last Edit: 05/29/20 12:19

General Info Query Def Print Def PreView Edit

Preview Select Overflow Preview View Customer Def Screen

Mnemonic BARAUC

*Active Y

*Description BAR AUC QUERIES

*Type BAR TXNS

MS Word Row Size

Edit Users

Cancel Save ? [Icons]

MIS - Enter/Edit MIS Customer Defined Screen Dictionary (MTUNV608/D6.08N/S6.0.8N) - Meditech,Roger III,MD

BARAUC - BAR AUC QUERIES
Last Edit: 05/29/20 12:19

General Info
Query Def
Print Def
PreView Edit

Preview Select Overflow
Preview View
Customer Def Screen

Mnemonic **BARAUC**

	* Query	Text	Page	Sect	Seq	Ht	Req	Attr
1	CDSMCLM...	CDSM Claim Modifier	1	1	1			
2	CDSMVENG	CDSM Vendor G-Code (Optional)	1	1	2			
3	CDSMVENN	CDSM Vendor Name (Comment)	1	1	3			
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								

Cancel
Save
?

Charge Procedure/Charge Category

Attach the CDS to either the charge procedure or the charge category. To note, a CDS attached to a charge procedure takes precedence over a charge category CDS.

Financial > B/AR > Dictionaries > Procedure > Enter/Edit B/AR Procedure Dictionary (Charges)

BAR.N - Enter/Edit B/AR Procedure Dictionary (Charges) (MTUNV608/D6.08N/S6.0.8N) - Meditech,Roger III,MD

3501 - CAT SCAN KNEE Last Edit: 06/09/20 08:03

General Rate/Replacement General Ledger Claims LAB Identifiers

Alternate Codes

Type
CPT-4

Effective Date	Alternate Code	Description
01/01/01	12345	

Quantity Adjustment for Forms

Claim Group

Effective Date	Multiplier

Customer Defined Screen BARAUC

Cancel Save ? [Icons]

Additional Note: The “Ordering/Referring Physician” Prompt on the General tab should be set to Y to ensure the correct physician is captured for the procedure(s) in question and reported on the claim.

Financial > B/AR > Dictionaries > Enter/Edit Charge Category Dictionary

The screenshot shows a software window titled "BAR.N - Enter/Edit Charge Category Dictionary (MTUNV608/D6.08N/S6.0.8N) - Meditech, Roger III, MD". The window has a header bar with "350 - 350 CAT SCANS" on the left and "Last Edit: 02/20/20 08:43" on the right. The main area contains a form with the following fields:

- Mnemonic: 350
- *Active: Y (highlighted in green)
- *Name: 350 CAT SCANS
- Customer Defined Screen: BARAUC (highlighted with a red border)

At the bottom right, there are buttons for "Cancel" (with a red X icon) and "Save" (with a green checkmark icon), followed by a row of six small utility icons: a question mark, a globe, a folder, a lock, a document, and an exclamation mark.

Revenue Cycle: Claim Setup

Claim Fields

- **AUC:** This field turns on AUC reporting. It must be set up with a Type of *CONSTANT* with a Value of *Y*. This field must be defined along with the AUC ALT CD field to populate AUC information.
- **AUC ALT CD:** This field points to the Claim Data List Dictionary. It must be set up with a Type of *LIST* with the appropriate Data List mnemonic in the Value field. The list should contain all applicable AUC alternate codes. This is needed due to charge explosion. When a charge explodes, the AUC queries explode to each charge; however, the AUC modifier may not be applicable to all charges. This field must be defined as should the AUC field to properly report AUC information.
- **AUC Penny:** This field controls the value in the total charges. This field is set up with a Type of *CONSTANT* with a Value of *Y* or *N*. If the field is set to *Y*, then the g-code line is added to the total charges. If the field is *N*, then the g-code line is not added. All g-code lines must have a nominal charge, 0.01.
- **AUC REV CODE OTH:** This field is for UB04/5010 INST claim programs only. This field controls the revenue code of the g-code line. This field should be set up with a Type of *CONSTANT* with a Value of *Y* if the user wants to create the revenue code ending in 9. Otherwise, the revenue code is the same as the line with the modifier. For example, if there is an AUC alt code of 73222 and the modifier is ME; this creates a service line with revenue code 0351. If the g-code is G1011; then a separate line with revenue code 0359 (if the claim field is *Y*), or revenue code 0351 (if the claim field is *N*) is available.
- **AUC DESC MAP:** This field is for the UB04 claim program only. This field points to the Claim Map Dictionary. It should be set up with a Type of *MAP* with the appropriate map mnemonic. The map should contain all applicable revenue codes on the left-hand side and the description on the right-hand side. The result of the map is what prints on the claim for all g-codes, including the new g-code row if the claim field AUC REV CODE OTH is set to *Y*. This field is not used if AUC REV CODE OTH is set to *N*.
- **AUC 24 SUPP:** This field is for the 1500 claim program only. This field controls the value in the field: *24SUPP*, which prints right above the dates as part of the detail line. This field should be set up with a Type of *CONSTANT* with a Value of *Y* or *N*. If the field is set to *N*, then nothing is added to the claim. If the field is set to *Y*, then the ordering physician NPI prints for AUC charges or the vendor name prints for lines containing G1011.

Claim Check Data Dictionary

A Data List needs to be created to be attached to the AUC ALT CD field in the Claim Dictionary. This is a list of all the HCPCS/CPT codes needed for AUC reporting.

Financial > B/AR > Dictionaries > Claim > Enter/Edit Claim Check Data Dictionary

BAR.N - Enter/Edit Claim Check Data Dictionary (MTUNV608/D6.08N/S6.0.8N) - Meditech, Roger III, MD

AUC ALT CD - AUC ALT CODE Last Edit: 05/29/20 08:48

Mnemonic AUC ALT CD

Active Y

*Name AUC ALT CODE

List Data Values

11111
45678
70546
70551
73200

List Data Values as Ranges

From	*Thru
12345	12346

Cancel Save ? [Icons]

Claim Map Dictionary

A Claim Map needs to be created to be attached to the AUC DESC MAP field (for the UB04 claim program) in the Claim Dictionary. The map should contain all applicable revenue codes on the left-hand side and the description on the right-hand side.

Financial > B/AR > Dictionaries > Claim > Enter/Edit Claim Map Dictionary

BAR.N - Enter/Edit Claim Map Dictionary (MTUNV608/D6.08N/S6.0.8N) - Meditech, Roger III, MD

AUC DESC M - AUC REV CODE TO DESCRIPT Last Edit: 02/20/20 13:54

Mnemonic

*Active ☒

*Name

Panel

If Data Value in File Is	*Use This Value on Claim
350	350 6.08 QWERTY PEF

From Value	*Thru Value	*Use This Value on Claim
350	359	359 - 6.08 REV DESCRIPTION
0350	0359	0359 - 6.08 REV DESCRIPTION

For Other Data Values Use

If There is no Data Value Use

Claim Dictionary

To report AUC information on the claim, the following fields need to be defined for the 5010 INST claim program.

Financial > B/AR > Dictionaries > Claim > Enter/Edit Claim Dictionary

BARN - Enter/Edit Claim Dictionary (MTUNV608/D6.08N/S6.0.8N) - Meditech,Roger III,MD

5010 AUC.2 - 5010 INST- auc line pef Last Edit: 04/24/20 13:08

Eligibility General **Checks/Fields/Sections**

Check	Action	Online Claim Edit

NDC Format

Field	Code	Type	Override	Value	Map
AUC		CONSTANT	Y	Y	
AUC ALT CD		LIST	Y	AUC ALT CD	
AUC PENNY		CONSTANT	Y	N	
AUC REV CODE OTH		CONSTANT	Y	Y	
ISA/03		CONSTANT	Y	<Default '00';password use 01>	
ISA/04		CONSTANT	Y	<Password if 01 in ISA/03>	

	Claim Section	Charge Category	Procedure Code	Covered
1	110	110		C
2	111	111		C
3	120	120		C
4	130	130		C
5	159	159		C
6	220	220		C

Cancel Save ? [Icons]

To report AUC information on the claim, the following fields need to be defined for the 5010 PROF claim program.

Financial > B/AR > Dictionaries > Claim > Enter/Edit Claim Dictionary

BARN - Enter/Edit Claim Dictionary (MTUNV608/D6.08N/S6.08N) - Meditech,Roger III,MD

5010P AUC - 5010 PROF - AUC Last Edit: 03/24/20 09:53

Eligibility General **Checks/Fields/Sections**

Check	Action	Online Claim Edit

NDC Format

Field	Code	Type	Override	Value	Map
AUC		CONSTANT	Y	Y	
AUC ALT CD		LIST	Y	AUC ALT CD	
AUC PENNY		CONSTANT	Y	Y	
DRUG MOD		CONSTANT	Y	JW	
DRUG USE		CONSTANT	Y	MEDI.NWAST	
DRUG WASTE QRY		CONSTANT	Y	MEDI.WASTE	

	Claim Section	Charge Category	Procedure Code
1	1500	110	
2	1500	120	
3	1500	250	
4	1500	270	
5	1500	280	
6	1500	300	

Cancel Save ? [Icons]

To report AUC information on the claim, the following fields need to be defined for the UB04 claim program.

Financial > B/AR > Dictionaries > Claim > Enter/Edit Claim Dictionary

BAR.N - Enter/Edit Claim Dictionary (MTUNV608/D6.08N/S6.0.8N) - Meditech,Roger III,MD

UB AUC L - UB04 AUC LINE - PEF Last Edit: 04/29/20 13:03

Eligibility General **Checks/Fields/Sections**

Check	Action	Online Claim Edit

NDC Format

Field	Code	*Type	Override	Value	Map
AUC		CONSTANT	Y	Y	
AUC ALT CD		LIST	Y	AUC ALT CD	
AUC DESC MAP		MAP	Y		AUC DESC M
AUC PENNY		CONSTANT	Y	Y	
AUC REV CODE OTH		CONSTANT	Y	N	
LAB SITE QUERY		CUST-DEF	Y	BAR.LABSIT	

	Claim Section	Charge Category	Procedure Code	Covered
1	250	250		C
2	280	280		C
3	300	300		C
4	300	384		C
5	350	350		C
6	636	636		C

Cancel Save ? [Icons]

To report AUC information on the claim, the following fields need to be defined for the 1500-F12 claim program.

Financial > B/AR > Dictionaries > Claim > Enter/Edit Claim Dictionary

1500 AUC - 1500 AUC Last Edit: 05/26/20 07:19

Eligibility General **Checks/Fields/Sections**

Check	Action	Online Claim Edit

NDC Format

Field	Code	*Type	Override	Value	Map
AUC		CONSTANT	Y	Y	
AUC 24SUPP		CONSTANT	Y	Y	
AUC ALT CD		LIST	Y	AUC ALT CD	
AUC PENNY		CONSTANT	Y	Y	

	Claim Section	Charge Category	Procedure Code
1	1500	350	
2			
3			
4			
5			
6			

Cancel Save ? [Icons]

Claim Checks:

AUC REQ MOD

- If an Alt Code is designated as an AUC Alt Code, an AUC modifier must be present for AUC data to be reported.
- This check fails if an Alt Code in the Data List exists, but no AUC modifier exists. The Data List of modifiers should include MA through MH.

AUC REQ GCD

- A g-code must be reported when an AUC modifier of ME, MF, or MG is present.
- Alt Codes identified as AUC that have a modifier in the Data List, require a g-code value. The Data List should include ME, MF, and MG.

AUC REQ VEN NM

- Alt Codes identified as AUC that have G1011 must have a vendor name.

AUC REQ NPI

- The ordering physician's NPI number must be reported with AUC Alt Codes. If the ordering physician does not have a defined NPI number, the claim prints the NPI number defined for the physician's Provider Group.

Claim Output

Once the above setup is completed and claims are generated, the following information will report on claims:

837 Institutional & 837 Professional

- The Imaging Charge Procedure and Modifier prints on the 2400/SV2 loop and segment.

i	57	SV2*0350*HC>12346>14>ME*200*UN*1~
i	58	DTP*472*D8*20200127~
i	59	REF*6R*3502.20200127.1~
i	60	NM1*DN*1*FREETEXT*TOM*****XX*4444444457~
i	61	LX*2~
i	62	SV2*0351*HC>12345>LT>ME*100*UN*1~
i	63	DTP*472*D8*20200127~
i	64	REF*6R*3501.20200127.2~
i	65	NM1*DN*1*RUCKER*GREG*****XX*9876541118~

- The AUC g-code prints on a separately created 2400/SV2 loop and segment with the g-code as the Procedure Code, if the imaging charge procedure has a modifier of ME, MF, or MG.

i	67	SV2*0359*HC>G1011>>>>>1*.02*UN*2~
i	68	DTP*472*D8*20200127~
i	69	REF*6R*.20200127.3~

- On an 837 Institutional Claim, the Ordering Provider's NPI number prints in the 2300/K3 segment.
 - AUC:** Represents the program.
 - LX:** Represents the service line of the imaging procedure.
 - DK:** Represents the Ordering Provider's NPI.

i	51	K3*AUCLX1DK4444444457LX2DK9876541118~
---	----	---------------------------------------

- On a 837 Professional Claim, the Ordering Provider's NPI prints in the 2420E/NM1 loop and segment.

i	83	NM1*DK*1*FREETEXT*TOM*****XX*4444444457~
---	----	--

- The rest of the information that reports, such as the charge amount and modifier placement, depends on the settings of the AUC for Imaging Claim.

UB04

- The Imaging Charge Procedure and modifier prints on field 44.
- The AUC g-code prints on its own line on field 44 if the Imaging Charge Procedure has a modifier of ME, MF, or MG.

0350	CAT SCAN GENERAL	12345ME	012720	1	10000
0350	CAT SCAN GENERAL	G1011	012720	1	01
0351	CT SCAN/HEAD	12346ME	012720	1	20000
0351	CT SCAN/HEAD	G1011	012720	1	01

- The vendor name prints in field 80 if the g-code is G1011. The field references which service line has the g-code, followed by a colon and then the vendor name. For example, if G-Code G1011 was on line 3 and the vendor name was AgileMD, field 80 would print: 3:G1011:AgileMD.
- The ordering provider's NPI prints in field 80. The field references the service line number of the Imaging Procedure followed by a colon, and then the DK qualifier and the NPI number. For example, if the AUC imaging procedure was on line one and the ordering provider's NPI was 9876541118, field 80 would print: 1:DK9876541118.

```

      1:DK9876541118
2:G1011:1
3:DK4444444457
4:G1011:1

```

- The rest of the information that reports, such as the charge amount and the modifier placement, depends on the settings of the AUC for Imaging Claim.

1500-12

- The Imaging Charge Procedure prints in field 24.
- The AUC g-code is created on a separate line in field 24 with the g-code as the procedure code, if the Imaging Charge Procedure has a modifier of ME, MF, or MG.

```

01 30 20 01 30 20 22      45678      ME          A          10 00 1          1558371187
01 30 20 01 30 20          G1011                      0 01 1

```

- The rest of the information that reports, such as the charge amount and the modifier placement, depends on the settings of the AUC for Imaging Claim.

Supporting Documentation

CMS.Gov

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM11268.pdf>

6.08 Workflow Guides:

<https://customer.meditech.com/en/d/iaucresources/pages/608aucimpguide.htm>

Questions

Please contact your MEDITECH Order Management or Claims specialist.