

Imaging Appropriate Use Claims Requirement

Client/Server

Release(s)

Client/Server 5.67 pp 38

Overview

Within Provider Order Management (POM) and Ambulatory Order Management (AOM), providers can perform an imaging appropriateness check through integration with the National Decision Support Company (NDSC). Imaging appropriateness scores are also entered manually through the Scheduling to Order Entry 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 Claims Dictionary setup.

MEDITECH Applications

- Ambulatory Order Management (AOM)
- Community-Wide Scheduling (CWS)
- Emergency Department Management (EDM)
- Management Information Systems (MIS)
- Imaging and Therapeutic Services (ITS)
- Provider Order Management (POM)
- Order Entry (OE)
- Claims (CL)

MEDITECH's Recommended Workflow

Procedure adheres to Appropriate Use Criteria

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

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

The screenshot displays the AUCViewer interface for a patient named Waters, Doris, 77, Female, born 7/6/43, with U#: EC00058759 and A#: EC0000027537. The patient is in the PRE ER location, and the ordering provider is MEDITECH, JOHN J MD. The interface shows a search for a reason for exam, with 'head trauma' entered. The results are focused on head trauma (12), and 'Head trauma, mod-severe' is selected. The appropriateness for a 77 Year Old Female is shown, with a score of 9 for 'IA CT head/brain wo con'. The interface also shows a list of other exams, including 'HEAD CT WITHOUT CONTRAST', which also has a score of 9. The 'Confirm & Order' button is highlighted.

Waters, Doris 77 Female 7/6/43 U#: EC00058759 A#: EC0000027537
PRE ER Ordering Provider: MEDITECH, JOHN J MD Location: ED

Cancel IA CT head/brain wo con

Clinical Decision Support for
IA CT head/brain wo con

Search for a Reason for Exam

head trauma

Head trauma, mod-severe

Results focused on head trauma (12) Reset

- ☐ Ataxia, post head trauma
- ☐ CSF leak suspected
- ☐ Facial fracture, follow up
- ☐ Facial trauma
- ☐ Facial trauma, penetrating
- ☐ Head trauma, minor
- ☒ Head trauma, mod-severe
- ☐ Head trauma, penetrating
- ☐ Head trauma, vascular injury suspected
- ☐ Head trauma, visual loss

Appropriateness for a 77 Year Old Female

View Evidence for Exams

Requested Exam

IA CT head/brain wo con

9

Confirm & Order Cancel Order

Appropriate Exams

HEAD CT WITHOUT CONTRAST

9

Replace & Order

Other Alternative Exams

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.

Emergency Department Management > Provider Order Management > Orders > Imaging AUC

Provider Order Management - MEDITECH/JOHN J MD

Waters, Doris
77 F

EC0000027537 / EC00058759 / SVTVII0011730
2 South Nurse Station 1234567 PRE ER

Software by MEDITECH

Imaging AUC

Test Ordered
IA CT head/brain w/ con (IAC)
Reason: head trauma

* Claim Modifier
Modifier Description
Vendor G-Code
Vendor Name
ID
Appropriateness Score
Override Reason

ME
Adheres to AUC
G1004
NDSC
5189281
9
9

Cancel OK ? ? ? ? ? ? ? ? ? ?

Record List
Other Visit
Special Panels
24 Hour
Vital Signs
I & O
Notes
Medications
Order History
Laboratory
Microbiology
Blood Bank
Pathology
Imaging
Other Reports
Care Trends
Care Activity
History
Summary
Encounters
Referrals
Problem List
Discharge
Orders
Document
Reconcile Meds
Sign

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* query seeds the indication list and the provider selects the clinical indication. Based on the clinical indication selected, the CT head/brain w con order receives a score of 1 indicating that it is not appropriate. The provider chooses to order the exam anyway, and answers the override reason screen.

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

Waters, Doris 77 Female 7/6/43 U#: EC00058759 A#: EC0000027537
PRE ER Ordering Provider: MEDITECH, JOHN J MD 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 77 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 WITHOUT CONTRAST

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.

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

Provider Order Management - MEDITECHJOHN J MD

Waters, Doris
77 F
EC0000027537 / EC00058759 / SVVIVII0011730
2 South Nurse Station 1234567 PRE ER

Software by MEDITECH

Imaging AUC

Test Ordered
IA CT head/brain w con (IAC)
Reason: dizziness

* Claim Modifier	MF
Modifier Description	Does not adhere to AUC
Vendor G-Code	G1004
Vendor Name	NDSC
ID	5192578
Appropriateness Score	1
Override Reason	Consulted with Radiology

Cancel OK ? ? ? ? ? ? ? ? ? ?

Record List
Other Visit
Special Panels
24 Hour
Vital Signs
I & O
Notes
Medications
Order History
Laboratory
Microbiology
Blood Bank
Pathology
Imaging
Other Reports
Care Trends
Care Activity
History
Summary
Encounters
Referrals
Problem List
Discharge
Orders
Document
Reconcile Meds
Sign

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.

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

The screenshot displays the National Decision Support Company (NDSC) User Interface. At the top, a patient header shows: Waters, Doris, 77, Female, 7/6/43, U#: EC00058759, A#: EC0000027537, PRE ER, Ordering Provider: MEDITECH, JOHN J MD, Location: ED. Below this, a red error message states: "Cancel IA CT wrist LT w con". The main section is titled "Clinical Decision Support for IA CT wrist LT w con" and includes a search bar with the text "wrist pain". 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), with a "Reset" button. The list includes various clinical indications 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".

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

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 a score the applicable modifier is applied.

Emergency Department Management > Provider Order Management > Orders > Imaging AUC

Provider Order Management - MEDITECHJOHN J MD

Waters, Doris
77 F
EC0000027537 / EC00058759 / SVVIVII0011730
2 South Nurse Station 1234567 PRE ER

Software by MEDITECH

Imaging AUC

Test Ordered
IA CT wrist LT w con (IACT)
Reason: wrist pain

* Claim Modifier: MG
Modifier Description: No AUC available
Vendor G-Code: G1004
Vendor Name: NDSC
ID: 5196438
Appropriateness Score: No Score
Override Reason:

Record List
Other Visit
Special Panels
24 Hour
Vital Signs
I & O
Notes
Medications
Order History
Laboratory
Microbiology
Blood Bank
Pathology
Imaging
Other Reports
Care Trends
Care Activity
History
Summary
Encounters
Referrals
Problem List
Discharge
Orders
Document
Reconcile Meds
Sign

Cancel OK ? ? ? ? ? ? ? ? ? ?

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 NDSC UI, and the MD modifier is applied to the order in the background. The facility is removed from the parameter when the extreme or uncontrollable circumstance has passed.

Emergency Department Management > Provider Order Management > Orders > Imaging AUC

Provider Order Management - MEDITECH, JOHN J MD

Fox, Lenny
85 M

ET0000000035 / EM00069268 / SVVIVII0024830
Case Management PRE ER

Software by MEDITECH

Imaging AUC

Test Ordered
IA CT head/brain w con (IACI)
Reason: PAIN

* Claim Modifier: MD
Modifier Description: Uncontrolled Circumstance
Vendor G-Code
Vendor Name
ID
Appropriateness Score
Override Reason

Cancel OK ? ? ? ? ? ? ? ? ? ?

Emergency Exception

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 ED Priority Exceptions field in the Imaging Appropriate Use Criteria Dictionary.

When the patient's ED priority is listed in this field, the NDSC UI does not appear. The MA modifier is added to the order in the background. If the patient is then rolled into an *Inpatient* or *Observation* patient, the ED Exception no longer applies.

Emergency Department Management > Provider Order Management > Orders > Imaging AUC

Provider Order Management - MEDITECHJOHN J MD

Fallow, Joshua
75 M
Software by MEDITECH

EC0000027556 / EC00069269 / SVVIVI0024831
Emergency Room** PRE ER

Record List
Other Visit
Special Panels
24 Hour
Vital Signs
I & O
Notes
Medications
Order History
Laboratory
Microbiology
Blood Bank
Pathology
Imaging
Other Reports
Care Trends
Care Activity
History
Summary
Encounters
Referrals
Problem List
Discharge
Orders
Document
Reconcile Meds
Sign

Test Ordered
IA CT head/brain w con (IACT)
Reason: worst headache of life

* Claim Modifier
Modifier Description
Vendor G-Code
Vendor Name
ID
Appropriateness
Score
Override Reason

MA
Emergent Condition

Cancel OK ? ? ? ? ? ? ? ? ? ?

Manual Entry

The manual entry screen has two new fields to allow the user to select the g-code and the claim modifier. The user selects the applicable *Claim Modifier* and *Vendor G-Code* from the group response lookups.

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. The vendor g-code is required for the modifiers of *ME* (Adheres to AUC), *MF* (Does not Adhere to AUC), and *MG* (No AUC Available).

Imaging and Therapeutic Services > Technologist Desktop > New Order

Technologist Desktop - CEC/CEC/C.DI (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

Waters, Doris RAD EC0000025935
77/F EC00058759
Allergy/AdvReac: Amoxicillin

Imaging AUC

* Claim Modifier ME Adheres to AUC

* Vendor G-Code G1007

* Vendor Name AIM Specialty Health

ID

Appropriateness

Score

Override Reason

Cancel Save

Last: IACT order: IA CT head/brain wo con, 11/05/19 at Main Hospital (Logged)

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

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."

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 site
- Restrict to registration types
- Restrict to financial classes
- Restrict to provider(s)
- 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
- Restrict to AUC modifier
- Include Orders with no Modifier Y/N.

Order Entry > Care Area > Reports > Order Reports > Imaging AUC Deficiency and Utilization Report

Imaging AUC Deficiency and Utilization Report - CEC/CEC (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

*From Service Date 07/09/20
*Thru Service Date 07/16/20

Restrict To

Category
Facility
Site
Registration Types
Financial Class
Provider
AUC Type
AUC Modifier

*Include Orders With No Modifier Yes

Cancel OK ? [Icons]

Order Entry > Care Area > Reports > Order Reports > Imaging AUC Deficiency and Utilization Report

DATE: 07/16/20 @ 1626 USER: MT					Order Entry US S5.6.7 Imaging AUC Deficiency and Utilization Report							PAGE 1	
SERVICE DATES: 07/09/20 - 07/16/20													
SERVICE DATE	TIME	CATEGORY PROCEDURE	OE ORDER NUMBER	STATUS	ORDER DOCTOR PHONE #	SOURCE	FACILITY	SITE	Modifier AUC TYPE	PATIENT NAME/DOB	ACCOUNT/UNIT #	TYPE	FIN CLASS
07/10/20		IACT IAHEADWO	0710-0001	Logged	MEDITECH,JOHN J MD 888-456-1623	Telephone	CEC	CEC	ME Manual Entry	auc.patient	EC0000015226	ER	
07/10/20	1320	CTS AUC		Unverified	Brown,Amy D (555) 333-4554	Telephone	CEC	CEC	No Modifier	MONSON,LUCIE 06/25/1955	EC0000027558 EC00069270	IN	MC

Setup

MIS Dictionaries

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 non-ambulatory 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.

MIS > Clinical Dictionaries (F-O) > MIS Imaging Appropriate Use > Enter/Edit Imaging Appropriate Use

MIS Imaging Appropriate Use (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

Imaging Appropriate Use Last Edit: 08/10/20 14:39

Extreme Circumstances Bypass AUC Facility

A
CAEM
CM

Imaging Appropriate Use Criteria Facility

.DFT
A
B

Enable For Application

AOM
ITS
POM/OE

Include Registration Type

CLI
ER
IN

Include Financial Class

BC
MC
MCRA

ED Priority Exceptions

CDSM Queries

Claim Modifier
Vendor G-Code
Vendor Name
ID
Appropriateness
Score
Override Reason

CDSMMOD
CDSMGCODE
CDSMVENO
CDSMID
CDSMAPP
CDSMSCORE
CDSMRSN

Reason for Exam

BLRFE
EDM.CC
HLMREASON2
IA.REASON
IA.RFE
ITSEDMCC

Cancel Save ? ? ? ? ?

A new ED Priority Exceptions parameter was added to allow for the Emergency Exception. This field is available to be defined for non-ambulatory 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

MIS > Clinical Dictionaries (F-O) > MIS Imaging Appropriate Use > Enter/Edit Imaging Appropriate Use

MIS Imaging Appropriate Use (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

Imaging Appropriate Use Last Edit: 08/10/20 14:39

Extreme Circumstances Bypass AUC Facility

A
CAEM
CM

Imaging Appropriate Use Criteria Facility

.DFT
A
B

Enable For Application

AOM
ITS
POM/OE

Include Registration Type

CLI
ER
IN

Include Financial Class

BC
MC
MCRA

ED Priority Exceptions

CRITICAL

CDSM Queries

Claim Modifier CDSMMOD
Vendor G-Code CDSMGCODE
Vendor Name CDSMVENO
ID CDSMID
Appropriateness CDSMAPP
Score CDSMSCORE
Override Reason CDSMRSN

Reason for Exam

BLRFE
EDM.CC
HLMREASON2
IA.REASON
IA.RFE
ITSEDMCC

Cancel Save ? ? ? ? ?

MIS Group Response Queries

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 Group Response

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

MIS > Dictionaries > Custom Defined Routines > Enter/Edit MIS Group Response Dictionary

Enter/Edit MIS Group Response Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

CDSMMOD - CDSM CLAIM MODIFIERSLast Edit: 01/27/20 15:23

MnemonicCDSMMOD

*ActiveY

*NameCDSM CLAIM MODIFIERS

*Maximum Element Length10

Columns to display in PCS3

SourceC

Edit Users

MT

PRC

Element Code	Element Name	PCS/EMR Rank	ORM/EDM Rank	Value	Normal	PCM Description	Edit Portal Name
MA	Emergent C...						
MB	Insufficient I...						
MC	EHR/CDSM ...						
MD	Uncontrolle...						
ME	Adheres to ...						

Bullets

Mnemonic

Description

Comment Text

1

2

PCS Preview

ORM/EDM Preview

Cancel

Save

?

Vendor G-Code Query Group Response

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.

MIS > Dictionaries > Custom Defined Routines > Enter/Edit MIS Group Response Dictionary

Enter/Edit MIS Group Response Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

CDSMGCODE - CDSM VENDOR G-CODES Last Edit: 04/15/20 13:11

Mnemonic:

*Active: ☒ Y

*Name:

*Maximum Element Length:

Columns to display in PCS:

Source:

Edit Users

MEDITECH
MT
PRC

Element Code	Element Name	PCS/EMR Rank	ORM/EDM Rank	Value	Normal	PCM Description	Edit Portal Name
G1001	eviCore						
G1002	MedCurrent						
G1003	Medicalis						
G1004	NDSC						
G1005	RadMD						

Bullets

Mnemonic	Description

Comment Text

1	
2	

In the case where the CDSM vendor is not provided or does not appear in 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) Group Response

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.

MIS > Dictionaries > Custom Defined Routines > Enter/Edit MIS Group Response Dictionary

Enter/Edit MIS Group Response Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

CDSMVENO - CDSM Vendor Name (Optional) Last Edit: 02/21/20 14:21

Mnemonic: CDSMVENO

*Active: Y

*Name: CDSM Vendor Name (Optional)

*Maximum Element Length: 10

Columns to display in PCS: 3

Source: C

Edit Users

Element Code	Element Name	PCS/EMR Rank	ORM/EDM Rank	Value	Normal	PCM Description	Edit Portal Name
1	This is a ne...						

Bullets

Mnemonic: Description:

Comment Text

1: 2:

PCS Preview ORM/EDM Preview Cancel Save ? ? ? ? ?

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: The vendor name is only needed if reporting G-Code G1011.

MIS > Enter/Edit MIS Customer Defined Screen Dictionary > Screens > General Info

Enter/Edit MIS Customer Defined Screen Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

AUC - AUC Last Edit: 06/22/20 07:20

General Info Query Def Print Def PreView Edit Preview Select Overflow Preview View

Mnemonic AUC

*Active	Y
*Description	AUC
*Type	BAR TXNS
MS Word Row Size	

Edit Users

Cancel Save ? [Globe] [Printer] [Lock] [Document]

MIS > Enter/Edit MIS Customer Defined Screen Dictionary > Screens > Query Def

Enter/Edit MIS Customer Defined Screen Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

AUC - AUC Last Edit: 06/22/20 07:20

General Info Query Def Print Def PreView Edit Preview Select Overflow Preview View

Mnemonic AUC

	*Query	Text	Page	Sect	Seq	Ht	Req	Attr
1	CDSMMOD	CDSM Claim Modifier	1	1	1			
2	CDSMVENO	CDSM Vendor Name (Op)	2	1	1			
3	CDSMGCO...	CDSM Vendor G-Codes (Optional)	4	1	1			
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 will take precedence over a charge category CDS.

Enter/Edit B/AR Procedure Dictionary (Charges) (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

3501 - CAT SCAN KNEE Last Edit: 07/06/20 15:06

General Rate/Replacement General Ledger **Claims** LAB Identifiers

Alternate Codes

Type
CPT-4

Effective Date	Alternate Code	Description
01/01/00	12345	

Quantity Adjustment for Forms

Claim Group

Effective Date	Multiplier

Customer Defined Screen AUC

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.

Enter/Edit Charge Category Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

350 - 350 CAT SCAN GENERAL Last Edit: 01/27/20 12:59

Mnemonic 350

*Active Y

*Name 350 CAT SCAN GENERAL

Customer Defined Screen AUC

Cancel Save ? [Icons]

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 along with 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 and 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, a separate line appears with revenue code 0359 (if the claim field is Y), or revenue code 0351 (if the claim field is N).

- **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's printed on the claim for all g-codes, for 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.

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

Enter/Edit Claim Check Data Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

AUC ALT CD - AUC ALT CODE - PEF Last Edit: 06/08/20 11:16

Mnemonic AUC ALT CD

Active ☒ Y

*Name AUC ALT CODE - PEF

List Data Values

45678
73201
76360
76521

List Data Values as Ranges

From	*Thru
12345	12347

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 side and the description on the right side.

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

Enter/Edit Claim Map Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

AUC DESC M - AUC REV CODE TO DESCRIPT

Last Edit: 02/10/20 09:43

MnemonicAUC DESC M

*ActiveY

*NameAUC REV CODE TO DESCRIPT

Panel

If Data Value in File Is

* Use This Value on Claim

350	350- QWERTY - PEF

From Value

*Thru Value

* Use This Value on Claim

350	359	359- REV DESCRIPT
0350	0359	0359 - REV DESCRIPTION

For Other Data Values Use

If There is no Data Value Use

Cancel

Save

?

Claim Dictionary

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

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

Enter/Edit Claim Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

5010 L AUC - 5010 INST - AUC line = PEF Last Edit: 04/27/20 10:44

Eligibility General Checks/Fields/Sections

Check	Action	Online Claim Edit

NDC Format

Field	Code	*Type	Override	Value	Map
2420B/NM1/04		CONSTANT	Y	JAMES	
AUC		CONSTANT	Y	Y	
AUC ALT CD		LIST	Y	AUC ALT CD	
AUC PENNY		CONSTANT	Y	Y	
AUC REV CODE OTH		CONSTANT	Y	Y	
GS/02		CONSTANT	N	sen cd 12	

	Claim Section	Charge Category	Procedure Code	Covered
1	110	110		C
2	180	180		C
3	200	200		C
4	250y	250		C
5	270	270		C
6	300	300		C

Cancel Save ? [Icons]

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

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

Enter/Edit Claim Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

5010P AUC - 5010 PROF AUC Last Edit: 04/09/20 14:08

Eligibility General **Checks/Fields/Sections**

Check	*Action	Online Claim Edit
AUC REQ GCD	REJECT	
AUC REQ MOD	REJECT	
AUC REQ NPI	REJECT	
AUC REQ VEN NM	REJECT	

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	
DRUG MOD		CONSTANT	Y	JW	
DRUG USE		CONSTANT	Y	MEDI.NWASTE	
DRUG WASTE QRY		CONSTANT	Y	MEDI.WASTE	

	Claim Section	Charge Category	Procedure Code
1	1500E	110	
2	1500E	120	
3	1500E	200	
4	1500E	250	
5	1500E	270	
6	1500E	300	

Cancel Save ? [Icons]

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

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

Enter/Edit Claim Dictionary (MTUNV56/D5.67/S5.6.7) - Joseph Meditech

UB AUC L - UB04-F AUC line Last Edit: 05/11/20 07:38

Eligibility General **Checks/Fields/Sections**

Check	*Action	Online Claim Edit
AUC REQ GCD	REJECT	
AUC REQ MOD	REJECT	

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	N	
AUC REV CODE OTH		CONSTANT	Y	N	
LAB SITE QUERY		CUST-DEF	Y	BAR.LABSIT	

	Claim Section	Charge Category	Procedure Code	Covered
1	110	110		C
2	111	111		C
3	180	180		C
4	207	207		C
5	250	250		C
6	270	270		C

Cancel Save ? [Icons]

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

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

1500 AUC - 1500-F12 Last Edit: 05/26/20 14:11

Eligibility General Checks/Fields/Sections

Check	*Action	Online Claim Edit
AUC REQ GCD	REJECT	
AUC REQ MOD	REJECT	
AUC REQ NPI	REJECT	
AUC REQ VEN NM	REJECT	

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	N	

	Claim Section	Charge Category	Procedure Code
1	1500	300	
2	1500	320	
3	1500	340	
4	1500	352	
5	1500	360	
6	1500	360 S	

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 reports on claims:

837 Institutional & 837 Professional

- The imaging charge procedure and modifier print 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*AUC LX1DK4444444457LX2DK9876541118~
---	----	--

- On an 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 the 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 the vendor name.
 - For example,** if G-Code G1011 was on line three 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, 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 the 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 the imaging claim.

Supporting Documentation

CMS.Gov

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

Client/Server Workflow Guides:

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

Questions

Please contact your MEDITECH Order Management or Claims specialist.