Seema Verma Administrator Centers for Medicare & Medicaid Services 7500 Security Blvd. Baltimore, MD 21244-8013

Dear Administrator Verma:

The undersigned organizations constitute the overwhelming majority of health care professionals who order or furnish advanced diagnostic imaging tests. While committed to consultation of appropriate use criteria (AUC) for advanced diagnostic imaging tests, we are unconvinced the Medicare AUC Program, including the 2020 education and operations year, can be implemented without significant disruption to physicians, hospitals and other health care providers. We therefore urge the Centers for Medicare and Medicaid Services (CMS) to delay the AUC Program educational and operations testing year.

CMS should continue voluntary participation in the AUC Program through at least 2020. Voluntary participation should not require consultation of AUC using a CMS qualified Clinical Decision Support Mechanism (CDSM) nor should Medicare reimbursement be contingent upon documentation of consultation on the furnishing clinician's claim. Physicians and other health care providers are unprepared for another significant regulatory requirement. Our societies, while committed to educating providers about Medicare policies and mandates, continue to prioritize investment in education and training for successful participation in Medicare's Merit-based Incentive Payment System (MIPS) and alternative payment models (APMs). Preparing physicians and other providers for a Medicare AUC Program education and operations year that requires use of a qualified CDSM and claims documentation will divert important resources and attention away from meaningful quality improvement.

More than five years has passed since enactment of the Protecting Medicare Access Act, which established the AUC Program. Much has changed since 2014. Physicians and other health care professionals are incentivized through MIPS to improve health care quality and reduce resource use; Medicare is requiring APM participants to assume more downside risk; and imaging volume has dropped .2 percent on average over the last five years with advanced imaging accounting for only 4.7 percent of total Medicare allowed charges in 2017. Given these developments, the AUC Program amounts to another administrative layer with benefits not well-articulated.

¹ Medicare Payment Advisory Commission Report to the Congress: Medicare Payment Policy, March 2019; http://www.medpac.gov/docs/default-source/reports/mar19 medpac entirereport sec.pdf?sfvrsn=0

By CMS' own admission, information on the benefits of physicians adopting qualified CDSMs or automating billing practices for specifically meeting the AUC requirements do not yet exist, and "information on benefits overall is limited." We are also deeply concerned that many clinicians will be forced to abandon AUC that has been developed by their professional societies because vendors have no obligation to incorporate all applicable AUC into their CDSMs. For example, cardiologists who have relied on the American College of Cardiology AUC — some for nearly a decade — will be forced, as an unintended consequence of the law, into consultation of AUC developed by another organization or specialty. We do not believe the Program's education and operations year should begin in 2020 given that it marginalizes specialty specific peer-reviewed guidelines from which AUC emanate and, consequently, will inevitably interfere with care delivery.

On behalf of the thousands of health care providers that we represent, we applaud your commitment to "Patients over Paperwork" and ask you to honor that commitment by delaying the Medicare AUC Program education and operations period.

Sincerely,

American Academy of Family Physicians

American Academy of Physical Medicine and Rehabilitation

American Alliance of Orthopaedic Executives

AMGA

American Association of Neurological Surgeons

American Association of Orthopaedic Surgeons

American College of Osteopathic Surgeons

American College of Physicians

American College of Surgeons

American Gastroenterological Association

American Osteopathic Association

American Society for Dermatologic Surgery

American Society for Gastrointestinal Endoscopy

American Society of Neuroimaging

American Society of Nuclear Cardiology

American Urological Association

Congress of Neurological Surgeons

Heart Rhythm Society

Medical Group Management Association

North American Spine Society

The Society for Cardiovascular Angiography and Interventions

Society of Cardiovascular Computed Tomography

² Medicare Program; Revisions to Payment Policies under the Physician Fee Schedule and Other Revisions to Part B for CY 2019