

Choosing the right qualified CDS mechanism for the CMS Appropriate Use Criteria program

A starter guide

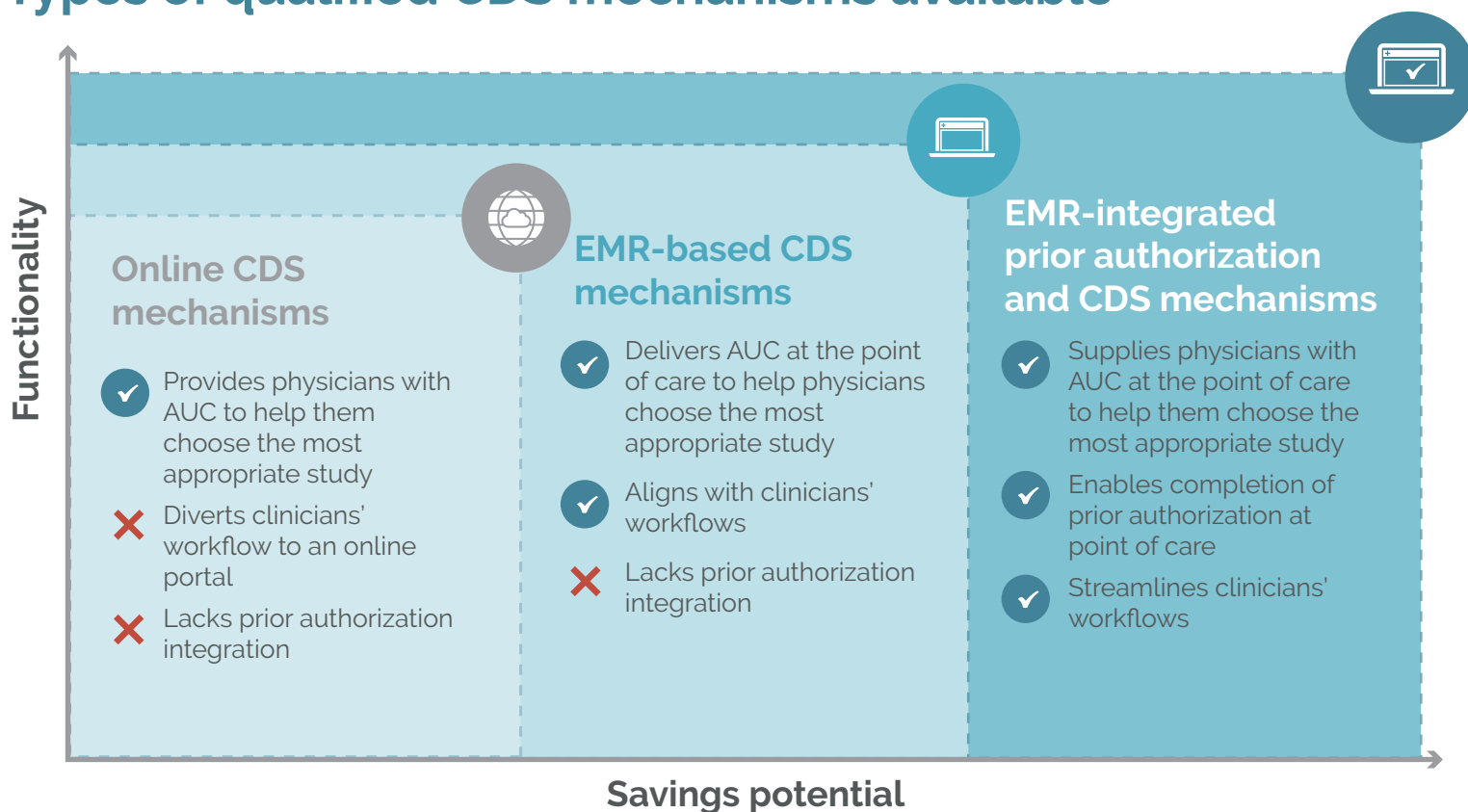


The testing period for the Centers for Medicare & Medicaid Services (CMS) Appropriate Use Criteria (AUC) Program starts in less than two years. This means that health systems and provider groups like yours soon must explore a critical question: Which qualified clinical decision support (CDS) mechanism, or tool, should we invest in?

That's no simple decision. With more than 15 mechanisms available (and additional ones likely on the way), it's easy to feel overwhelmed by the number of options on the market.

This starter guide will help. We'll cover what types of mechanisms are available and what capabilities your organization should look for to not only fulfill CMS requirements but free up administrative resources as well.

Types of qualified CDS mechanisms available



Can we just use our existing CDS tool instead?

Standard CDS tools and qualified CDS mechanisms function similarly. They both evaluate the appropriateness of advanced imaging based on clinical criteria and suggest more-appropriate studies when necessary.

However, only CMS-qualified CDS mechanisms will fulfill the program's requirements. If your existing CDS tool is CMS-qualified, then not to worry—it will comply with the program. Keep in mind, though, that a qualified CDS mechanism is not a substitute for health plans' prior authorization—without an EMR-integrated prior authorization and CDS mechanism, you will need separate systems and workflows—one for prior authorization and one for the CMS program.

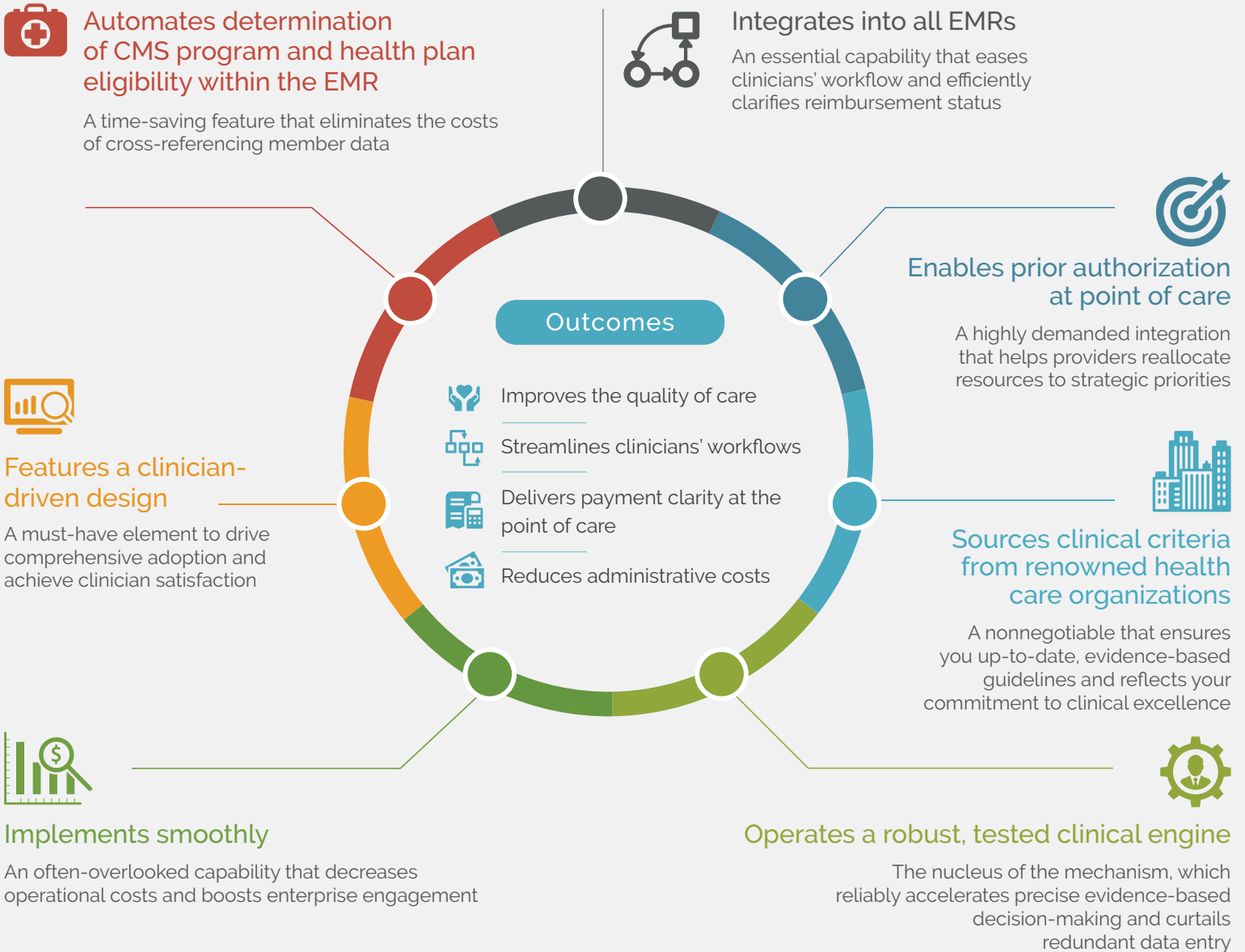


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The anatomy of a high-performing mechanism

Capabilities



Ready to learn more?

Schedule a personalized webinar with our AIM Inform team to learn how merging your prior authorization and your CMS Appropriate Use Criteria Program workflows will reduce your operational costs and improve your delivery of care.

For more information, contact

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