The undersigned organizations thank you for inclusion of language in the report accompanying the Fiscal Year 2022 Labor, Health and Human Services, and Education spending bill that requests a report from the Centers for Medicare and Medicaid Services (CMS) on the implementation of the Medicare Appropriate Use Criteria (AUC) Program for advanced diagnostic imaging.

As the report language notes, it has been seven years since Congress passed the Protecting Access to Medicare Act, establishing the AUC Program. CMS has struggled to implement the program, and, in the intervening years, the Program has become outdated as new Medicare payment and delivery models that hold clinicians accountable for health care resource use have evolved. The Program requires thoughtful re-examination by CMS and Congress, and in consultation with professional medical societies, before CMS attempts to implement the penalty phase of the Program as soon as 2023.

Excessive administrative burden is a major contributor to physician burnout, which has accelerated during the pandemic. If ever fully implemented, the AUC Program would apply to every clinician who orders or furnishes an advanced diagnostic imaging test, except for emergency and inpatient services, and would be layered on top of other CMS quality programs that are intended to improve patient outcomes and incentivize appropriate use of health care resources. Especially at a time when physician practices and hospitals are experiencing staffing shortages, they should not be expected to make investments in activities that are administratively burdensome and costly when the consultation of AUC could be incentivized through existing CMS quality programs.

Communication between CMS and Congress regarding the Program and its implementation challenges has been lacking to date. We are optimistic the report language will result in a long-overdue discussion that will lead to legislative repeal of or substantial revision to the law thereby affording physicians and other health care providers the flexibility to consult AUC in a form and manner that is practical, efficient and meaningful to them and their practices.

With enactment of the spending bill, we are hopeful CMS will be responsive to the report language and will work in an expeditious manner to engage with AUC stakeholder organizations in formulating its report to Congress.
Sincerely,

American Academy of Family Physicians
American Academy of Neurology
American Academy of Otolaryngology-Head and Neck Surgery
American Academy of Physical Medicine and Rehabilitation
American Academy of Podiatric Practice Management
American Alliance of Orthopaedic Executives
American Association for the Study of Liver Diseases
American Association of Orthopaedic Surgeons
American College of Gastroenterology
American College of Osteopathic Surgeons
American College of Physicians
American College of Surgeons
American Gastroenterological Association
American Medical Association
American Podiatric Medical Association
American Association of Neurological Surgeons
American Society for Dermatologic Surgery Association
American Society for Gastrointestinal Endoscopy
American Society for Surgery of the Hand
American Society of Nuclear Cardiology
American Society of Plastic Surgeons
American Thoracic Society
American Urological Association
Association of Black Cardiologists
Congress of Neurological Surgeons
Florida Medical Association
Heart Rhythm Society
Iowa Podiatric Medical Society
Maryland Podiatric Medical Association
MCG, Part of the Hearst Health Network
Medical Group Management Association
Michigan Podiatric Medical Association
New Mexico Podiatric Medical Association
Pennsylvania Podiatric Medical Association
Society for Cardiovascular Angiography & Interventions
Society for Cardiovascular Computed Tomography
Tennessee Medical Association
Texas Medical Association
Texas Podiatric Medical Association