

**Instructions for Reporting the Ordering Professional’s NPI
and CDSMs Using HCPCS G1011 on Paper Claims**

The Appropriate Use Criteria (AUC) program for advanced diagnostic imaging services program requires ordering professionals to consult a qualified clinical decision support mechanism (CDSM).

The Ordering professional’s NPI and the related CDSM consulted are required to be reported on the institutional claim. The K3 segment will be used to report line level ordering professional information on electronic institutional claims (837I). On paper UB-04 forms, the NPI will be reported in the Remarks Field (FL 80).

When a CDSM has been qualified by CMS but has not received an assigned HCPCS G-codes, providers report HCPCS G1011. HCPCS G1011 is designated as “Clinical Decision Support Mechanism, qualified tool not otherwise specified”. In the 837I, the CDSM is identified in the SV202-7 segment of the 2400 loop. On paper UB-04 forms, the CDSM name is reported in the Remarks Field (FL 80).

The NPI and G1011 are reported in similar formats in the Remarks Field. Each line starts with a reference to the service line number followed by a colon. “DK” is the qualifier for the ordering provider followed by the ten digit NPI number; “G1011:” precedes the CDSM name.

See example below.

42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE
1	0351 CT SCAN/HEAD	70450 ME
2	0359 CT SCAN/OTHER	G1011
3	0612 MRI/SPINE	72148 ME
4	0619 MRT/OTHER	G10xa
5		
6		

80 REMARKS
1 : DK9876543210
2 : G1011 : AGILEMD
3 : DK9876543210

UB-04 CMS-1450 APPROVED OMB NO. 0938-0997