

FOCUS: Cardiovascular Imaging Strategies

Institution Participation Requirements

FOCUS is an Appropriate Use Criteria (AUC) data collection and quality improvement program designed to serve as an alternative to health plan pre-authorization of cardiac imaging procedures.

By participating in FOCUS, participating Institutions will not be required by participating health plan(s) to file pre-authorization for cardiac imaging procedures.

Participation requirements. These requirements can be briefly summarized as:

All Institutions

1. AUC Data Collection. Prospectively enter 100% of patient cases FOCUS contracted cardiac imaging procedures into the FOCUS online portal at <https://focus.medicalis.com>. The portal will classify each patient case as appropriate, uncertain, inappropriate, and indeterminate based on clinical data documenting the reason for the cardiac imaging procedure. No cases will be denied or require appeal, even those categorized as inappropriate. Each case will be assigned a unique decision support system number that will be transmitted to a patient's participating health plan.
2. AUC Reports. Regularly review the FOCUS portal reports to examine appropriate use patterns and identify areas for improvement and/or ways to maintain performance.
3. FOCUS Community. Exchange information and submit questions to the online FOCUS community through a listserv, community forum Web site, and an ideas competition site; also to ACC national staff, physician members and designated Chapter liaisons.
4. Survey and QI Work. Complete surveys on quality improvement readiness, action planning, and improvement results along with engaging in quality improvement according to health plan requirements.
5. Peer to Peer Consults (Selected Institution). Participation in peer to peer consults electronically through the portal for failure to complete item number 4 within the first 120 days or fails to improve during the improvement period (first year).

To ensure timely and accurate reporting of data to FOCUS, all Institutions must also adhere to the following regarding day to day participation, data collection, and reporting.

7. FOCUS Practice Manager. Identify a FOCUS Institution manager to receive all communications and program materials, participate in training provided by ACCF and implement the program in the practice. Notify ACCF within ten (10) working days of any change in the Project Institution Manager.
8. Accurate and Timely Data Entry. Accurately report clinical data available for each patient into the FOCUS portal prior to the performance of the imaging service. Definitions and data elements collected by FOCUS are posted and available at www.cardiosource.org/focus. The majority of patient cases should be entered in a timely manner by the Institution. Timely is defined as at the time of scheduling

the imaging service for referring physicians and during the patient visit for cardiologists within the Institution.

9. Audit. Auditing of the data will occur to examine patterns of ordering that may indicate Institution-based anomalies (e.g. high percentage of diabetic patients compared to other Institutions). If anomalies are found, random patient cases files documenting the entered data may be requested from the practice and/or health plan to confirm the data.

10. Patient Eligibility. Only those patients being considered for cardiac imaging covered by participating health plan(s) and who are covered by the participating health plan(s) should be entered into FOCUS. To determine covered cardiac imaging procedures, please consult the health plan specific program outline posted at www.cardiosource.org/focus.

11. Data Submission to Participating Health Plan(s). ACCF will periodically provide health plan(s) with Institution and physician level data collected as a part of FOCUS. These reports will be provided starting 60 days from the start of the program.