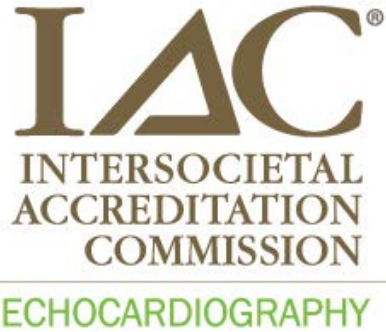


Select a policy below to view the accreditation requirements (listed alphabetically):

Aetna (National) .....	2
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## Payment Policies

To date, the IAC is aware that the following insurers or companies (see index to the left) have adopted echocardiography reimbursement directives. While the IAC attempts to stay abreast of reimbursement policies as a service to the echocardiography community, these policies are changed and updated regularly by the insurance carriers. Therefore, the IAC recommends that applicant facilities contact the insurance carriers in their area for the most accurate and current information to ensure compliance with reimbursement requirements at all times. If you are aware of additional payment policies, or have questions about the information posted, please e-mail [reimbursement@intersocietal.org](mailto:reimbursement@intersocietal.org).

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**PLEASE NOTE:** The policy details within this document detailing accreditation requirements are referenced directly from insurer websites and manuals and are only a portion of the full reimbursement directives, please search for the full policy using the links provided.

## Aetna (National)

Referenced from [Office Manual for Health Care Professionals](#) (applies to all regions) – 4/2018

### Radiology accreditation requirements

To be eligible for reimbursement for the technical component of advanced diagnostic imaging procedures, the following types of providers must be accredited by the American College of Radiology (ACR), the [Intersocietal Accreditation Commission \(IAC\)](#), and The Joint Commission (TJC), and/or RadSite:

- Freestanding imaging centers
- Independent diagnostic testing facilities
- Nonphysician practitioners
- Office-based imaging facilities
- Physicians
- Suppliers of advanced diagnostic imaging procedures

This accreditation requirement applies to the technical part of advanced diagnostic imaging procedures. For these purposes, advanced diagnostic imaging procedures exclude X-ray, ultrasound, fluoroscopy and mammography. Included are:

- Magnetic resonance imaging (MRI)
- Magnetic resonance angiography (MRA)
- Computed tomography (CT)
- **Echocardiograms**
- Nuclear medicine imaging, such as positron emission tomography (PET)
- Single photon emission computed tomography (SPECT)

Note the following:

- Providers not accredited by the ACR, IAC, TJC by January 1, 2012, and/or RadSite by September 2013, will not be eligible for payment for advanced diagnostic imaging services.
- This requirement will not apply to patients who are in the hospital or in hospital emergency departments.
- This policy will not apply to hospitals, unless they own one of the above listed providers.
- The accreditation process can take nine to twelve months.\*

*\*Note from IAC: The IAC accreditation review process generally takes approximately 8 to 12 weeks to complete and the decision returned to the facility. Review the IAC Policies & Procedures for complete details at [www.intersocietal.org/iac/legal/policies.htm](http://www.intersocietal.org/iac/legal/policies.htm).*

**Please note:** The above requirements list only a portion of the full reimbursement directive as related to accreditation. For full requirements, please refer to the [Mid-America Office Manual Supplement](#)»

## **Anthem BCBS (Virginia)**

*Referenced from the Anthem Provider Manual*

### **Diagnostic Imaging Accreditation:**

Within 30 days of receipt of a written request, participating provider shall provide to Anthem such information as may be requested concerning diagnostic imaging services, equipment, licensure and/or accreditation. Participating providers shall provide such information in the manner and format reasonably required by Anthem (including, without limitation, using a web-based tool). Additionally, after making its original submission of this information to Anthem, whenever any material change occurs with respect to Provider's diagnostic imaging services, equipment, licensure and/or accreditation, Provider shall update Anthem on such change within 30 days of the change (unless a shorter timeframe is required elsewhere in this Agreement).

**Providers that perform or conduct any Ultrasound, CT, CTA, MRI, MRA, MRS, PET, Cardiac Echocardiography and/or Nuclear/Nuclear Cardiology studies shall be accredited by the American College of Radiology (ACR), [Intersocietal Accreditation Commission \(IAC\)](#), American Institute of Ultrasound in Medicine (AIUM) or the American Society of Breast Surgeons (ASBS) for each piece of equipment utilized in such studies. Provider has one year from the acquisition of the modality to obtain accreditation.**

Provider will make no charge or render no bill to any Plan, the Covered Individual, or the Covered Individual's guarantor for any of the studies listed above, and they shall have no obligation to make any payment to anyone, including Provider, for such studies, unless the studies are performed on accredited equipment as specified above.

**Please note:** The above requirements list only a portion of the full reimbursement directive as related to accreditation. For full requirements, please refer to the [Anthem Provider Manual](#)»

## BCBS of North Carolina

Free Standing Radiology Facilities (Blue Medicare HMO and Blue Medicare PPO Networks Only)

BlueCross and BlueShield of North Carolina partners with [American Imaging Management \(AIM\)](#) to implement the diagnostic imaging program for high-tech outpatient imaging services. **BCBS of North Carolina implemented a credentialing and accreditation requirement as a condition for network participation for all freestanding diagnostic imaging providers and the equipment used to perform the following modalities: CT/CTA, MRI/MRA, PET, nuclear cardiology and echocardiography.** The company requires that all freestanding diagnostic facilities be accredited by [Intersocietal Accreditation Commission \(IAC\)](#), American College of Radiology (ACR) or The Joint Commission (JCAHO) for any or all of the aforementioned modalities.

For more information on the credentialing process as related to accreditation, please visit [www.bcbsnc.com/content/providers/application/free-standing-radiology.htm](http://www.bcbsnc.com/content/providers/application/free-standing-radiology.htm).

## eviCore Healthcare (National)

### Accreditations, Insurance, and Reporting Requirements:

1. Facilities seeking to furnish the technical component of advanced diagnostic imaging services in MR, MR Breast, CT, PET or NM, and Mammography under the eviCore program are **required to be accredited in each module requested** with one of the following: The American College of Radiology (ACR), the American Institute of Ultrasound in Medicine (AIUM), the American Society of Breast Surgeons (ASBS), [Intersocietal Accreditation Commission \(IAC\) in MR, CT, NM/PET, and Echocardiography](#), The Joint Commission (TJC), or RadSite. The requirements of the accrediting organization must be met at all times to maintain reimbursement.
2. Facilities performing Cardiac procedures will be required to hold accreditation in that Cardiac module. See the Equipment Requirements for specifics.
3. **New installations (brand new site, additional modality, replacement equipment) must have an application submitted to the ACR, IAC, TJC, RadSite, AIUM, and ASBS for accreditation within three (3) months of first clinical use.**

### Equipment Requirements (MRI Standards):

- **Current ACR, IAC, TJC, or RadSite accreditation for each MR on site.**
- **Current ACR, IAC, or TJC accreditation specifically recognizing Cardiac approval for each MR on site which is placed in the program.**
  - RadSite MR Accreditation doesn't recognize sub modules, therefore will not be recognized for Cardiac approval.
  - Those sites currently in the network without Cardiac approval will be allowed 24 months to comply with current requirements. 1st review at 12 months will include proof accreditation has been applied for. 2nd review at 24 months will include proof accreditation is held and confirmed via the accreditation board. If not accredited by the 24th month, termination will be recommended.
- Minimum field strength of 0.3 T field is required.
  - Those sites currently in the network with less than a minimum of 0.3T you will be allowed 12 months to comply with current requirements.
- An eviCore credentialed physician must interpret all images.

### Quick Links:

- [eviCore Healthcare Network Facility Standards](#)
- [Accreditation Requirements Reviewed During Onsite Evaluation](#)
- [Accreditation Modules](#)

## Emblem Health (New York)

REFERENCED FROM EMBLEM PROVIDER MANUAL (HIP OUTPATIENT DIAGNOSTIC IMAGING REFERRAL PAYMENT POLICY)>>REQUIREMENTS FOR ECHO AND NUCLEAR STUDIES)

(**Note from IAC:** The information about our programs listed below from the Emblem Provider Manual was updated for this document to reflect the current program names [i.e., ICAEL is now IAC Echocardiography, etc.]).

There are many clinical reasons practitioners other than radiologists perform in-office imaging as part of their diagnostic and treatment plans. We have radiology and cardiology imaging privileging protocols for HIP/HIPIC-underwritten Benefit Plans that are administered by EmblemHealth, which include Commercial (including GHI HMO, Vytra branded plans), state sponsored and Medicare plans. These privileging protocols make up the Diagnostic Imaging Self-Referral Payment Policy. They are designed to promote the appropriate use of diagnostic imaging by clinicians in office settings.

The payment policy applies to services performed in an office setting (POS 11). It is based on a careful review of the literature and standards of the American Society of Echocardiography (ASE), Intersocietal Accreditation Commission (IAC), American College of Cardiology (ACC) and American Board of Radiology (ABR). The policy designates which imaging procedures will be reimbursed (subject to the member's benefit plan) according to practitioner specialty. It also describes the minimum accreditation and certification requirements.

For providers to perform imaging procedures within their specialty, they must meet and maintain the minimum certification requirements. These requirements are listed in the Outpatient Imaging Self-Referral Payment Policy chart in this chapter. When imaging procedures are performed outside the practitioner's specialty or when the practitioner fails to maintain the minimum certification requirements or obtain Prior Approval when required, claims for such services will be denied, with no liability to the member.

### REQUIREMENTS FOR ECHOCARDIOGRAPHY AND NUCLEAR STUDIES:

EmblemHealth will reimburse cardiologists for approved echocardiography studies (CPT codes 93303, 93304, 93306, 93307, 93308, 93350 and 93351) and nuclear studies (CPT codes 78451, 78452, 78453, 78454, 78466, 78468, 78469, 78472, 78473, 78481, 78483 and 78494), but only if they are performed at accredited locations. Prior approval rules continue to apply where applicable

Accreditation for echocardiography studies requires both:

1. Cardiology board certification of the physician by the American Board of Internal Medicine (ABIM) or American Osteopathic Board of Internal Medicine (AOBIM) and
2. **That services are rendered in laboratories accredited by the [Intersocietal Accreditation Commission \(IAC\) in Echocardiography \(formerly ICAEL\)](#)**

Accreditation for nuclear studies requires both:

1. Certification of the physician by the American Board of Radiology (ABR), American Board of Nuclear Medicine (ABNM) or Certification Board of Nuclear Cardiology (CBNC) and
2. That services are rendered in laboratories accredited **by the [Intersocietal Accreditation Commission \(IAC\) in Nuclear/PET \(formerly ICANL\)](#)** or American College of Radiology (ACR)

### ACCREDITATION STATUS AND SUBMISSIONS

Participating practitioners will be reviewed for active accreditation. For echocardiography services, the review will appear in the national databases of IAC. For nuclear medicine/nuclear cardiology services, the review will appear in the national database of IAC or ACR. All other specialties must submit certification directly to CareCore by e-mail at [provideraccreditations@carecorenational.com](mailto:provideraccreditations@carecorenational.com). For more information about accreditation status or certificate submissions, e-mail [provideraccreditations@carecorenational.com](mailto:provideraccreditations@carecorenational.com) or call 1-800-918-8924, ext. 27901.

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**Please note:** The requirements listed above are only a portion of the complete reimbursement directive as related to echocardiography and nuclear/PET accreditation. For the complete requirements, please refer to the [Emblem Health Provider Manual](#) (Updated 6-8-2018)»

## Highmark (DE, PA, WV)

Referenced from [Highmark Radiology Management Program Privileging Requirements](#) (Effective January 1, 2018)

Since 2005, Highmark has maintained a Radiology Management Program to promote quality and patient safety of selected outpatient, non-emergency, advanced imaging services for its group customers and members. Highmark retains the services of NIA Magellan, a radiology benefits management firm, to support the program. Using Highmark medical policy and nationally accepted clinical criteria, Highmark and NIA Magellan work closely with imaging providers and ordering physicians to ensure that members receive the appropriate diagnostic imaging tests; avoid the inconvenience and expense of unnecessary and/or duplicative services; and reduce their exposure to unnecessary radiation.

### Requirements Specific to Each Modality – Echocardiography

#### Echocardiography/Stress Echocardiography:

- Must be performed and interpreted by or under the personal supervision of a physician credentialed in radiology or cardiology. *\*“Personal supervision” means that the professional provider must be present in the immediate vicinity or must be immediately available by electronic means (e.g. telephone, radio, and telecommunications) in the event his or her personal assistance is required for care of the patient. All supervision must be in accordance with the State licensure requirements of the performing licensed health care practitioner.*
- Echocardiography systems must have Color Flow Doppler capability.
- **Practices must achieve accreditation by the [Intersocietal Accreditation Commission \(IAC\) Echocardiography](#) within 6 months of provisional acceptance in the Privileging Program.**
- Stress Echocardiography must be performed under the direct supervision (physician must be present) of a credentialed physician who has a current Advanced Cardiac Life Support (ACLS) certification.

*\*Network pediatric cardiologists are not required to use a sonographer for pediatric echocardiography.*

#### Obstetrical/Gynecological Ultrasound (Fetal Echo):

- **Practices are eligible to be reimbursed for fetal echocardiography testing (procedure codes 76825, 76826, 76827, 76828 and 93325) as specified in the Obstetrics IV DIP level by achieving accreditation in Fetal Echocardiography from the [Intersocietal Accreditation Commission \(IAC\) Echocardiography](#) or from American Institute of Ultrasound in Medicine (AIUM) within 6 months of Provisional acceptance in the Privileging Program.**
- Fetal Echocardiography must be interpreted by a credentialed radiologist, perinatologist (Maternal Fetal Medicine), or obstetrician.

#### Quick Links:

- [Organizational Provider Participation, Credentialing and Contracting Requirements](#) (Revised 2/23/2018)

**Please note:** This is only a portion of the Highmark Provider Privileging Requirements as related to the requirements for accreditation. For complete requirements, please review the Highmark Provider Privileging Requirements on the Highmark website at [hbs.highmarkprc.com/Care-Management-Programs/Radiology-Management-ProgramPrivileging-Application-and-Requirements](https://hbs.highmarkprc.com/Care-Management-Programs/Radiology-Management-ProgramPrivileging-Application-and-Requirements).

# Horizon BCBS of New Jersey

Referenced from the HBCBSNJ Medical Policy Manual (Reviewed 11/14/2017)

*(Note from IAC: The information about our programs listed below from the HBCBSNJ Medical Policy Manual was updated for this document to reflect the current program names [i.e., ICAEL is now IAC Echocardiography, etc.]*

## Standards for Diagnostic Radiology/Imaging Facilities/Freestanding-Office including Surgi-Centers and Diagnostic Dental - Radiographic Imaging

Horizon BCBSNJ has adopted the standards set forth in this policy to evaluate outpatient diagnostic/therapeutic radiology/ imaging services. The standards focus on the new digital radiography systems, fluoroscopy (including c-arm), interventional radiology, CT, MRI, ultrasound, echocardiography, mammography, nuclear medicine, nuclear cardiology, PET, PET/CT, Cardiac PET and Nuclear/PET in Diagnostic Radiology/Imaging Facilities/Freestanding-Physician Offices, Hospitals including Surgi-Centers and Diagnostic Dental Offices.

**Accreditation/Certification Requirements (note Modality Specific Modules are required for the below services):**

Modality:	ACR	IAC	AIUM	AACE	ASBS
Echocardiography		Adult Transthoracic			
		Pediatric Transthoracic			
		Adult Stress			
		Adult Transesophageal			
		Pediatric Transesophageal			
		Fetal			

### POLICY

Facilities, free standing radiology/diagnostic imaging centers physician offices and radiation therapy providers performing radiology/imaging services or radiation therapy/oncology must comply with the quality standards set forth in the table below. New or newly installed used equipment wherein accreditation is required, must have an application submitted to the accrediting organization within three (3) months of first clinical use and accreditation must be obtained within six (6) months of first clinical use. All other equipment that is not subject to accreditation must comply with standards as set forth below without exception or modality privileges will be deactivated. In addition, all radiology/imaging centers must have undergone a site visit by Horizon BCBSNJ or designated representative prior to approval of participation for the contracted radiology/imaging center. Ambulatory Surgi Centers providing any imaging may be subject to a site visit and must comply with Horizon BCBSNJ’s quality standards as set forth in this document. Cardiologist or providers performing nuclear stress test and approved mobile providers may be subject to a site visit as needed and must adhere to the quality standards set forth.

### PRACTICE/SITE/TECHNOLOGISTS REQUIREMENTS

#### A. Practice Requirements

All CT, MRI, Ultrasound, Nuclear Medicine and PET/CT scanners must be accredited for all applicable accreditation modules by either the American College of Radiology (ACR), the American Institute of Ultrasound in Medicine (AIUM), the Intersocietal Accreditation Commission (IAC) or the American Society of Breast Surgeons (ASBS). **If a radiology site performs echocardiography, accreditation by IAC Echocardiography (formerly ICAEL) is required.** Accreditation must include the appropriate modules for exams being performed.

**Please note:** The above requirements list only a portion of the complete Horizon BCBSNJ policy for Diagnostic Radiology to show the portions related to accreditation only. To review the complete policy for Horizon BCBSNJ, please visit <https://services3.horizon-bcbsnj.com/hcm/MedPol2.nsf> and click on the *Section* tab, click on *Radiology* and scroll down and click on *Standards for Diagnostic Radiology/Imaging Facilities/Freestanding-Office including Surgi-Centers and Diagnostic Dental - Radiographic Imaging*.

#### **IAC Echocardiography (formerly ICAEL) – Payment Policies** *(Last Reviewed by the IAC on 6/14/2018)*

PLEASE NOTE: These policies are changed and updated regularly by the insurance carriers and list requirements as related to IAC accreditation *only*. Therefore, the IAC recommends that applicant facilities contact the insurance carriers in their area for the most accurate and current information to ensure compliance with reimbursement requirements at all times. Further questions about IAC accreditation as related to reimbursement should be e-mailed to [reimbursement@intersocietal.org](mailto:reimbursement@intersocietal.org).



## National Imaging Associates (NIA) (National)

Referenced from the NIA Imaging provider handbook (March 2018)

*(Note from IAC: The information about our programs and websites listed below from the NIA Imaging Provider Handbook was updated for this document to reflect the current program names [i.e., ICAEL is now IAC Echocardiography, etc.]*)

### Provider Assessment

#### NIA Policy

Provider assessment encompasses both credentialing and privileging. NIA employs credentialing criteria and decision-making processes in the review and selection of imaging providers for inclusion in our provider network. Our imaging facility credentialing criteria satisfy the requirements of applicable accreditation and regulatory bodies, in addition to those of our customers.

NIA's privileging program policies establish reasonable and consistent standards for the performance of all diagnostic imaging services. The program establishes minimum participation guidelines that include facility accreditation, equipment capabilities, physician and technologist education, training and certification, documented procedures for handling patient emergencies, ACLS, ARLS or BLS certified physician supervision on-site during contrast and non-contrast enhanced procedures and physician on-site during normal business hours, and facility management components such as radiation safety guidelines (i.e. ALARA —As Low as Reasonably Achievable). These guidelines are established and refined with consideration of the American College of Radiology (ACR) and other accreditation bodies, diagnostic imaging common practice standards, updated literature reviews and new technology assessments. NIA provides ongoing monitoring of imaging practices and facilities.

#### What NIA Will Do:

Complete the online NIA Diagnostic Imaging Provider Assessment Application on RadMD.com. The online tool has intuitive user interface capability and is very easy to use. Submit all required documents, including documentation of current accreditation, licensure and/or certification and insurance. Incomplete applications will not be processed.

The privileging portion requires that you:

- Comply with diagnostic imaging equipment standards (i.e. minimum MR Tesla strengths, CT slices, etc.).
- Utilize appropriately certified technologists.
- **Maintain accreditation by the American College of Radiology (ACR) or [Intersocietal Accreditation Commission \(IAC\)](#) for all modalities performed, as appropriate.**
- Maintain appropriate imaging policies and procedures (i.e. Radiation Safety, ALARA, etc.).

### Quality Assessment Activities

#### NIA Policy

NIA conducts quality assessment activities with its network providers/facilities to:

- Support quality improvement initiatives.
- Evaluate provider clinical practices against guidelines or standards.
- Review potential quality of care concerns.
- **Assess non-accredited providers against NIA standards.\***

NIA's quality assessment includes activities such as image reviews, record reviews and on-site visits.

*\*Acceptable recognized accreditation for providers includes: accreditation for MRI and CT by the American College of Radiology (ACR) and the Intersocietal Accreditation Commission (formerly ICAMRL, ICACTL); accreditation for PET by the ACR or IAC Nuclear/PET (formerly ICANL); accreditation for Nuclear Cardiology by the ACR or IAC Nuclear/PET (formerly ICANL); accreditation for Peripheral Vascular Ultrasound by the ACR or IAC Vascular Testing (formerly ICAVL); accreditation for Echocardiography by IAC Echocardiography (formerly ICAEL); accreditation for Ob/Gyn Ultrasound by the ACR or AIUM; and accreditation for General Ultrasound by the ACR or AIUM.*

**Please Note:** The details above list only a small portion of NIA's requirements as related to accreditation only. For complete NIA requirements, download NIA's Imaging Provider Handbook at [www1.radmd.com/resources/imaging-provider-handbook.aspx](http://www1.radmd.com/resources/imaging-provider-handbook.aspx).

#### IAC Echocardiography (formerly ICAEL) – Payment Policies (Last Reviewed by the IAC on 6/14/2018)

PLEASE NOTE: These policies are changed and updated regularly by the insurance carriers and list requirements as related to [IAC](#) accreditation only. Therefore, the IAC recommends that applicant facilities contact the insurance carriers in their area for the most accurate and current information to ensure compliance with reimbursement requirements at all times. Further questions about IAC accreditation as related to reimbursement should be e-mailed to [reimbursement@intersocietal.org](mailto:reimbursement@intersocietal.org).

## UnitedHealthcare (National)

Referenced from the 2018 UnitedHealthcare Care Provider Administrative Guide (Effective April 1, 2018)

UnitedHealthcare is committed to ensuring that all of our members have access to quality health care, including medical imaging services. We believe patients deserve assurance that equipment, technologists and physician practices are in compliance with professional society-developed performance standards for CT, MRI, PET, nuclear medicine/cardiology and echocardiography procedures (collectively referred to as “Advanced Imaging Studies”).

If you perform Advanced Imaging Studies and bill on a Form CMS 1500, or the electronic equivalent, you must obtain accreditation from one of the accrediting agencies listed below.

- American College of Radiology (ACR)
- [Intersocietal Accreditation Commission \(IAC\)](#)
- RadSite
- The Joint Commission (TJC)

Accreditation is required for the following Advanced Imaging Studies:

- CT scan
- MRI
- Nuclear Medicine/Cardiology
- PET scan
- **Echocardiography**

What you can expect

- The Imaging Accreditation requirement applies to global and technical service claims.
- The accreditation process can take up to 9 months to complete.\*
- Accreditation requires submitting an application and fulfilling accreditation standards.

*\*Note from IAC: The IAC accreditation review process generally takes approximately 8 to 12 weeks to complete and the decision returned to the facility. Review the IAC Policies & Procedures for complete details at [www.intersocietal.org/iac/legal/policies.htm](http://www.intersocietal.org/iac/legal/policies.htm).*

**Pursuant to UnitedHealthcare's Imaging Accreditation Program, we require accreditation for Advanced Imaging Studies. At this time, however, UnitedHealthcare will not require accreditation as a condition of eligibility for reimbursement, and therefore will not administratively deny claims for Advanced Imaging Studies based on lack of accreditation. When a decision is made to activate the claim denial component of the Imaging Accreditation Program, we will communicate the effective date to you. UnitedHealthcare remains committed to advancing the quality and safety of imaging services through the Imaging Accreditation Program and will keep you apprised of any changes to our program.**

Stay up-to-date on any changes made to the Imaging Accreditation Protocol on the [UnitedHealthCare website](#) or reference page 76 of the [2018 UnitedHealthcare Care Provider Administrative Guide](#).

## UnitedHealthCare - Oxford Health Plans (CT, NJ, NY)

Referenced from the Radiology Procedures Requiring Precertification for eviCore healthcare Arrangement (*Effective June 1, 2018*)

Accreditation requirements for participating providers (*Note: Hospitals are currently excluded from the accreditation requirements listed below.*):

- All MRI, PET, and CT studies must be performed on an American College of Radiology (ACR), [Intersocietal Accreditation Commission \(IAC\)](#), RadSite or The Joint Commission (TJC) accredited unit or at accredited facilities.

### ACCREDITATION REQUIREMENTS FOR RADIOLOGY SERVICES – Effective 5/1/2018 ([full PDF](#))

In diagnostic imaging, accreditation programs have emerged as key initiatives to advance the quality and safety of imaging studies. It is important that Members receive services from facilities whose equipment, technologists, and physicians are in compliance with established accreditation performance standards.

All freestanding facilities and physician offices performing outpatient radiology imaging studies are required to obtain and maintain accreditation as a condition for reimbursement for the below services.

Provider Specialty	Accreditation	Modality/Procedure
Radiologist, Radiology Facilities, and Multi-Specialty Provider Groups	ACR	MRI, Breast MRI, CT, Nuclear Medicine*, PET, Ultrasound, Breast Ultrasound, Mammography, Stereotactic Biopsy
	AIUM	Ultrasound, Breast Ultrasound, Echocardiography
	ASBS	Breast Ultrasound, Stereotactic Breast Biopsy
	<a href="#">IAC</a>	MRI, CT, Nuclear Medicine*, PET, Ultrasound (Vascular), <b>Echocardiography</b>
	RadSite (except cardiac procedures)	MRI, CT, Nuclear Medicine (SPECT)*, PET
	TJC	MRI, CT, Nuclear Medicine*, PET, Ultrasound, X-ray, Breast Ultrasound, Stereotactic Breast Biopsy

*Note: \*Nuclear Medicine procedures noted with an (\*) are only reimbursable to radiologists when they have the appropriate certification.*

Please see [Radiology Procedures Requiring Precertification for eviCore healthcare Arrangement](#) (*effective June 1, 2018*) for applicable CPT codes. Oxford has engaged eviCore healthcare to manage the accreditation process for our provider network. Accreditations should be faxed to eviCore healthcare at 866-699-8160 with the Accreditation Fax Cover sheet that can be found on the eviCore healthcare website at [www.evicore.com](http://www.evicore.com). To ensure prompt handling of the accreditation please ensure that all applicable facility and physician information is included. If you have specific questions about the application process for accreditation, contact the ACR or IAC on their websites or by phone. For questions about Oxford's accreditation requirements, call 1-800-666-1353.

In addition to accreditation, all radiologists and radiology centers in New York (NY) and New Jersey (NJ), who are interested in participating in the Oxford network and/or radiologists and radiology centers that already participate in the Oxford network and want to add a modality to their practice must also be credentialed. Please refer to the policy titled [Credentialing Guidelines: Participation in the eviCore healthcare Network](#) for additional information.

### IAC Echocardiography (formerly ICAEL) – Payment Policies (*Last Reviewed by the IAC on 6/14/2018*)

PLEASE NOTE: These policies are changed and updated regularly by the insurance carriers and list requirements as related to [IAC](#) accreditation *only*. Therefore, the IAC recommends that applicant facilities contact the insurance carriers in their area for the most accurate and current information to ensure compliance with reimbursement requirements at all times. Further questions about IAC accreditation as related to reimbursement should be e-mailed to [reimbursement@intersocietal.org](mailto:reimbursement@intersocietal.org).

## Wellmark BCBS (Iowa, South Dakota)

REFERENCED FROM WELLMARK PROVIDER GUIDE

### Facility/Entity Accreditation/CMS Requirements

All facilities/entities must have at least one of the following licenses/certifications/accreditations to meet credentialing requirements:

**Radiology/Imaging Center** (including, but not limited to, the following types of centers):

- General Radiology
- CT, CTA
- **Echocardiography**
- Mammography
- MRI, MRA
- Nuclear Cardiology
- PET Scan
- Radiation Oncology
- Ultrasound
- Portable X-Ray
- Mobile Imaging Center

Centers offering any of the services listed immediately below **must be accredited** by ACR or one of the accrediting agencies of the [Intersocietal Accreditation Commission](#) (IAC Vascular Testing, IAC Echocardiography, IAC Nuclear/PET, IAC MRI or IAC CT):

- CT
- CTA
- Nuclear Cardiology
- **Echocardiography**
- PET
- PET/CT
- MRI
- MRA

If the center does not offer any of the services above, it must be accredited by AAAHC, The Joint Commission, ACR, or one of the accreditation agencies of the Intersocietal Accreditation Commission (IAC Vascular Testing, IAC Echocardiography, IAC Nuclear/PET, IAC MRI or IAC CT).

**Please note:** The above requirements list only a portion of the full reimbursement directive. Please refer to the [Wellmark Provider Guide](#) (updated May 2018) for additional information on the complete requirements and for specific requirements for other modalities.