Payment Policies

To date, the IAC is aware that the following insurers or companies 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.

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.
Radiology Accreditation

We require accreditation to be eligible for reimbursement for the technical component of advanced diagnostic imaging procedures. Accreditation can be from:

- American College of Radiology (ACR)
- Intersocietal Accreditation Commission (IAC)
- The Joint Commission (TJC) and/or RadSite

The following types of providers require this accreditation:

- Independent diagnostic testing facilities
- Freestanding imaging centers
- Office-based imaging facilities
- Physicians
- Nonphysician practitioners
- Suppliers 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)

Notes: Providers not accredited by the ACR, IAC, TJC and/or RadSite will not be eligible for payment for advanced diagnostic imaging services. The accreditation process can take 9 to 12 months.*

*Note from IAC: The IAC accreditation review process generally takes approximately 8 to 10 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.

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 Office Manual for Health Care Professionals (Effective 12-2019).
Anthem BCBS (Virginia)

Referenced from the Anthem Provider Manual (Updated 10/2019)

Diagnostic Imaging Accreditation:

Within 30 days of receipt of a written request, Facility provider shall provide to Anthem such information as may be requested concerning diagnostic imaging services, equipment, licensure and/or accreditation. Facility 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 Facility’s diagnostic imaging services, equipment, licensure and/or accreditation, Facility shall update Anthem on such change within 30 days of the change (unless a shorter timeframe is required elsewhere in this Agreement).

Facilities 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. Facility has one year from the acquisition of the modality to obtain accreditation. Facility will make no charge and render no bill to any Plan, the Member, or the Member’s guarantor for any of the studies listed above, and they shall have no obligation to make any payment to anyone, including Facility, 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 at www.anthem.com/provider/policies/manuals » Select Virginia >> Download Facility 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).
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. For more information about accreditation status or certificate submissions, e-mail provideraccreditations@carecorenational.com or call 1-800-918-8924, ext. 27901.

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.)
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

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.
Horizon BCBS of New Jersey

Referenced from the HBCBSNJ Medical Policy Manual (Reviewed 10/09/2018)

(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):

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<th>ACR</th>
<th>IAC</th>
<th>AIUM</th>
<th>AACE</th>
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<td>Echocardiography</td>
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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 3/30/2020)

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.
National Imaging Associates (NIA) (National)
Referenced from the NIA Imaging provider handbook
(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., ICACTL is now IAC CT, 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 activities include such 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/media/867770/nia-imaging-provider-handbook-10102019-final.pdf.
Tufts Health Plan
Referenced from the Cardiology Services Professional Payment Policy (Updated 5/2019)

Echocardiography Privileging

Providers who perform ECG services in an office setting are required to meet one of the following criteria. Refer to the Imaging Privileging Program chapter of the Commercial Provider Manual for additional information on the privileging process, including specialty-specific procedure codes that may be billed.

1. **For a provider to be privileged for both technical and professional echocardiography components (global billing), the provider must be practicing in a practice/facility accredited by the Intersocietal Accreditation Commission (IAC) Echocardiography.**

2. For more information on IAC accreditation, visit the IAC Echocardiography website or call 800.838.2110. If the provider is not IAC-accredited, then he/she must meet the following criteria:
   a. The provider must be certified by the National Board of Echocardiography (NBE)
   b. Ultrasound equipment must meet IAC standards
   c. Staff sonographers must be licensed in ultrasound

3. For a provider to be privileged for professional echocardiography components only, the physician must meet one of the following criteria:
   a. The provider must be certified by the NBE
   b. The provider must meet Level II training in transthoracic echocardiography interpretation, as defined by the American College of Cardiology (ACC)
   c. Providers trained before Level II training requirements became standard must meet equivalent requirements established in the ACC/AHA Clinical Competency Statement on Echocardiography.

For full details, review the Cardiology Services Professional Payment Policy.
UnitedHealthcare (National)
Referenced from the 2020 UnitedHealthcare Care Provider Administrative Guide

Imaging Accreditation Protocol

The Imaging Accreditation Protocol promotes compliance with nationally recognized quality and safety standards. Accreditation is required for the following Advanced Imaging Studies:

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

If you fail to obtain accreditation, your reimbursement may be affected. We may do an administrative claim reimbursement reduction for global and technical service claims. Additional information on this protocol and the required accreditation agencies is on UHCprovider.com/join > Imaging Accreditation.

*Note from UHC - 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.
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

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 January 2020) for additional information on the complete requirements and for specific requirements for other modalities.