



NUCLEAR/PET

Payment Policies

To date, the IAC is aware that the following insurers or companies have adopted nuclear medicine, nuclear cardiology and/or PET reimbursement directives. While the IAC attempts to stay abreast of reimbursement policies as a service to the nuclear/PET 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.

Aetna (National)

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

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.

Arkansas BCBS

Referenced from the ABCBS Provider Manual (Updated November 2019)

Imaging Centers Purchased by Hospitals

Per the terms of participation for the Arkansas Blue Cross and Blue Shield Preferred Payment Plan, Health Advantage HMO network, and USABLE Corporation's Arkansas' FirstSource® and True Blue PPO networks, **advanced imaging centers must be accredited by one of the agencies that meets approval per these networks' required accreditation program.** This includes advanced imaging centers purchased by another organization, including hospitals.

In most situations, a currently accredited imaging center can simply notify the accrediting agency (e.g., American College of Radiology or Intersocietal Accreditation Commission) and ask for a certificate with the new organization's name applied to it. Arkansas Blue Cross, Health Advantage, and USABLE Corporation will need a copy of the new certificate.

Please understand that if the imaging center's new owner is a hospital, the hospital's Joint Commission accreditation does not automatically apply. In order for this to apply, the hospital must be performing both inpatient and outpatient imaging services and the imaging center must have been part of the on-site review performed by the Joint Commission when the accreditation was given.

Please note: The above requirements list only a portion of the full reimbursement directive as related to accreditation. For more information on the ABCBS requirements, please review the [ABCBS Provider Manual](#)»

BCBS of Alabama

Radiology Facility and Technology Assessment Program ([link](#))

All Blue Cross and Blue Shield of Alabama Preferred Radiology (PRP) Providers must have current accreditation through American College of Radiology (ACR) and or [Intersocietal Accreditation Commission \(IAC\)](#).

Exhibit B: Credentialing Criteria

At least one of the following accreditation standards must be met by Provider and Provider's practice site at all times:

- Current American College of Radiology (ACR), IAC Nuclear/PET, IAC CT, IAC MRI, or other national accreditation agencies or standards as determined by Corporation, as applicable. Accreditation must be maintained for every example of the following devices at each practice site: magnetic resonance imaging (MRI), computed tomography (CT) and PET.

[Preferred Radiology Credentialing Verification](#)»

Blue Cross of Idaho

Referenced from the Blue Cross of Idaho Provider Administrative Policy

Imaging Accreditation

This policy is intended to promote reasonable and consistent quality and safety requirements for providers of imaging services. We established these requirements to describe the accreditation and certification conditions a person might associate with high-quality imaging services. We hope to establish an environment where qualified operators perform imaging studies using appropriate equipment and techniques and where qualified physicians interpret images.

These requirements apply to all non-hospital providers of advanced imaging services. They supplement the requirements for facility providers and physicians as contained in the Facility, Physician and Clinic Agreements. All non-hospital providers of advanced imaging services are required to register in the AIM OptiNet system in order to receive the higher compensation for the advanced imaging services. Clinics that complete registration, will be effective the first of the following month of notification of complete registration is received by your provider network management specialist by the 15th of the prior month.

The OptiNet Registration can be accessed through the provider portal at bcidaho.com.

Specific Requirements for Physician and Facility Imaging Providers

- Physician or clinic providers that use advanced imaging equipment in their practice to diagnose and treat their own patients within their own specialty area of practice may not accept referrals from other providers for the purpose of performing diagnostic imaging tests for other providers' patients.
- Facility providers must be certified by Medicare as an Independent Diagnostic Testing Facility (IDTF) or radiology clinic. These facilities may accept referrals from community physicians. These facilities must be available for diagnostic imaging services for a minimum of 40 hours per week and have images available after hours.

General Requirements for Imaging Providers

- Nuclear cardiology practices must achieve accreditation by IAC Nuclear/PET (formerly ICANL) or the ACR (American College of Radiology) within two years of Provisional acceptance in the Privileging Program.

Please note: The above requirements list only a portion of the full reimbursement directive as related to accreditation. Review the complete policy (Reviewed February 2020) on the Blue Cross of Idaho website at <https://providers.bcidaho.com/policies-and-procedures/pap/pap249.page>.

BCBS of Michigan

Freestanding Radiology Center

To enroll, providers in a freestanding radiology center are required to submit an accreditation certificate from one of the following:

- American College of Radiology or,
- [Intersocietal Accreditation Commission](#) or,
- The Joint Commission

For more information, reference the Provider Enrollment and Change Process Required Document Checklist on the BCBS of Michigan website (www.bcbsm.com/content/dam/public/Providers/Documents/enrollment/WP-11225-Req-Doc-Checklist.pdf).

BCBS of Minnesota

Non Credentialed Provider Requirements: Advanced Diagnostic Imaging

Advanced diagnostic imaging services are required to be properly accredited in order to bill for or be reimbursed for services, due to Federal and State laws. The following services are subject to these laws:

- Magnetic Resonance Imaging (MRI)
- Computed Tomography (CT)
- **Nuclear Imaging, Positron Emission Tomography (PET)**
Advanced diagnostic imaging does not include x-ray, ultrasound, or fluoroscopy.

Accreditation of the above providers is required by one of the following entities:

- American College of Radiology (ACR)
- [Intersocietal Accreditation Commission \(IAC\)](#)
- The Joint Commission (TJC); or
- Other relevant accreditation organizations designated by the Secretary of the United States Department of Health and Human Services

All contracted facilities that provide advanced diagnostic imaging (ADI) services must have obtained accreditation by August 1, 2013, and continue to maintain accreditation thereafter. ADI providers requesting network participation must hold current accreditation before a contract offer will be considered. Blue Cross may require advanced diagnostic imaging providers to produce evidence of this required accreditation.

For complete details, refer to the [BCBS of Minnesota Credentialing Policy Manual](#) (updated 4/10/2019)»

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.bluecrossnc.com/providers/network-participation/manually-apply-credentialing-offline.

Centers for Medicare and Medicaid Services (National)

Accreditation of Advanced Diagnostic Imaging Suppliers

I. Background

Section 135(a) of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) (P.L. 110-275) amended section 1834(e) of the Social Security Act (the Act). This amendment requires suppliers of the technical component of advanced diagnostic imaging (ADI) services to be accredited by a designated accrediting organization in order to receive Medicare reimbursement. This accreditation requirement for ADI suppliers was effective January 1, 2012. CMS has the statutory authority to designate accrediting organizations which accredit suppliers furnishing the technical component of ADI services. These requirements do not apply to hospitals or critical access hospitals.

Under section 1861(d) of the Act, an ADI supplier is defined as a physician or other practitioner, or facility such as an Independent Diagnostic Testing Facility that furnishes the technical component of ADI services. "Technical component" is defined as all non-physician work performed by an ADI supplier, including administrative and non-physician personnel time and use of the ADI equipment and facility.

Section 1834(e)(1)(B) of the Act defines "advanced diagnostic imaging" procedures as diagnostic magnetic resonance imaging (MRI), computed tomography (CT), and nuclear medicine imaging procedures, such as positron emission tomography (PET). ADI procedures do not include x-ray, ultrasound, fluoroscopy procedures or diagnostic and screening mammography.

Note: Diagnostic and screening mammography are subject to oversight by the U.S. Food and Drug Administration.

II. Information about the Advanced Diagnostic Imaging Accrediting Organizations

- Application for CMS-designation as an ADI accrediting organization is a voluntary process. Application and re-application procedures are set forth at 42 CFR 414.68(c). (A link to these regulations is available in the "Related Links" section below).
- Each designated ADI accrediting organization may establish its own individual quality standards. At a minimum, these standards must address, but are not limited to, the following areas: staff qualifications; equipment standards and safety; safety of patients, family and staff; medical records; and patient privacy.
- While the standards among the designated ADI accrediting organizations may vary, each accrediting organization must demonstrate that its accreditation program standards meet or exceed the standards established by statute and in the Medicare regulations.
- Designated ADI accrediting organizations are private entities which charge fees for their accreditation services.
- Suppliers or other entities seeking additional information about CMS-designated ADI accrediting organizations and their accreditation programs may contact the accrediting organizations listed below.

III. CMS-designated ADI Accrediting Organizations:

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

For complete policy details, [please visit the CMS website](#)»

eviCore Healthcare (National)

Accreditations, Insurance, and Reporting Requirements:

A facility seeking to furnish the technical component of advanced diagnostic imaging services (MR, CT, PET or NM) is **required to be accredited by one of the following: the American College of Radiology (ACR), the [Intersocietal Accreditation Commission \(IAC\)](#), The Joint Commission (TJC), or RadSite**. Accreditation by the American Institute for Ultrasound in Medicine (AIUM) or the American Society of Breast Surgeons (ASBS) is also acceptable for facilities in networks requiring ultrasound accreditation. ACR accreditation or state certification, is required for all mammography units. Accreditation is required at a modular level for each type Imaging Facility Network Standards NCQA CR-1 Factors 3 & 4 3 effective: 12/13/2019 of service rendered at the facility (for example: the cardiac module is required for all cardiac CT procedures). The requirements of the accrediting organization must be met at all times to maintain reimbursement. (See specific modular requirements under Equipment Requirements). Facilities performing Cardiac procedures will be required to hold accreditation in that Cardiac module. See the Equipment Requirements for specifics (reference [Imaging Facility Network Requirements](#)).

Quick Links:

- [eviCore Healthcare Network Facility Standards](#) (Effective 12-13-2019)
- [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. 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](#)»

Florida Blue

Referenced from the Florida Blue Physicians and Provider Manual

Credentialing Requirements for Ancillary, Facility, Supplier Business, and Ambulatory Surgical Centers

- **If performing MRI, CT, PET, NC (includes cone beam CT) - The Joint Commission, IAC or ACR accreditation is required.**

Please note: The above requirements list only a portion of the full reimbursement directive as related to accreditation. To review the complete Florida Blue provider manual, please visit www.floridablue.com/providers/tools-resources/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 – Nuclear Cardiology, Nuclear Medicine, PET

Nuclear Cardiology:

- Practices must have achieved accreditation by the [Intersocietal Accreditation Commission \(IAC\) Nuclear/PET](#) or the American College of Radiology (ACR) upon submission of privileging application.

Nuclear Medicine:

- Nuclear medicine practices must achieve accreditation by ACR or [Intersocietal Accreditation Commission \(IAC\) Nuclear/PET](#) within 6 months of provisional approval.

Positron Emission Tomography (PET):

- Must have achieved accreditation by the [Intersocietal Accreditation Commission \(IAC\) Nuclear/PET](#) or the American College of Radiology (ACR) upon submission of privileging application.

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., ICANL is now IAC Nuclear/PET, 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
PET	Brain	Neurologic Imaging			
	Cardiac	Cardiac Imaging			
	Oncology	Oncologic Imaging			
Nuclear Medicine	General Nuclear Medicine (Planar)	Nuclear Medicine			
	SPECT				
	Nuclear Cardiology	Nuclear Cardiology			

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.

EQUIPMENT STANDARDS

Equipment and accreditation standards must be met at all times. All MRI, CT, PET/CT, nuclear medicine, ultrasound and x-ray devices must be DICOM compatible. These standards are subject to regular and/or as needed review and will change as hardware and software technology evolves, and quality standards from appropriate accrediting organizations, such as the ACR, IAC, AIUM and/or ASBS.

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 Nuclear/PET (formerly ICANL) – 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.

Independence Blue Cross Group (Philadelphia and Southeastern PA)

Network Participation and Credentialing

Independence requires that all providers be Medicare-certified; in addition, ancillary providers must be accredited by a third-party organization recognized by Independence:

Provider Type	Accrediting or Certifying Organizations*	Accreditation Required
Portable/Mobile X-Ray	ACR, Joint Commission, IAC	YES
Radiology – Advanced Diagnostic Imaging	ACR, IAC, Joint Commission	YES

**At the Plan's discretion, the Plan may recognize any approved accrediting organization deemed acceptable by CMS.*

For complete details about Independence Network Participation and Credentialing Program (Updated 9-2017), please visit www.ibx.com/providers/interactive_tools/credentialing/index.html.

Minnesota House Bill 2276

Effective August 1, 2013, Minnesota facilities and hospitals that furnish advanced diagnostic imaging (ADI) services (inclusive of Nuclear/PET, MRI and CT) must be accredited by an organization approved by the United States Department of Health and Human Services in order to receive reimbursement. **The [Intersocietal Accreditation Commission \(IAC\)](#) has been designated as an approved accrediting organization.** Here are the major points of the bill related to accreditation, facilities should be aware of:

SECTION 1 (SUBDIVISION 2)

Accreditation required. (a)(1) *Except as otherwise provided in paragraph (b), advanced diagnostic imaging services eligible for reimbursement from any source, including, but not limited to, the individual receiving such services and any individual or group insurance contract, plan, or policy delivered in this state, including, but not limited to, private health insurance plans, workers' compensation insurance, motor vehicle insurance, the State Employee Group Insurance Program (SEGIP), and other state health care programs, shall be reimbursed only if the facility at which the service has been conducted and processed is accredited by one of the following entities:*

- (i) American College of Radiology (ACR);
- (ii) [Intersocietal Accreditation Commission \(IAC\)](#);
- (iii) the Joint Commission; or
- (iv) other relevant accreditation organization designated by the secretary of the United States Department of Health and Human Services pursuant to United States Code, title 42, section 1395M.

(2) *All accreditation standards recognized under this section must include, but are not limited to:*

- (i) provisions establishing qualifications of the physician;
- (ii) standards for quality control and routine performance monitoring by a medical physicist;
- (iii) qualifications of the technologist, including minimum standards of supervised clinical experience;
- (iv) guidelines for personnel and patient safety; and
- (v) standards for initial and ongoing quality control using clinical image review and quantitative testing.

(b) *Any facility that performs advanced diagnostic imaging services and is eligible to receive reimbursement for such services from any source in paragraph (a)(1) must obtain accreditation by August 1, 2013. Thereafter, all facilities that provide advanced diagnostic imaging services in the state must obtain accreditation prior to commencing operations and must, at all times, maintain accreditation with an accrediting organization as provided in paragraph (a).*

Subd. 3. Reporting. (a) *Advanced diagnostic imaging facilities and providers of advanced diagnostic imaging services must annually report to the commissioner demonstration of accreditation as required under this section.*

(b) *The commissioner may promulgate any rules necessary to administer the reporting required under paragraph (a).* [View the full requirements for bill](#)»

If your facility is not granted accreditation through one of the approved organizations by August 1, 2013, it will not receive reimbursement. Your facility must, at all times, maintain accreditation with an accrediting organization.

[Read more on the Minnesota Department of Health website](#)»

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 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/media/867770/nia-imaging-provider-handbook-10102019-final.pdf.

IAC Nuclear/PET (formerly ICANL) – 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.

TriWest Healthcare Alliance

Provider Credentialing Requirements (Updated May 2019)

The Department of Veterans Affairs (VA) may perform random onsite visits to provider locations through coordination with TriWest to inspect physical operations and/or review records of Veterans, speak with Veterans, review quality and completeness of accreditation, certification and credentialing, privileging and licensing documentation.

Additional Credentialing Requirements for Clinics/Facilities

Independent Physiological Lab (includes Cardiac Cath Lab and PET Center)	Positron Emission Tomography (PET) Centers shall be accredited by the American College of Radiology (ACR), the Intersocietal Accreditation Commission (IAC) or The Joint Commission (TJC) or RadSite
Magnetic Resonance Imaging (MRI), Freestanding - Facility	MRI and Breast MRI – Accredited by the ACR, IAC, TJC or RadSite
Facility of Portable XRay	Accredited by the ACR or IAC
Outpatient Facility Providing Advanced Diagnostic Imaging	Accredited by the ACR, IAC, TJC or RadSite

For complete details, [please visit the TriWest Healthcare website](#)»

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.*

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

Accreditation Requirements for Participating Providers (Effective January 1, 2020)

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. Refer to [Accreditation Requirements for Radiology Services](#).

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 advanced imaging studies in the eviCore imaging network are required to obtain and maintain accreditation as a condition for reimbursement for the below services. Radiologists seeking reimbursement for advanced imaging must have the laboratory/facility accreditation on file.

Provider Specialty	Accreditation in Appropriate Module	Modality/Procedure
Radiology Facilities	ACR	MRI, Breast MRI, CT, Nuclear Medicine*, PET, Ultrasound, Breast Ultrasound, Mammography, Stereotactic Biopsy
	AIUM	Ultrasound, Breast Ultrasound
	ASBS	Breast Ultrasound, Stereotactic Breast Biopsy
	IAC	MRI, CT, Nuclear Medicine*, PET, Ultrasound
	RadSite (except cardiac procedures)	MRI, CT, Nuclear Medicine (SPECT)*, PET
TJC	MRI, CT, Nuclear Medicine*, PET, Ultrasound, X-ray, Breast Ultrasound, Stereotactic Breast Biopsy	

Wellmark BCBS (Iowa, South Dakota)

Referenced from the 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

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.