Payment Policies

To date, the IAC is aware that the following insurers or companies have adopted vascular testing reimbursement directives. While the IAC attempts to stay abreast of reimbursement policies as a service to the vascular 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.
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 Massachusetts

To receive reimbursement, all professional providers, technical providers, and non-hospital-based free-standing facilities must have privileges for the following diagnostic imaging services:

- Angiography
- Bone Densitometry
- Cardiac CT Scan
- Endovenous Laser Treatment
- Fluoroscopy
- Mammography
- MRI
- Nuclear Medicine, including PET scan
- Ultrasound (general, breast, vascular, thyroid)
- X-ray

BCBS of Massachusetts applies distinct reimbursement criteria to technical providers — who perform imaging services — and professional providers — who read and interpret the images.

Apply to provide technical services:

- You can apply to be reimbursed for costs for owning, leasing, or use of diagnostic imaging for the services listed below.
- Complete a separate application for each location where you own, lease, or otherwise incur the full usage cost of diagnostic imaging equipment for any of the modalities listed below.
- If there are changes to the diagnostic imaging equipment or service site information, submit a new copy of the application with an explanation attached.

For the following modalities, use the TDI Privileging Application:

**Note from IAC:** Only the modalities that require IAC accreditation are listed below, for full listing of requirements by modality, please visit the BCBSMA website.

<table>
<thead>
<tr>
<th>Modality</th>
<th>Technical requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiac CT Scan</td>
<td>Accreditation from IAC CT or ACR</td>
</tr>
<tr>
<td>Endovenous Laser Treatment</td>
<td>Free-standing facility and hospitals</td>
</tr>
<tr>
<td></td>
<td>Accreditation from IAC Vein Center</td>
</tr>
<tr>
<td>Magnetic Resonance Imaging (MRI)</td>
<td>Accreditation from IAC MRI or ACR</td>
</tr>
<tr>
<td>Ultrasound, Vascular</td>
<td>Accreditation from IAC Vascular Testing or ACR</td>
</tr>
</tbody>
</table>

For complete requirements, visit [https://provider.bluecrossma.com](https://provider.bluecrossma.com) click on Office Resources>> Enrollment>> Privileging.
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 - Peripheral Vascular (PV) Ultrasound

- Must be interpreted by or under the personal supervision of physicians credentialed in radiology, vascular surgery, cardiology or neurology. **“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. (Source: Highmark Medical Policy Z-27)
- PV Ultrasound providers must use a sonographer certified by the American Registry of Diagnostic Medical Sonographers (ARDMS), American Registry of Radiologic Technologists (ARRT (S), ARRT (VS), RVT), or Cardiovascular Credentialing International (CCI)
- PV Ultrasound systems must have Color Flow Doppler capability.
- PV Ultrasound providers must achieve accreditation by the Intersocietal Accreditation Commission (IAC) Vascular Testing or the American College of Radiology (ACR) within 6 months of Provisional acceptance in the Privileging Program.

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., ICAVL is now IAC Vascular Testing, 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):

<table>
<thead>
<tr>
<th>Modality:</th>
<th>ACR</th>
<th>IAC</th>
<th>AIUM</th>
<th>AACE</th>
<th>ASBS</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Body</td>
<td></td>
<td>Abdominal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obstetrical (Trimester specific 1st, 2nd or 3rd.)</td>
<td></td>
<td>Obstetrical (Trimester specific 1st, 2nd or 3rd.)</td>
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<tr>
<td>Obstetrical</td>
<td></td>
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<td>Gynecological</td>
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<tr>
<td>Gynecological</td>
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</tr>
<tr>
<td>Vascular – Peripheral</td>
<td></td>
<td>Urologic</td>
<td></td>
<td></td>
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<tr>
<td>Vascular – Cerebrovascular</td>
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</tr>
<tr>
<td>Vascular – Abdominal</td>
<td>Peripheral Venous</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vascular – Deep Vein/Abdominal</td>
<td>Peripheral Arterial</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Ultrasound</td>
<td>Breast Ultrasound</td>
<td>Breast Diagnostic</td>
<td>Breast Ultrasound Diagnostic and Interventional</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Breast Ultrasound with Biopsy</td>
<td>Breast Interventional</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Visceral Vascular</td>
<td></td>
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<tr>
<td></td>
<td>Intracranial cerebrovascular</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Extracranial cerebrovascular</td>
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<tr>
<td></td>
<td>Dedicated MSK</td>
<td>Dedicated Thyroid/Parathyroid</td>
<td>Endocrine Certification in Neck Ultrasound (ECNU)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.

[CONTINUED ON NEXT PAGE]

PRACTICE/SITE/TECHNOLOGISTS REQUIREMENTS

IAC Vascular Testing (formerly ICAVL) – 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.
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.
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 2020 Commercial Provider Manual

Tufts Health Plan Imaging Privileging Program - Imaging Privileges for Non-Radiologists

Tufts Health Plan requires service-specific certification or accreditation for providers to be compensated for the following imaging services. The certifications and accreditations are required from the organizations listed within the category of service identified and providers will only be reimbursed when Tufts Health Plan receives a copy of the certification or accreditation.

Note: Service-specific privileges are not granted retroactively.

VASCULAR ULTRASOUND:

Accreditation by the Intersocietal Accreditation Commission (IAC) is required for providers who are not board certified or eligible in general vascular surgery or cardiovascular disease. For more information about this accreditation, contact IAC at 800.838.2110 or access their website. A copy of the accreditation must be sent to 705 Mount Auburn Street, Mailstop 84, Watertown MA 02472, Attn: Tufts Health Plan Imaging Privileging Committee.

For full details, review the Imaging Privileging Program: Commercial Provider Manual.
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.

<table>
<thead>
<tr>
<th>Provider Specialty</th>
<th>Accreditation in Appropriate Module</th>
<th>Modality/Procedure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radiology Facilities</td>
<td>ACR</td>
<td>MRI, Breast MRI, CT, Nuclear Medicine*, PET, Ultrasound, Breast Ultrasound, Mammography, Stereotactic Biopsy Ultrasound, Breast Ultrasound</td>
</tr>
<tr>
<td></td>
<td>AJUM</td>
<td>Breast Ultrasound, Stereotactic Breast Biopsy</td>
</tr>
<tr>
<td></td>
<td>ASBS</td>
<td>MRI, CT, Nuclear Medicine*, PET, Ultrasound</td>
</tr>
<tr>
<td></td>
<td>IAC</td>
<td>MRI, CT, Nuclear Medicine (SPECT)*, PET</td>
</tr>
<tr>
<td>RadSite (except cardiac procedures)</td>
<td>TJC</td>
<td>MRI, CT, Nuclear Medicine*, PET, Ultrasound, X-ray, Breast Ultrasound, Stereotactic Breast Biopsy</td>
</tr>
</tbody>
</table>
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.