

Payment Policies

To date, the IAC is aware that the following insurers or companies have adopted MRI reimbursement directives. While the IAC attempts to stay abreast of reimbursement policies as a service to the MRI 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 the Office Manual for Health Care Professionals - All Regions

Radiology Accreditation

Aetna requires 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)
- 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
- 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)

Note: Providers not accredited by the ACR, IAC, TJC and/or RadSite will not be eligible for payment for advanced diagnostic imaging services.

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 <u>Network Participation Criteria</u> or the <u>Office Manual for Health Care Professionals – All Regions</u> (Updated February 2025)»

Arkansas BCBS

Referenced from the ABCBS Provider Manual

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 <u>ABCBS Provider Manual</u> (Updated March 2025)»

BCBS of Alabama

Preferred Radiology Program (link)

The Preferred Radiology Program (PRP) was created to:

- Support referring physicians in their decision-making process
- Promote patient safety by eliminating unnecessary duplication of diagnostic services
- Maximize customer benefits by providing the most current clinical and technical recommendations to radiology providers
- Minimize patient out-of-pocket costs by directing patients to a diagnostic facility participating in the Blue Cross network

The following components are included in the program:

- Precertification of Advanced Imaging Services
- Accreditation through American College of Radiology (ACR) and/or Intersocietal Accreditation Commission (IAC) and/or RadSite.

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.

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

All imaging providers must obtain accreditation by the ACR (American College of Radiology) or the <u>Intersocietal</u>
 <u>Commission for the Accreditation (IAC) MRI</u> if performing MRI services.

Please note: The above requirements list only a portion of the full reimbursement directive as related to accreditation. Review the complete policy (Reviewed February 2025) on the Blue Cross of Idaho website at procedures/pap/pap249.page.

BCBS of Louisiana

BCBSLA requires accreditation in Diagnostic Services in order to participate in their networks.

<u>Diagnostic Services (including CMS Independent Diagnostic Testing Facilities)</u>

Accreditation – Accredited facility types: Nuclear Medicine, MRI, **CT** and PET by American College of Radiology (ACR) or Intersocietal Accreditation Commission (IAC) or other appropriate accreditation as applicable.

Learn more at <u>providers.bcbsla.com/provider-networks/facilities-and-hospitals</u> >> Credentialing >> Facility Type Requirement, scroll to Diagnostic Services (including CMS Independent Diagnostic Testing Facilities).

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:

Modality	Technical requirements
Cardiac CT Scan	Accreditation from IAC or ACR
Endovenous Laser Treatment	Free-standing facility or hospitals Accreditation from IAC
Magnetic Resonance Imaging (MRI)	Accreditation from <u>IAC</u> or ACR
Ultrasound, Vascular	Accreditation from IAC or ACR

Note from IAC: Only the modalities that require IAC accreditation are listed above, for full listing of requirements by modality, please visit the <u>BCBSMA website</u>.

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/amslibs/content/dam/public/providers/documents/enrollment/WP-11225-Req-Doc-Checklist.pdf – Updated December 2024.

BCBS of Mississippi

All Network Providers billing the technical component of the MRI must be accredited in MRI by the Intersocietal Accreditation Commission (IAC) or a MRI module by the American College of Radiology (ACR). The professional component of the MRI will be reimbursed based upon the accreditation of the facility as the ACR and the IAC facility accreditations require that interpreting professional physicians also be accredited.

Provider Accreditation for MRI – Network Providers	
Magnetic Resonance Imaging (MRI) of the Chest and Cardiac	Magnetic Resonance Imaging (MRI) of the Spine
Magnetic Resonance Imaging (MRI) of the Abdomen and Pelvis	Magnetic Resonance Imaging (MRI) of the Brain and Head
Magnetic Resonance Imaging (MRI) of the Lower Extremity	Magnetic Resonance Imaging (MRI) of the Breast
Magnetic Resonance Imaging (MRI) of the Upper Extremity	Magnetic Resonance Imaging (MRI) of the Orbit, Face, Temporomandibular Joint (TMJ) and Neck

Please note: The above requirements list only a portion of the full reimbursement directive as related to accreditation. To review the complete medical policies for MRI, please visit www.bcbsms.com/medical-policy-search and use the search tool to locate any of the MRI medical policies listed above.

BCBS of North Carolina

Facilities Application (credentialing + enrollment)

Free Standing Radiology

Please include the following documents with your application:

- A copy of a NC license or Certificate of Need (if applicable per state or federal regulatory requirements)
- One of the following accreditation certificates is required:
 - American College of Radiology (ACR)
 - o Intersocietal Accreditation Commission (IAC)
 - o The Joint Commission (JCAHO)
- Medicare certification
- A general liability malpractice insurance face sheet. It must include current coverage dates, provider name, address, and limits of coverage (\$1 million per occurrence/\$3 million per aggregate) or letter attesting to all covered sites.

For more information on the credentialing process as related to accreditation, please visit www.bluecrossnc.com/providers/network-participation/provider-facility-applications, scroll down Freestanding Radiology.

BlueCross BlueShield of Texas

Accreditation:

A current Certificate or Letter of Accreditation from one of the Accreditation Programs below:

CT / MRI / Nuclear Medicine/PET:

Accreditation from one of the following:

- The American College of Radiology (ACR);
- The Intersocietal Accreditation Commission (IAC); or
- The Joint Commission (JC);

Read more on the BCBSTX website at www.bcbstx.com/docs/provider/tx/network/credentialing/free-standing-imaging-cred-checklist.pdf (Updated 7/2024).

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 reapplication 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:

- 1. 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 of service rendered at the facility (examples: a Head or Neurologic module is required for studies of the brain; the cardiac module is required for all cardiac procedures). The requirements of the accrediting organization must be met at all times to maintain reimbursement.
- 2. Accreditation applications for new installations (new facility, additional modality or replacement equipment) must be submitted to an approved accrediting organization within three (3) months of first clinical use.

Equipment Requirements:

High-Tech Requirements (applicable to all networks):

MR Standards

Current ACR, <u>IAC</u>, TJC, or RadSite modular accreditation for each MR unit at the facility. For example, facilities rendering breast MRI or cardiac MRI must have accreditation relevant to those specific exams.

• Minimum field strength of 0.3T field is required.

Quick Links:

eviCore Healthcare Network Facility Standards (Effective 2/20/2025)

Emblem Health (New York)

Referenced from the Emblem Health Website

Reimbursement Policy:

Outpatient Imaging Self-Referral (Commercial, Medicare, Medicaid) (Administered by EviCore by Evernorth)

Provider Specialty	Code Description	Certification & Accreditation Requirement(s)
Cardiologists (Includes cardiovascular specialist, interventional cardiologist, and cardiac electrophysiologist.)	MRA Chest Cardiac Magnetic Resonance Imaging	Certification Board of Cardiovascular Magnetic Resonance (CBCMR) certification Facility MRI accreditation from: American College of Radiology (ACR) with Cardiac Module OR IAC with Cardiovascular MRI OR RadSite with Cardiac Module
Pediatric Cardiologist	MRA Chest Cardiac Magnetic Resonance Imaging	Certification Board of Cardiovascular Magnetic Resonance (CBCMR) certification Facility MRI accreditation from: American College of Radiology (ACR) with Cardiac Module OR IAC with Cardiovascular MRI OR RadSite with Cardiac Module

Read more in the Anthem Provider Manual, <u>www.emblemhealth.com/providers/manual/radiology-related-programs</u> or the complete reimbursement policy at <u>www.emblemhealth.com/content/dam/emblemhealth/pdfs/provider/provider-manual/outpatient-imaging-self-referral.pdf.</u>

Please note: The requirements listed above are only a portion of the complete reimbursement directive as related to accreditation.

Health Care Facility Licensing Act of Rhode Island

Rhode Island facilities performing magnetic resonance imaging (MRI) services 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 MRI facilities should be aware of:

§ 23-17-51 Magnetic resonance imaging – Quality assurance standards. – (a) Except as otherwise provided in subsection (b) of this section, a magnetic resonance imaging examination eligible for reimbursement under the provisions of any individual or group health insurance contract, plan or policy delivered in this state shall be reimbursed only if the facility at which the examination has been conducted and processed is accredited by either the American College of Radiology (ACR), the Intersocietal Accreditation Commission (IAC), or an alternate nationally recognized accrediting organization whose accreditation standards are substantially similar to and no less stringent than current or subsequent ACR or IAC standards and have been reviewed and deemed adequate by the department of health. All accreditation standards under this section, whether promulgated by the ACR, IAC, or an alternate nationally recognized accrediting organization, shall include, but shall not be limited to, provisions for establishing the qualifications of the physician, standards for quality control and routine performance monitoring by a medical physicist, qualifications of the technologist including minimum standards of supervised clinical experience, personnel and patient safety guidelines, and standards for initial and ongoing quality control using clinical image review and quantitative testing.

(b) Any facility conducting and processing magnetic resonance imaging examinations which, as of June 30, 2006, is receiving reimbursement for such services by a health insurer, health maintenance organization or health plan, but is not accredited pursuant to subsection (a), shall file its application for accreditation within eighteen (18) months of July 14, 2006. Such accreditation shall be obtained not later than twelve (12) months after submission of its application. A facility which begins conducting and processing of magnetic resonance imaging examinations after June 30, 2006 shall file its application for accreditation within twelve (12) months of the date of initiation of the magnetic resonance imaging examinations. Such accreditation shall be obtained not later than twelve (12) months after submission of its application. After such accreditation is obtained, a facility conducting and processing magnetic resonance imaging examinations shall, at all times, maintain accreditation with the appropriate accrediting body. Notwithstanding anything herein to the contrary, any facility which has filed for accreditation pursuant to this subsection (b) and which has not been refused accreditation or withdrawn its application, will be deemed provisionally accredited for the twelve (12) month period dating from the application filing date. Provided, further, that notwithstanding any provision of the general laws or public laws to the contrary, any facility conducting and processing magnetic resonance imaging examinations shall conform to the standards of the appropriate accrediting body at all times, including during the accreditation process and shall certify said conformance to any reimbursing health insurer, health maintenance organization or health plan.

Horizon BCBS of New Jersey

PRACTICE/SITE/TECHNOLOGISTS 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) and The Joint Commission (TJC). If a radiology site performs echocardiography, accreditation by the Intersocietal Accreditation Commission (IAC) is required. Accreditation must include the appropriate modules for exams being performed.

Accreditation Modules (MRI):

IAC	ACR	RadSite
Body Breast Cardiovascular MRA Musculoskeletal Neurological	Body Breast Cardiac Head Magnetic Resonance Angiography (MRA) Musculoskeletal (MSK) Spine	Angiography Body Breast Cardiac Functional Musculoskeletal Neurologic

Learn more at https://www.horizonblue.com/providers/policies-procedures/policies/administrative-policies/standards-all-types-medical-and-dental-diagnostic-radiology-and-imaging-facilities (Last Updated 5/10/2024).

Independence Blue Cross Group (Philadelphia and Southeastern PA)

Network Participation

Organizational providers are required to be Medicare-certified and accredited by a third-party organization recognized by Independence. View the <u>recognized accrediting bodies</u>. Begin the <u>organizational provider credentialing process</u>.

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, please visit www.ibx.com/resources/for-providers/becoming-a-provider/network-participation.

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 <u>Intersocietal Accreditation Commission (IAC)</u> 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»

TriWest Healthcare Alliance

Provider Credentialing Requirements

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 <u>Intersocietal Accreditation Commission (IAC)</u> 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)

Imaging Accreditation

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
- Echocardiography
- MR
- Nuclear Medicine / Cardiology
- PET scan

Pursuant to our Imaging Accreditation Program, we require accreditation for Advanced Imaging Studies. At this time, however, we 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'll communicate the effective date to you. We remain 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.

Learn more at www.uhcprovider.com/en/resource-library/Join-Our-Network/Dental-Vision-Behavioral-Health.html Imaging Accreditation.

UnitedHealthcare (California Ancillary Service Care Providers)

Accreditation from American College of Radiology or Intersocietal Accreditation Commission, in order to participate in the **network** is required for Radiology and Independent Diagnostic Testing Facility (IDTF) - CT, MRI, MRA, PET or Nuclear Medicine.

Learn more at www.uhcprovider.com/en/resource-library/Join-Our-Network/Ancillary-Facilities.html.

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

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
	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

Learn more at www.uhcprovider.com/content/dam/provider/docs/public/policies/oxford/accred-requirements-radiologists-radiology-centers-ohp.pdf (Effective 8-1-2023).

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 <u>must be accredited</u> by ACR or one of the accrediting agencies of the <u>Intersocietal Accreditation Commission</u> (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).

<u>Note from IAC</u>: The above requirements list only a portion of the full reimbursement directive. Please refer to the <u>Wellmark Provider Guide</u> (updated March 2025) for additional information on the complete requirements and for specific requirements for other modalities.