

# **CMS Payment Policies**

To date, IAC is aware of the following states that have adopted CMS reimbursement directives. There are several states in which the Medicare carrier requires or recommends either accreditation of the facility and/or staff credentialing, for reimbursement of vascular testing studies.

While IAC attempts to stay abreast of reimbursement policies mandated by CMS as a service to the vascular testing community, these policies are changed and updated regularly by the insurance carriers. Therefore, 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 may be directed to the IAC via e-mail.

**PLEASE NOTE**: The policy details within this document detailing accreditation requirements are <u>only a portion</u> of the full reimbursement directive, please search for the full policy on the CMS or your jurisdiction's appropriate AB MAC website. Don't know your jurisdiction or contractor? Search on the CMS website <u>here</u>.

# **Medicare Payment Policies**

Medicare communicates echocardiography payment policy primarily through contractor-specific Local Coverage Determinations (LCDs). Select your state's contractor below to view the applicable LCDs:

- CGS Administrators (Jurisdiction 15: Kentucky, Ohio)
- First Coast Service Options (Florida, Puerto Rico, U.S. Virgin Islands)
- National Government Services (Jurisdiction K: Connecticut, Maine; Massachusetts, New Hampshire, New York, Rhode Island and Vermont; Jurisdiction 6: Illinois, Minnesota and Wisconsin)
- <u>Noridian Healthcare Solutions</u> <u>Jurisdiction E</u> (American Samoa, California, Guam, Hawaii, Nevada, North Mariana Islands); <u>Jurisdiction F</u> (Alaska, Arizona, Idaho, Montana, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming)
- <u>Novitas Solutions</u> (Jurisdiction H: Arkansas, Colorado, Louisiana, Mississippi, New Mexico, Oklahoma, Texas, and includes Indian Health Service (IHS) and Veterans Affairs (VA) nationally; Jurisdiction L: Delaware, District of Columbia, Maryland, New Jersey and Pennsylvania)
- <u>Palmetto GBA</u> (Jurisdiction M: North Carolina, South Carolina, Virginia, West Virginia; Jurisdiction J: Alabama, Georgia, Tennessee)
- <u>WPS Medicare</u> (Jurisdiction 5: Iowa, Kansas, Missouri, Nebraska + <u>National Providers</u>; Jurisdiction 8: Indiana and Michigan)

**PLEASE NOTE:** The policy details displayed on the IAC website detailing accreditation requirements are only a portion of the full reimbursement directive, please review the full policy on the CMS website to ensure your facility complies with the complete policy. To find a payment policy, go to <a href="https://www.cms.gov/medicare-coverage-database/search.aspx">www.cms.gov/medicare-coverage-database/search.aspx</a>.

## **CGS Administrators, LLC**

Part A & B MAC

Jurisdiction 15: Kentucky, Ohio

www.cgsmedicare.com

**LCD Title: Non-Invasive Vascular Studies** 

LCD ID #: <u>L34045</u>

**Original Effective Date:** For services performed on or after 10/1/2015 **Revision Effective Date:** For services performed on or after 3/23/2025

## **Credentialing and Accreditation Standards**

The accuracy of non-invasive vascular diagnostic studies depends on the knowledge, skill, and experience of the technologist and interpreter. Consequently, the physician performing and/or interpreting the study must be capable of demonstrating documented training and experience and maintain any applicable documentation. A vascular diagnostic study may be personally performed by a physician or a technologist.

The GAO Report to Congressional Committees entitled Medicare Ultrasound Procedures. Consideration of Payment Reforms and Technician Qualifications Requirements states that "Findings from several peer-reviewed studies, the Medicare Payment Advisory Commission, and ultrasound-related professional organizations support requiring that sonographers either have credentials or operate in facilities that are accredited, where specific quality standards apply. In some localities and practice settings, CMS or its contractors have required that sonographers either be credentialed or work in an accredited facility." (GAO-07-734)

For areas under CGS Administrators, LLC jurisdiction the requirements will be effective for all providers 30 April 2011:

- All non-invasive vascular diagnostic studies must be performed under at least one of the following settings: (1) performed by a physician who is competent in diagnostic vascular studies or under the general supervision of physicians who have demonstrated minimum entry level competency by being credentialed in vascular technology, or (2) performed by a technician who is certified in vascular technology, or (3) performed in facilities with laboratories accredited in vascular technology.
- Examples of appropriate personnel certification include, but are not limited to the Registered Physician in Vascular Interpretation (RPVI), Registered Vascular Technologist (RVT), the Registered Cardiovascular Technologist (RCVT), Registered Vascular Specialist (RVS), and the American Registry of Radiologic Technologists (ARRT) credentials in vascular sonography.

  Appropriate laboratory accreditation includes the American College of Radiology (ACR) Vascular Ultrasound Program, and the Intersocietal Accreditation Commission (IAC) for Vascular Testing (formerly ICAVL).
- Additionally, transcutaneous oxygen tension measurements may be performed by individuals possessing the following
  credentials obtained from the National Board of Diving and Hyperbaric Medicine Technology (NBDHMT): Certified Hyperbaric
  Technologist (CHT), or Certified Hyperbaric Registered Nurse (CHRN).

Please Note: 42 CFR Section 410.33, Independent Diagnostic Testing Facilities, includes credentialing requirements that supersede those above:

The supervising physician must evidence proficiency in the performance and interpretation of each type of diagnostic procedure performed by the IDTF. The proficiency may be documented by certification in specific medical specialties or subspecialties or by criteria established by the carrier for the service area in which the IDTF is located. See 42 CFR Section 410-33 (2) (b).

Nonphysician personnel: Any nonphysician personnel used by the IDTF to perform tests must demonstrate the basic qualifications to perform the tests in question and have training and proficiency as evidenced by licensure or certification by the appropriate State health or education department. In the absence of a State licensing board, the technician must be certified by an appropriate national credentialing body. The IDTF must maintain documentation available for review that these requirements are met. See 42 CFR Section 410-33 (2)(c).

# **First Coast Service Options**

Part A & B MAC

Jurisdiction N: Florida, Puerto Rico, U.S. Virgin Islands

medicare.fcso.com

**LCD Title: Duplex Scan of Lower Extremity Arteries** 

LCD ID #: L33667

**Original Effective Date:** For services performed on or after 10/1/2015 **Revision Effective Date:** For services performed on or after 10/1/2019

## **Training Requirements**

The accuracy of non-invasive vascular diagnostic studies depends on the knowledge, skill and experience of the technologist and the physician performing the interpretation of the study. Consequently, the technologist and the physician must maintain proof of training and experience.

All non-invasive vascular diagnostic studies must be: (1) performed by a qualified physician, or (2) performed under the general supervision of a qualified physician by a technologist who has demonstrated minimum entry level competency by being credentialed in vascular technology, and/or (3) performed in a laboratory accredited in vascular technology.

Examples of certification in vascular technology for non-physician personnel include:

- Registered Vascular Technologist (RVT) credential
- Registered Vascular Specialist (RVS) credential

These credentials must be provided by nationally recognized credentialing organizations such as:

- The American Registry of Diagnostic Medical Sonographers (ARDMS) which provides RDMS and RVT credentials
- The Cardiovascular Credentialing International (CCI) which provides RVS credential

However, if the facility has a documented process for grand-fathering experienced technicians who have performed the services referenced in this LCD (a process addressing years of service and experience with number of supervised cases), this documentation should be available upon request; otherwise the provider must have documentation available upon request which indicates that the technician meets the credentialing requirements as stated above or is in the process of obtaining this credentialing.

Appropriate nationally recognized laboratory accreditation bodies include:

- Intersocietal Accreditation Commission (IAC) in Vascular Testing (formerly ICAVL)
- American College of Radiology (ACR)

General Supervision means the procedure is furnished under the physician's overall direction and control, but the physician's presence is not required during the performance of the procedure. Under general supervision, the training of the nonphysician personnel who actually performs the diagnostic procedure and the maintenance of the necessary equipment and supplies are the continuing responsibility of the physician.

**LCD Title: Non-invasive Extracranial Arterial Studies** 

LCD ID #: L33695

**Original Effective Date:** For services performed on or after 10/1/2015 **Revision Effective Date:** For services performed on or after 1/8/2019

## **Training Requirements**

The accuracy of non-invasive vascular diagnostic studies depends on the knowledge, skill and experience of the technologist and the physician performing the interpretation of the study. Consequently, the technologist and the physician must maintain proof of training and experience.

All non-invasive vascular diagnostic studies must be: (1) performed by a qualified physician, or (2) performed under the general supervision of a qualified physician by a technologist who has demonstrated minimum entry level competency by being credentialed in vascular technology, and/or (3) performed in a laboratory accredited in vascular technology.

A qualified physician for this service is defined as follows: 1) A physician who has staff privileges to interpret vascular laboratory studies in a hospital that participates in the Medicare program in the state of Florida and the U.S. territories of Puerto Rico and the U.S. Virgin Islands (as applicable) or; 2) A physician who works in a certified vascular laboratory or; 3) A physician who has the RVT or the RPVI (Registered Physician in Vascular interpretation – provided by the ARDMS) certificate or ASN: Neuroimaging Subspecialty Certification; 4) Physicians who are not covered by one of these criteria will have until 2008 to comply. Examples of certification in vascular technology for non-physician personnel include:

- Registered Vascular Technologist (RVT) credential
- Registered Vascular Specialist (RVS) credential
- Registered Technologist in Vascular Sonography (R.T. (VS))

These credentials must be provided by nationally recognized credentialing organizations such as:

- 1. The American Registry of Diagnostic Medical Sonographers (ARDMS) which provides Registered Diagnostic Medical Sonographer (RDMS) and Registered Vascular Technologist (RVT) RVT credentials
- 2. The Cardiovascular Credentialing International (CCI) which provides RVS credential
- 3. The American Registry of Radiologic Technologists (ARRT) which provides vascular sonography (VS) credential.

Appropriate nationally recognized laboratory accreditation bodies include:

- Intersocietal Accreditation Commission (IAC) in Vascular Testing (formerly ICAVL)
- American College of Radiology (ACR)

However, if the facility has a documented process for grand-fathering experienced technicians who have performed the services referenced in this LCD (a process addressing years of service and experience with number of supervised cases), this documentation should be available to Medicare upon request; otherwise the provider must have documentation available to Medicare upon request which indicates that the technician meets the credentialing requirements as stated above or is in the process of obtaining this credentialing.

## **National Government Services**

Part A & B MAC

Jurisdiction K: Connecticut, New York, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont Jurisdiction 6: Illinois, Minnesota, Wisconsin

www.ngsmedicare.com

**LCD Title: Non-Invasive Vascular Studies** 

LCD ID #: L33627

**Original Effective Date:** For services performed before or after 10/1/2015 **Revision Effective Date:** For services performed before or after 10/1/2019

#### **Credentialing and Accreditation Standards**

The accuracy of non-invasive vascular diagnostic studies depends on the knowledge, skill, and experience of the technologist and interpreter. Consequently, the physician performing and/or interpreting the study must be capable of demonstrating documented training and experience and maintain any applicable documentation. A vascular diagnostic study may be personally performed by a physician or a technologist.

The GAO Report to Congressional Committees entitled Medicare Ultrasound Procedures. Consideration of Payment Reforms and Technician Qualifications Requirements states that "Findings from several peer-reviewed studies, the Medicare Payment Advisory Commission, and ultrasound-related professional organizations support requiring that sonographers either have credentials or operate in facilities that are accredited, where specific quality standards apply. In some localities and practice settings, CMS or its contractors have required that sonographers either be credentialed or work in an accredited facility." (GAO-07-734)

- All non-invasive vascular diagnostic studies must be performed under at least one of the following settings: (1) performed by a physician who is competent in diagnostic vascular studies or under the general supervision of physicians who have demonstrated minimum entry level competency by being credentialed in vascular technology, or (2) performed by a technician who is certified in vascular technology, or (3) performed in facilities with laboratories accredited in vascular technology.
- Examples of appropriate personnel certification include, but are not limited to, the Registered Physician in Vascular Interpretation (RPVI), Registered Vascular Technologist (RVT), the Registered Cardiovascular Technologist (RCVT), Registered Vascular Specialist (RVS), and the American Registry of Radiologic Technologists (ARRT) credentials in vascular technology. Appropriate laboratory accreditation includes the American College of Radiology (ACR) Vascular Ultrasound Program, and the Intersocietal Accreditation Commission (IAC) in Vascular Testing (formerly ICAVL).
- Additionally, transcutaneous oxygen tension measurements may be performed by individuals possessing the following
  credentials obtained from appropriate credentialing bodies, such as, but not limited to, the National Board of Diving and
  Hyperbaric Medicine Technology (NBDHMT): Certified Hyperbaric Technologist (CHT), or Certified Hyperbaric Registered
  Nurse (CHRN).

# **Noridian Healthcare Solutions (Jurisdiction E/F)**

Part A & B MAC

Jurisdiction E: American Samoa, California, Guam, Hawaii, Nevada, North Mariana Islands Jurisdiction F: Alaska, Arizona, Idaho, Montana, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming www.noridianmedicare.com

Presently, there are no known Part A & B CMS policies for Jurisdiction E or F under Noridian Healthcare Solutions that require or recommend IAC accreditation as a condition for reimbursement for vascular testing studies.

## **Novitas Solutions**

Part A & B MAC

Jurisdiction L: Delaware, District of Columbia, New Jersey, Pennsylvania, Maryland
Jurisdiction H: Arkansas, Colorado, Louisiana, Mississippi, New Mexico, Oklahoma and Texas Indian Health Service (IHS) and
Veterans Affairs (VA)

www.novitas-solutions.com

**LCD Title: Non-Invasive Cerebrovascular Arterial Studies** 

LCD ID #: L35397

**Original Effective Date:** For services performed on or after 10/1/2015 **Revision Effective Date:** For services performed on or after 10/17/2019

## **Training Requirements/Certifications**

The accuracy of non-invasive diagnostic testing studies depends on the knowledge, skill and experience of the physician and/or technologist performing and interpreting the study. Documentation of applicable training and experience must be maintained and made available upon request. Services will be considered reasonable and necessary only if performed by appropriately trained personnel. Please see CMS IOM Publication 100-02, Medicare Benefit Policy Manual, Chapter 15, Section 80, for supervision definitions and requirements for diagnostic tests.

All non-invasive vascular studies must be:

- 1. Performed by a qualified physician; or
- Performed under the general supervision of a qualified physician by a licensed\* technologist who is certified in vascular technology; or
- 3. Performed in an accredited vascular laboratory.

A qualified physician for this service/procedure is defined as:

- A. Physician is properly enrolled in Medicare; and
- B. Training and expertise must have been acquired within the framework of an accredited residency and/or fellowship program in the applicable specialty/subspecialty in the United States or must reflect equivalent education, training, and expertise endorsed by an academic institution in the United States and/or by the applicable specialty/subspecialty society in the United States.

Appropriate technologist certification is limited to American Registry of Diagnostic Medical Sonographers (ARDMS) certification as a Registered Vascular Technologist (RVT), Cardiovascular Credentialing International (CCI) certification as a Registered Vascular Specialist (RVS) or Registered Phlebology Sonographer (RPhS), and the American Registry of Radiologic Technologists (ARRT) certification in Vascular Sonography (VS). Appropriate laboratory accreditation is limited to the American College of Radiology (ACR) Vascular Ultrasound Program, and the Intersocietal Accreditation Commission (IAC) division of Vascular Testing.

The contractor does not establish a credentialing service but the contractor is authorized to determine which organizations it recognizes. For example, the use of the word "national" in the organization's name does not, in itself, meet Medicare standards for national credentialing.

<sup>\*</sup>State licensure for a technologist is required in addition to appropriate recognized certification. Documentation of current, active licensure must be maintained and made available upon request. In the absence of a state/federal district licensing board, the requirement for licensure is waived.

# **Palmetto GBA**

Part A & B MAC

Jurisdiction J: Alabama, Georgia and Tennessee.

Jurisdiction M: North Carolina, South Carolina, Virginia and West Virginia.

www.palmettogba.com/medicare

Presently, there are no known Part A & B CMS policies for Jurisdiction J or Jurisdiction M under Palmetto GBA that require or recommend IAC accreditation as a condition for reimbursement for vascular testing studies.

## **WPS Medicare**

Part A MAC

Jurisdiction 5: Iowa, Kansas, Missouri, Nebraska and National Providers

Jurisdiction 8: Indiana and Michigan

www.wpsgha.com

LCD Title: Non-Invasive Abdominal / Visceral Vascular Studies

LCD ID #: L35755

**Original Effective Date:** For services performed on or after 10/1/2015 **Revision Effective Date:** For services performed on or after 11/30/2023

## **Credentialing and Accreditation Standards**

The accuracy of non-invasive vascular diagnostic studies depends on the knowledge, skill, and experience of the technologist and interpreter. Consequently, the physician performing and/or interpreting the study must be capable of demonstrating documented training and experience. A vascular diagnostic study may be personally performed by a physician, a certified technologist, or in a certified vascular testing lab.

Services will be considered medically reasonable and necessary only if performed by appropriately trained providers.

- 1. All non-invasive vascular diagnostic studies must be performed meeting at least one of the following:
  - a. performed by a licensed qualified physician, or
  - b. performed by a technician who is certified in vascular technology, or
  - c. performed in facilities with laboratories accredited in vascular technology.
- 2. A licensed qualified physician for these services is defined as:
  - a. Having trained and acquired expertise within the framework of an accredited residency or fellowship program in the applicable specialty/subspecialty in ultrasound (US) or must reflect equivalent education, training, and expertise endorsed by an academic institution in ultrasound or by applicable specialty/subspecialty society in ultrasound, or
  - b. Has the Registered Vascular Technologist (RVT), Registered Physician Vascular Interpretation (RPVI), or ASN: Neuroimaging Subspecialty Certification; and
  - c. Is able to provide evidence of proficiency in the performance and interpretation of each type of diagnostic procedure performed.
- 3. Nonphysician personnel performing tests must demonstrate basic qualifications to perform tests and have training and proficiency as evidenced by licensure or certification by an appropriate State health or education department. In the absence of a State licensing board, non-physician personnel must be certified by an appropriate national credentialing body.

Appropriate personnel certification includes the American Registry of Diagnostic Medical Sonographers (ARDMS), Registered Vascular Technologist (RVT) credential; or Cardiovascular Credentialing International's Registered Vascular Specialist (RVS).

- 4. Laboratories must be certified by one of the following:
  - Intersocietal Accreditation Commission (IAC),
  - American College of Radiology (ACR),
  - Joint Commission (Vascular lab certification would need to be noted under the main certification either under inpatient or ambulatory care depending on where the test is being performed), or
  - DNV-GL (specific for hospitals only)

According to which certifying body listed above is selected, that accrediting body's standards must be followed.

#### **LCD Title: Non-Invasive Cerebrovascular Studies**

LCD ID #: L35753

**Original Effective Date:** For services performed on or after 10/1/2015 **Revision Effective Date:** For services performed on or after 10/26/2023

## Credentialing and Accreditation Standards

The accuracy of non-invasive vascular diagnostic studies depends on the knowledge, skill, and experience of the technologist and interpreter. Consequently, the physician performing and/or interpreting the study must be capable of demonstrating documented training and experience. A vascular diagnostic study may be personally performed by a certified technologist, or in a certified vascular testing lab.

Services will be considered medically reasonable and necessary only if performed by appropriately trained providers.

- 1. All non-invasive vascular diagnostic studies must be performed meeting at least one of the following:
  - a. performed by a licensed qualified physician, or
  - b. performed by a technician who is certified in vascular technology, or
  - c. performed in facilities with laboratories accredited in vascular technology.
- 2. A licensed qualified physician for these services is defined as:
  - a. Having trained and acquired expertise within the framework of an accredited residency or fellowship program in the applicable specialty/subspecialty in ultrasound (US) or must reflect equivalent education, training, and expertise endorsed by an academic institution in ultrasound or by applicable specialty/subspecialty society in ultrasound, or
  - b. Has the Registered Vascular Technologist (RVT), Registered Physician Vascular Interpretation (RPVI), or ASN: Neuroimaging Subspecialty Certification; and
  - c. Is able to provide evidence of proficiency in the performance and interpretation of each type of diagnostic procedure performed.
- 3. Nonphysician personnel performing tests must demonstrate basic qualifications to perform tests and have training and proficiency as evidenced by licensure or certification by an appropriate State health or education department. In the absence of a State licensing board, non-physician personnel must be certified by an appropriate national credentialing body.

Appropriate personnel certifications include the American Registry of Diagnostic Medical Sonographers (ARDMS) Registered Vascular Technologist or (RVT) credential; or Cardiovascular Credentialing International's Registered Vascular Specialist (RVS).

- 4. Laboratories must be certified by one of the following:
  - Intersocietal Accreditation Commission (IAC),
  - American College of Radiology (ACR),
  - Joint Commission (Vascular lab certification would need to be noted under the main certification either under inpatient
    or ambulatory care depending on where the test is being performed), or
  - DNV-GL (specific for hospitals only)

According to which certifying body listed above is selected, that accrediting body's standards must be followed.

## **LCD Title: Non-Invasive Peripheral Arterial Vascular Studies**

LCD ID #: L35761

**Original Effective Date:** For services performed on or after 10/1/2015 **Revision Effective Date:** For services performed on or after 10/26/2023

## Credentialing and Accreditation Standards

The accuracy of non-invasive vascular diagnostic studies depends on the knowledge, skill, and experience of the technologist and interpreter. Consequently, the physician performing and/or interpreting the study must be capable of demonstrating documented training and experience. A vascular diagnostic study may be personally performed by a physician, a certified technologist, or in a certified vascular testing lab.

Services will be considered medically reasonable and necessary only if performed by appropriately trained providers.

- 1. All non-invasive vascular diagnostic studies must be performed meeting at least one of the following:
  - a. performed by a licensed qualified physician, or
  - b. performed by a technician who is certified in vascular technology, or
  - c. performed in facilities with laboratories accredited in vascular technology.
- 2. A licensed qualified physician for these services is defined as:
  - a. Having trained and acquired expertise within the framework of an accredited residency or fellowship program in the applicable specialty/subspecialty in ultrasound (US) or must reflect equivalent education, training, and expertise endorsed by an academic institution in ultrasound or by applicable specialty/subspecialty society in ultrasound, or
  - b. Has the Registered Vascular Technologist (RVT), Registered Physician Vascular Interpretation (RPVI), or ASN: Neuroimaging Subspecialty Certification; and
  - c. Is able to provide evidence of proficiency in the performance and interpretation of each type of diagnostic procedure performed.
- 3. Nonphysician personnel performing tests must demonstrate basic qualifications to perform tests and have training and proficiency as evidenced by licensure or certification by an appropriate State health or education department. In the absence of a State licensing board, non-physician personnel must be certified by an appropriate national credentialing body.

Appropriate personnel certification includes the American Registry of Diagnostic Medical Sonographers (ARDMS) or Registered Vascular Technologist (RVT) credential; or Cardiovascular Credentialing International's Registered Vascular Specialist (RVS).

- 4. Laboratories must be certified by one of the following:
  - Intersocietal Accreditation Commission (IAC),
  - American College of Radiology (ACR),
  - Joint Commission (Vascular lab certification would need to be noted under the main certification either under inpatient
    or ambulatory care depending on where the test is being performed), or
  - DNV-GL (specific for hospitals only)

According to which certifying body listed above is selected, that accrediting body's standards must be followed.

5. Transcutaneous oxygen tension measurement should be performed by personnel possessing the following credentials obtained from the National Board of Diving and Hyperbaric Medicine Technology (NBDHMT): Certified Hyperbaric Technologist (CHT), or Certified Hyperbaric Registered Nurse (CHRN).

## LCD Title: Non-Invasive Peripheral Venous Vascular and Hemodialysis Access Studies

LCD ID #: L35751

**Original Effective Date:** For services performed on or after 10/1/2015 **Revision Effective Date:** For services performed on or after 12/3/2024

## Credentialing and Accreditation Standards

The accuracy of non-invasive vascular diagnostic studies depends on the knowledge, skill, and experience of the technologist and interpreter. Consequently, the physician performing and/or interpreting the study must be capable of demonstrating documented training and experience. A vascular diagnostic study may be personally performed by a physician, a certified technologist, or in a certified vascular testing lab.

Services will be considered medically reasonable and necessary only if performed by appropriately trained providers.

- 1. All non-invasive vascular diagnostic studies must be performed meeting at least one of the following:
  - a. performed by a licensed qualified physician, or
  - b. performed by a technician who is certified in vascular technology, or
  - c. performed in facilities with laboratories accredited in vascular technology.
- 2. A licensed qualified physician for these services is defined as:
  - a. Having trained and acquired expertise within the framework of an accredited residency or fellowship program in the applicable specialty/subspecialty in ultrasound (US) or must reflect equivalent education, training, and expertise endorsed by an academic institution in ultrasound or by applicable specialty/subspecialty society in ultrasound, or
  - b. Has the Registered Vascular Technologist (RVT), Registered Physician Vascular Interpretation (RPVI), or ASN: Neuroimaging Subspecialty Certification; and
  - c. Is able to provide evidence of proficiency in the performance and interpretation of each type of diagnostic procedure performed.
- 3. Nonphysician personnel performing tests must demonstrate basic qualifications to perform tests and have training and proficiency as evidenced by licensure or certification by an appropriate State health or education department. In the absence of a State licensing board, non-physician personnel must be certified by an appropriate national credentialing body. Appropriate personnel certification includes the American Registry of Diagnostic Medical Sonographers (ARDMS), Registered Vascular Technologist (RVT) credential; or Cardiovascular Credentialing International's Registered Vascular Specialist (RVS).
- 4. Laboratories must be certified by one of the following:
  - Intersocietal Accreditation Commission (IAC),
  - American College of Radiology (ACR),
  - Joint Commission (Vascular lab certification would need to be noted under the main certification either under inpatient
    or ambulatory care depending on where the test is being performed), or
  - DNV-GL (specific for hospitals only)

According to which certifying body listed above is selected, that accrediting body's standards must be followed.