



CT

Payment Policies

To date, the IAC is aware that the following insurers or companies have adopted CT reimbursement directives. While the IAC attempts to stay abreast of reimbursement policies as a service to the CT 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](#) – Provider and Behavioral Health Manual – June 2026

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)**
- **Nuclear cardiology**
- 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 [Network Participation Criteria](#) or the [Office Manual for Health Care Professionals – Provider and Behavioral Health Manual – June 2026](#)»

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 [ABCBS Provider Manual](#) (Page 204, Updated August 2025)»

BCBS of Alabama

Preferred Radiology Program ([link](#))

The Preferred Radiology Program (PRP) recognizes providers with advanced imaging services in their office and/or free-standing imaging facilities that have accreditation through American College of Radiology (ACR), Intersocietal Accreditation (IAC) or RadSite. PRP participants receive increased reimbursement for PET, CT, CTA and MRI and MRA. Go to [Equipment Standards for Participation](#).

Please note: The above requirements list only a portion of the full reimbursement directive as related to accreditation. For more information on the requirements, please visit the [BCBC of Alabama website](#).

BCBS of Louisiana

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

Diagnostic Services (including CMS Independent Diagnostic Testing Facilities)

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 providers.bcbsla.com/provider-networks/facilities-and-hospitals >> 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 CT or ACR
Endovenous Laser Treatment	<i>Free-standing facility and hospitals</i> Accreditation from IAC
Magnetic Resonance Imaging (MRI)	Accreditation from IAC 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 [BCBSMA website](#).

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

Provider Accreditation for CT – Network Providers

All Network Providers billing the technical component of the CT **must be accredited in CT by the Intersocietal Accreditation Commission (IAC)** or a CT module by the American College of Radiology (ACR) or RadSite.

The professional component of the CT will be reimbursed based upon the accreditation of the facility as the ACR, IAC or RadSite facility accreditations require that interpreting professional physicians also be accredited.

Medical Policy	
Computed Tomography (CAT Scan) and Computed Tomographic Angiography (CTA) of the Abdomen and Pelvis	Computed Tomography (CAT Scan) and Computed Tomographic Angiography (CTA) of the Chest and Thorax
Computed Tomography (CAT Scan) and Computed Tomographic Angiography (CTA) of Extremity or Joint	Computed Tomography (CAT Scan) and Computed Tomographic Angiography (CTA) of the Head and Neck
Computed Tomography (CAT Scan) of the Cervical, Thoracic, and Lumbar Spine	

All Network Providers billing the technical component of the CT **must be accredited in Coronary CTA by the Intersocietal Accreditation Commission (IAC)** or a Cardiac CT module by the American College of Radiology (ACR) or RadSite. The professional component of the CT will be reimbursed based upon the accreditation of the facility as the ACR, IAC or RadSite facility accreditations require that interpreting professional physicians also be accredited by the ACR, Society of Cardiovascular Computed Tomography or RadSite, respectively.

Provider Accreditation for CT – Network Providers
Cardiac Computed Tomographic Angiography (CCTA)

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 CT, please visit www.bcbsms.com/policy-search/medical and use the search tool to locate any of the medical policies listed above.

BCBS of North Carolina

Network Participation – Facilities

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)
 - [Intersocietal Accreditation Commission \(IAC\)](#)
 - 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.bcbsnc.com/providers/network-participation/facilities#join, scroll down Free Standing Radiology.

California Senate Bill 1237 (Medical Radiation Safety Act)

Beginning July 1, 2013, facilities that furnish computed tomography (CT) services must be accredited by an organization that is approved by the Centers for Medicare and Medicaid Services (CMS), an accrediting agency approved by the Medical Board of California or the State Department of Public Health. This bill also requires the facility to report certain information to the department, the affected patient and the patient's treating physician. **The [Intersocietal Accreditation Commission \(IAC\)](#) has been designated as an approved accrediting organization.** Here are the major points of the bill related to accreditation, CT facilities should be aware of:

This bill would, commencing July 1, 2013, require facilities that furnish CT X-ray services to be accredited by an organization that is approved by the federal Centers for Medicare and Medicaid Services, an accrediting agency approved by the Medical Board of California, or the State Department of Public Health. The bill would also require the facility to report certain information to the department, the affected patient, and the patient's treating physician.

SECTION 1:

- a) Commencing July 1, 2012, subject to subdivision (e), a person that uses a computed tomography (CT) X-ray system for human use shall record the dose of radiation on every CT study produced during a CT examination.
- b) The facility conducting the study shall electronically send each CT study and protocol page that lists the technical factors and dose of radiation to the electronic picture archiving and communications system.
- c) The displayed dose shall be verified annually by a medical physicist to ensure the displayed doses are within 20 percent of the true measured dose measured in accordance with subdivision (f) unless the facility is accredited.
- d) Subject to subdivision (e), the radiology report of a CT study shall include the dose of radiation by either recording the dose within the patient's radiology report or attaching the protocol page that includes the dose of radiation to the radiology report.
- e) The requirements of this section shall be limited to CT systems capable of calculating and displaying the dose.
- f) For the purposes of this section, dose of radiation shall be defined as one of the following:
 - The computed tomography index volume (CTDI vol) and dose length product (DLP), as defined by the International Electrotechnical Commission (IEC) and recognized by the federal Food and Drug Administration (FDA).
 - The dose unit as recommended by the American Association of Physicists in Medicine

SEC. 2. Section 115112 is added to the Health and Safety Code, to read:

115112. Commencing July 1, 2013, facilities that furnish CT X-ray services shall be accredited by an organization that is approved by the federal Centers for Medicare and Medicaid Services, an accrediting agency approved by the Medical Board of California, or the State Department of Public Health. To review the entire chaptered version of the bill, [click here](#).

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

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](#)»

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.)	Cardiac CT	1) Certification in Cardiovascular Disease from the American Board of Internal Medicine (ABIM) OR Certification in Cardiovascular Disease from the American Osteopathic Board of Internal Medicine (AOBIM) AND 2) Facility CT accreditation from: American College of Radiology (ACR) with Cardiac Module <u>OR</u> IAC CT with Coronary Calcium Scoring or Coronary CTA <u>OR</u> RadSite with Cardiac Module
	Cardiac CT Angiography	Certification same as above. AND 1) Facility CT accreditation from: American College of Radiology (ACR) with Cardiac Module <u>OR</u> IAC CT with Coronary CTA <u>OR</u> RadSite with Cardiac Module

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

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

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):

CT Standards

1. Current ACR, [IAC](#), TJC, or RadSite modular accreditation for each CT unit at the facility and for each type of service being billed.
2. 4 slice per rotation (minimum).
3. 16 slice per rotation (minimum) for Computed Tomographic Angiography (CTA) and Coronary Calcium scoring.
4. 64 slice per rotation (minimum) for Cardiac CT (CCT) and Cardiac Computed Tomography Angiography (CCTA).
5. Cone beam CT units will not be approved for the eviCore network if it is the only CT unit at the facility.

Quick Links:

- [eviCore Healthcare Network Facility Standards](#) (Effective 12/2025)

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 (CT):

IAC	ACR	RadSite
Coronary Calcium Scoring		Angiography
Coronary CTA	Abdomen	Body
Neurological	Cardiac (Adult &/or Pediatric)	Cardiac
Maxillofacial	Chest	Maxillofacial
Body	Head and Neck	Musculoskeletal
Vascular CTA		Neurologic

Learn more at 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 [recognized accrediting bodies](#). Begin the [organizational provider credentialing process](#).

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.

Mountain State BCBS

Ancillary Organizational Credentialing Criteria (Commercial and Medicare PPO Networks)

Provider Type	Accreditation
Outpatient CT Providers	IAC CT (formerly ICACTL) or ACR for Freestanding or Physician Office (will accept Joint Commission or CMS survey for hospital based)

Read more at www.highmarkbcbswv.com/PDFFiles/Ancillary-Organizational-Credentialing-Criteria.pdf.

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 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)

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
- MRI
- 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 12-2025).

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).