ADVANCED DIAGNOSTIC IMAGING (ADI)

Education and Outreach for Contractors and Suppliers

Winter 2011

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WHAT are the requirements?

- Section 135 (a) of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) required the Secretary to designate organizations to accredit suppliers that furnish the technical component of advanced diagnostic imaging services

and

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- Defined advanced diagnostic imaging procedures including MRI, CT, and nuclear medicine imaging such as positron emission tomography
- The MIPPA expressly excludes X-ray, Ultrasound and Fluoroscopy procedures
- The suppliers of imaging services include but not limited to physicians, non-physician practitioners and Independent Diagnostic Testing Facilities

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WHO do the requirements effect?

- The accreditation requirement applies only to the suppliers of the images themselves (technical component) and not the physician's interpretation of the image
- The accreditation requirement applies to all suppliers of the technical component that *submit claims to Medicare*
- The professional component, which is usually the physician interpretation is not subject to any accreditation requirement

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- For ADI furnished in a hospital outpatient setting, the accreditation requirements do not apply
- The accreditation requirement applies only to those suppliers of ADI paid under the physician fee schedule

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WHEN are the requirements mandatory?

- In order to furnish the technical component of ADI services for Medicare beneficiaries, suppliers must be accredited ***by*** January 1, 2012 to submit claims with a date of service on or after the January 1, 2012 date.

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HOW do I comply with the requirement?

- Apply for accreditation *NOW* if you are not already accredited.
  - Go on the CMS website at www.cms.gov/medicareprovidersupenroll to review each of the three designated accreditation organizations;
  - Call or email each of the accreditors to determine the one that best fits your business needs;
  - Follow all of the application requirements so that your application is not delayed;
  - From application to accreditation may take up to five months

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- There are many quality standards that you will need to show the accreditation organization that you are compliant

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The quality standards at a minimum address:

- ***Qualifications of medical personnel*** who are not physicians
- **Qualifications and responsibilities** of medical directors and supervising physicians
- Procedures to ensure that ***equipment*** used meets ***performance*** specifications

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The quality standards at a minimum address:

- Procedures to ensure the ***safety of person*** who furnish the imaging
- Procedures to ensure the ***safety of beneficiaries***
- Establishment and maintenance of a ***quality assurance and quality control program*** to ensure the reliability, clarity and accuracy of the technical quality of the image

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- The accreditation process will include:
  - An un-announced site visit;
  - Random site visits;
  - Review of phantom images;
  - Review of staff credentialing records;
  - Review of maintenance records;
  - Review of beneficiary complaints;
  - Review of patient records;
  - Review of quality data;
  - Ongoing data monitoring;
  - Triennial surveys.

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- The accreditation organization will expect that the supplier completes the entire application prior to commencing the review process
- The length of the approval process depends on the completeness and readiness of the supplier:
  - Make certain that you, as a supplier, understand how to comply with each of the accreditation organizations quality standards
  - If you are non-compliant with any of the standards, you may be required to complete a corrective action plan which will need to be approved and possibly require another site visit

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- Make certain to review all of your ADI procedures to determine if you will need to be accredited.
- Accreditation is given at the facility for each modality that is supplied;
  - The accreditation is not attached to the machine. If you purchase another machine within the same modality, it most likely will not require another accreditation decision. It is the supplier's responsibility to notify the accreditation organization after the initial accreditation decision of any changes to the facility

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- Update your enrollment application (855 B or 855 I)
  - The updated application should be available by July. The additional information required is less than two pages in length.
- There is a specialty code of 95 that your billing contractor will use in order to identify which services are covered under the accreditation requirement :
  - effective with dates of service on or after 1/1/12

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Helpful Facts

- Hospitals are exempt from this requirement since hospitals generally are not paid under the physician fee schedule

- The American College of Radiology, The Intersocietal Accreditation Commission and The Joint Commission are the only three accreditation organizations recognized by CMS to meet this requirement

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- The accreditation requirement does not apply to the radiologists, per se. However, the interpreting physicians must meet the accreditation organization published standards for training and residency
- The accreditation organizations each have their own published standards

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- If you are accredited before 1/1/12 by one of the designated accreditation organizations, you are considered to have met the accreditation requirement
  - You must apply for reaccreditation if your accreditation is due to expire before this date, and
  - You must remain in good standing
- The accreditation organization will transmit all necessary data to CMS on an ongoing basis
  - Your billing contractor will receive these data from CMS
- The CPT codes that are effected by this requirement will be published on the CMS website

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- No suppliers are exempt
  - Oral surgeons and Dentists must comply if they perform the technical component of MRI, CT or Nuclear Medicine for the technical component of the codes that require ADI accreditation
- The accreditation costs vary by accreditation organization
  - The average cost for one location and one modality is on average $3,500 every three years
- Contractors will begin denying claims for services on or after 1/1/12 for modalities that are not accredited
  - Denial code N290 will be used (“Missing/incomplete/invalid rendering provider primary identifier.”)
  - Contractors will deny codes submitted for the technical component if the code is not listed as “accredited”

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- If your facility uses an accredited mobile facility, you as a Medicare supplier billing for the technical component of ADI must also be accredited:
  - The accreditation requirement is attached to the biller of the services

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