

With the January 1, 2012, Centers for Medicare and Medicaid Services (CMS) accreditation mandate quickly approaching, the Intersocietal Accreditation Commission (ICAVL, ICAEL, ICANL, ICAMRL, ICACTL, and ICACSF) and the Society of Nuclear Medicine cosponsored a webinar in mid May to address the multitude of questions related to the upcoming deadline. At this time, the requirements of the Medicare Improvements for Patients and Providers Act (MIPPA) apply only to freestanding imaging centers. All nonhospital suppliers of the technical component of advanced diagnostic imaging services, inclusive of nuclear medicine, MRI, CT, and PET, must obtain accreditation as a condition for reimbursement.

Many facilities have concerns about how CMS will be notified that the facility is granted accreditation, to ensure reimbursements. Accredited facilities can rest assured that the designated accrediting organizations will notify CMS of facilities' accreditation through a process of regular data file transfers, scheduled to begin before January 1, 2012. In addition, CMS has reported that it will be providing instructions for a much more streamlined approach that will mean a lower burden on the suppliers related to the enrollment process.

Because accreditation is granted for a period of 3 years, facilities already accredited by the ICANL, ICACTL, or ICAMRL are advised to ensure that their accreditation status will not expire before the 2012 deadline. (Check the status of your facility's accreditation in the online Directory of IAC Accredited Labs at www.intersocietal.org/iac/learnmore/lab_list.htm). Those due to apply for reaccreditation should do so in a timely manner; the facility must be fully accredited by January 1, 2012.

In addition, facilities must be in compliance with the following newly



mandated requirements that apply to CMS reimbursements after January 1, 2012:

- Facilities must be prepared to undergo a random site visit or audit at some time during their 3-year accreditation period.
- Facilities must have policies on patient record retention, consumer complaints, staff, and patient safety.
- Facilities must have a policy identifying the process for verifying the medical education and training of all physicians, as well as the certification and training of all technical staff members and any other direct patient care providers.
- CMS will not recognize an "under review" or "provisional" status.

Although the IAC recommends that facilities striving to meet the CMS mandate on accreditation submit applications by summer 2011 to ensure that a decision is rendered in time, the IAC's online accreditation applications and review processes have made the processing of applications and rendering of decisions an efficient process. Applications are accepted at any time throughout the year.

On November 17, 2010, CMS released a published accreditation policy providing clarification of the January 1, 2012, mandate, entitled "Accreditation Requirements for Suppliers of the Technical Component of Advanced Imaging." One of the topics addressed within the policy specifically relates to suppliers utilizing the services of a mobile imaging company: "Suppliers utilizing the services of a mobile imaging company but billing Medicare for the technical component must be accredited as the Medicare supplier."

Facilities with a mobile component should be aware that in April, the IAC announced a change to its accreditation policy related to mobile services. The policy previously defined as "mobile services" has been eliminated, and the "multiple site" policy is now defined as "multiple sites (fixed and/or mobile)." The new policy is published as part of the IAC Accreditation Program Policies and Procedures (<http://www.intersocietal.org/iac/legal/policies.htm>). Applicable to all IAC divisions, this change in policy related to mobile services allows the IAC to more equitably assess the quality of patient care provided, regardless of the setting.

Mobile service facilities fall into 1 of 2 categories—those affected by MIPPA and those that are not. Facilities that have a mobile component currently accredited with an IAC division and affected by MIPPA are required to submit the multiple sites (fixed and/or mobile) supplemental application, and the additional fees for each site of service, in order for those sites to be accredited by the IAC. Failure to accredit sites that bill CMS for the technical component of the advanced diagnostic imaging services before January 1, 2012, will result in nonpayment to those sites. Non-MIPPA facilities that do not complete the multiple sites supplemental application for the mobile sites during the current accreditation cycle will have the opportunity

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to do so at the time of reaccreditation. Through the reaccreditation application, these facilities will be prompted to have their previous listing of mobile sites changed to multiple sites and would then apply for each site of service by submitting a multiple sites application.

Facilities with questions about the change in policy related to mobile services are encouraged to contact the IAC

staff at PolicyChange@intersocietal.org or 800-838-2110.

To learn more about the 2012 CMS requirements, please visit http://www.intersocietal.org/iac/accreditation/getting_started_MIPPA.htm.

Customer service is paramount to all individuals involved in the IAC process, from members of the board of directors, to application reviewers and site visitors, to the staff with whom

applicant facilities interact when calling or emailing the IAC office. We are here to be “your partner in quality,” and our goal is to assist you in achieving accreditation for your facility.

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Commission*