CMS Transmittal 380: Enrollment Procedures for Advanced Diagnostic Imaging Accreditation

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The Centers for Medicare & Medicaid Services (CMS) issued Transmittal 380 on August 3, 2011 in order to update CMS enrollment application forms (ie, CMS 855 I and CMS 855 B) to reflect information regarding Advanced Diagnostic Imaging (ADI) accreditation. Transmittal 380 does not require ADI suppliers that are currently enrolled and accredited by a CMS recognized body to take any action.

By way of background, pursuant to the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA), CMS designated three national accreditation organizations (AOs) to accredit suppliers (including physicians, non-physician practitioners and independent diagnostic testing facilities) who furnish the technical component (TC) of advanced diagnostic imaging (ADI) procedures. As defined by MIPPA, the covered ADI services are limited to MRI, CT, and nuclear medicine, such as PET. However, other diagnostic imaging services may be added to the list in the future at the discretion of the Secretary in consultation with certain stakeholders. Notably, the accreditation requirement applies only to the suppliers of the ADI services, and not to the physician's interpretation of an image. In addition, this accreditation only applies to those who are paid under the Physician Fee Schedule. The CMS approved AOs responsible for supplier accreditation are the American College of Radiology (ACR), the Intersocietal Accreditation Commission (IAC), and The Joint Commission. These AOs are authorized to prescribe quality standards applicable to suppliers regarding a number of safety issues related to equipment, patients, and staff members. ACR, IAC, and The Joint Commission present monthly reports to CMS disclosing the accredited ADI suppliers; the reports include beginning and end accreditation dates for each supplier and the particular modalities for which accreditation is received.

Transmittal 380 provides guidance regarding the system parameters for the accreditation requirement. Particularly, the transmittal specifies the current enrollment procedures for newly enrolling ADI suppliers. The transmittal replaces its predecessor, Transmittal 373, reflecting recent changes to CMS-855I and CMS-855B brought on by the discontinuation of the use of code 95 in relation to ADI.

Effect of Changes on Newly Enrolling Physicians and Nonphysician Practitioners

To initiate the enrollment process, a supplier must register through the Provider Enrollment, Chain and Ownership System (PECOS) available online or complete the designated CMS-855, ensuring to check the appropriate boxes in the ADI section of the document. The completed enrollment form should be mailed to the appropriate Medicare enrollment contractor. All Medicare enrollment contractors shall accept these applications from providers and suppliers who possess the new ADI accreditation. Subsequent to the submission of the application, the Medicare enrollment contractors will then verify whether the information on the application satisfies the current enrollment requirements. Further, the Medicare enrollment contractors will verify whether the supplier is included in the list of accredited individuals and organizations found at www.cms.hhs.gov/Medicareprovidersupenroll; the consistency of accreditation information found in section 2 of the appropriate CMS-855 completed by the supplier will also be evaluated. Upon approval of the supplier's application, the Medicare enrollment contractors will enter the appropriate information into PECOS. The date of the filing will be used by the contractors as the effective date for ADI accreditation in PECOS.

Effect of Changes on Currently Enrolled and Accredited Suppliers

Physicians and non-physician practitioners who are currently enrolled in the Medicare program and are accredited by a CMS program recognized for this purpose do not need to take any action pursuant to Transmittal 380. The suppliers' accreditation information will be automatically transmitted to CMS by these organizations and subsequently loaded into PECOS.

Crucial Dates for Suppliers of Advanced Diagnostic Imaging Services

A provider education article related to Transmittal 380 is anticipated in the near future. At that time, the article will be avail-



able at www.cms.hhs.gov/MLNMattersArticles.

Suppliers who submit claims for the TC of ADI services to Medicare must be accredited by one of the specified AOs by January 1, 2012 in order to receive reimbursement for claims related to services performed on or after this date. Additional information regarding the accreditation process pursuant to MIPPA may be obtained from the individual AOs as follows:

American College of Radiology (ACR) 1891 Preston White Drive Reston, VA 20191-4326 Telephone: 800-770-0145 Intersocietal Accreditation Commission (IAC) 6021 University Boulevard, Suite 500 Ellicott City, MD 21043 Telephone: 800-838-2110

The Joint Commission Ambulatory Care Accreditation Program One Renaissance Boulevard Oakbrook Terrace, IL 60181 Telephone: 630-792-5286

Commentary

Inaugural Executive Leadership and Mentoring (ELM) Program

By Rudy Apodaca, CRA and Roberta Edge, CRA, FAHRA

There is a growing need for imaging administrators to make contributions to healthcare by leading and taking part in projects and teams that can have a global impact. At the 2011 Annual Meeting inTexas, eight AHRA "pioneers" set out on a year long journey to "beef up" their leadership skills under the guidance of David Waldron. David is the CEO of Traction Business Development (Tracbiz) and has partnered with AHRA to create the curriculum and teach the courses in this new program. Prior to joining Tracbiz, David held executive positions with LaSalle Bank, GE Healthcare, Picker International, and Beckman Coulter. He has worked in Europe, Asia Pacific, and Latin America besidesNorth America. David holds a bachelor's degree in biochemistry, is an associate of the British Chartered Institute of Bankers, holds the Certified Diploma in Accounting and Finance, and is a graduate of the INSEAD BusinessSchool, Paris, France.

For years, AHRA has contemplated how to present a program that would be a next step for those who might wish to migrate to an executive or leadership position within their existing organizations or transition to a new environment in imaging. The first thought was to partner with a business school and send participants there for a week of intense learning. The cost was prohibitive, though, and the next idea was to go with a vendor sponsored leadership training, but again, the cost was prohibitive.

Enter ELM, the Executive Leadership and Mentoring Program which had an intense beginning at the 2011 Annual Meeting with four hour sessions each in the following subjects: finance, marketing, strategy, organization (including Lean/Six Sigma), and leadership. This first ELM class consists of Rudy Apodaca, CRA (Mercy Gilbert Medical Center), Ron Bernardi, FAHRA (York Hospital), Sandra Connor (Methodist Dallas Medical Center), Robbie Edge, CRA, FAHRA (Sutter Gould Medical Foundation), Shonna Galloway, CRA (Western Kentucky Diagnostic Imaging), Jodi Haeffner (Kishwaukee Community Hospital), Rick Perez, CRA (Winthrop University Hospital), and Victor Sarro

(Jefferson University Hospitals). We spent time learning to think differently about the designated topics and broke into two groups of four to present a scenario after each subject had been discussed. There was little time to prepare, so one of the first skills was being able to network with the group and then pull a presentation together to make a case for the subject at hand. Each person had the opportunity to "chair" the group and be the presenter, thus sharpening facilitation and presentation skills, including PowerPoint utilization.

Below are some thoughts from members of the program.

Sandra Connor: "This program has enhanced my critical thinking skills and prepared me to take my team to the next level."

Shonna Galloway: "Participating in the 2011 inaugural class of ELM pushed me to think concisely and analytically about how to approach projects and issues for my own organization. I feel better prepared to focus on issues at hand in an ever-changing radiology landscape."

Jodi Haeffner: "The skills and business understanding we gained from the ELM program was outstanding and something I will keep forever. They don't teach this in Rad school."

Rick Perez: "I would think the program would be good for anyone who is in an advanced position, and want to continue to grow. After having time to review last week the program caused me to reflect back on what I am doing and how to refocus on what needs to be done to change a culture of how we look at patient care and how to bring this transitional process to the department."

Victor Sarro: "The group session work outs were a great way to learn to develop team work & to think critically. I will most certainly be applying what I learned in my everyday activities."

Over the next year, David Waldron, our instructor, will spend