



Requirements for Radiology Privileging: Endovenous Ablation

MASSACHUSETTS

To bill for the following CPT codes for radiofrequency and laser ablation of varicose veins.

- 36475 Endovenous ablation therapy for incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency, first vein treated
- 36476 Second and subsequent veins treated in a single extremity, each through separate access sites
- 36478 Endovenous ablation therapy for incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser, first vein treated
- 36479 Second and subsequent veins treated in a single extremity, each through separate access sites

General Requirements

- At least one physician in the Vein Center must hold the credentials of the Medical Director
- The following requirements are to be met for each of the individual sites the physician applicant is practicing EVLT services.
 - The physician must be listed on the ICAVL accreditation for the technical diagnostic imaging. (Technical requirement is for Free Standing and Group practices to have IAC Accreditation for Vascular Labs, the level must be peripheral venous).
 - **Effective September 1, 2015**, all free-standing facilities and group practice technical diagnostic imaging must be accredited by the IAC for Vein Center.
 - All medical staff must have current Basic Life Support and/or Advanced Cardiac Life Support certification.

Between January 1, 2015 and September 1, 2015, providers who apply for privileging for endovenous ablation must meet the specific requirements for the Medical Director and the physician applicant described on the following pages. These requirements will no longer apply after September 1, 2015.

Medical Director Requirements

- The Vein Center Medical Director must be licensed in Massachusetts. The license must be current and unrestricted. In addition, they must be or have been certified by the American Board of Medical Specialties, American Osteopathic Association, the Royal College of Physicians and Surgeons of Canada or Le College des Mediciens du Quebec.
- The Medical Director must have at least two years of clinical experience post-residency or fellowship training in the management and treatment of venous disease and must demonstrate an appropriate level of training and experience and meet either of the training requirements below:

Training requirement option 1	Training requirement option 2
<p>Demonstrate direct participation in the active¹ vein care by providing a case log with a minimum of 200 cases⁴ including patient outcomes over the previous three years in at least two of the four categories.</p> <ul style="list-style-type: none"> ○ A minimum of 50 cases per category in at least two of the four categories.² ○ The cases must be documented with a case log that includes procedure outcomes. 	<p>Medical Directors who have successfully completed an Accreditation Council for Graduate Medical Education (ACGME) approved residency or fellowship for which venous disease, venous interventional treatment and venous ultrasound training was included in the core curriculum within five years prior to the application date should:</p> <ul style="list-style-type: none"> • Document -- in a case log that includes procedure outcomes --the direct participation in the active¹ vein care of a minimum of 100 cases⁴ over the previous three years in at least two of the four categories¹. There must be a minimum of 50 cases per category in at least two of the four categories² • Include a letter from the program director to confirm completion of the fellowship and case log accuracy. • Demonstrate qualifying continuing education: A minimum of 30 Category I CME credit hours related to venous disease, venous interventional treatment and/or venous ultrasound, must have been obtained in the past three years.³ [This requirement will be considered fulfilled if, within 5 years prior to the application date, the Medical Director successfully completed an Accreditation Council for Graduate Medical Education (ACGME)-approved residency or fellowship for which venous disease, venous interventional treatment and venous ultrasound training was included in the core curriculum.]

¹. Active care means direct care of a patient that includes, at a minimum, gathering a history, performing a physical examination, assessing pertinent diagnostic studies, forming and carrying out a treatment plan, and performance of the procedure(s) if indicated, as well as documentation of patient outcomes.

² Superficial venous categories include: Sclerotherapy; Ambulatory phlebectomy ; Saphenous vein ablation (may include surgical, endoscopic, endovenous thermal and/or ultrasound-guided chemical ablation); Non-operative management of chronic venous insufficiency with ulceration (CEAP Clinical classification C5- C6), including compression therapy

³ If a meeting was not solely dedicated to venous disease, venous interventional treatment and/or venous ultrasound, only the related hours are to be included in the application for accreditation.

⁴. Multiple procedures done on the same patient at the same time only count as one case.

Physician Applicant Requirements

- The physician applicant must be a BCBSMA credentialed physician in good standing.
- The Vein Center where the physician applicant is performing services must have Medical Director who meets the requirements above.
- The physician must be board certified or board eligible in Vascular Surgery, or Vascular and Interventional Radiology
- The physician applicant must have successfully completed an Accreditation Council for Graduate Medical Education (ACGME) approved fellowship for which venous disease, venous interventional treatment and venous ultrasound training was included in the core curriculum, and meet one of the following:

Training requirement option 1	Training requirement option 2
<p>The physician applicant was Board certified or Board eligible within 2 years following the fellowship.</p> <ul style="list-style-type: none"> ○ The physician applicant must have clinical expertise in the management and treatment of venous disease and must demonstrate an appropriate level of training and experience. ○ Document -- in a case log that includes procedure outcomes --the direct participation in the active¹ vein care of a minimum of 100 cases⁴ over the previous three years in at least one out of the four categories². 	<p>ACGME-approved residency or fellowship was completed within five years of the application date.</p> <ul style="list-style-type: none"> ○ Include a letter from the program director that confirms completion of the fellowship and case log accuracy. ○ Document -- in a case log that includes procedure outcomes -- the direct participation in the active¹ vein care of a minimum of 50 cases⁴ over the previous three years in at least one out of the four categories². ○ A minimum of 30 Category I CME credit hours related to venous disease, venous interventional treatment and/or venous ultrasound, must have been obtained in the past three years. (This requirement will be considered fulfilled if, within 5 years prior to the application date, the physician applicant has successfully completed an ACGME-approved residency or fellowship which included venous disease, venous interventional treatment and venous ultrasound training in the core curriculum.)

1. ¹. Active care means direct care of a patient that includes, at a minimum, gathering a history, performing a physical examination, assessing pertinent diagnostic studies, forming and carrying out a treatment plan, and performance of the procedure(s) if indicated, as well as documentation of patient outcomes.

2. ² Superficial venous categories include: Sclerotherapy; Ambulatory phlebectomy ; Saphenous vein ablation (may include surgical, endoscopic, endovenous thermal and/or ultrasound-guided chemical ablation); Non-operative management of chronic venous insufficiency with ulceration (CEAP Clinical classification C5- C6), including compression therapy

3. ³ If a meeting was not solely dedicated to venous disease, venous interventional treatment and/or venous ultrasound, only the related hours are to be included in the application for accreditation.

4. ⁴ Multiple procedures done on the same patient at the same time only count as one case.