



# The Diagnostic Imaging Accreditation Scheme for practices providing radiology and non- radiology services under Medicare

## The Stage II Scheme



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## **Introduction**

Diagnostic imaging services are a vital tool in the detection, measurement, treatment and management of clinical conditions. For healthcare consumers, it is not unreasonable to expect a standard level of service regardless of how and where a Medicare eligible diagnostic imaging service is provided. Diagnostic imaging services are provided by a range of specialist and practitioner groups in a diverse array of clinical settings including hospitals, single practitioner practices and multi site corporate practices.

Through the implementation of the Stage II Scheme, the Government and the community can be assured that the 19.5 million or so diagnostic imaging services that are supported by Medicare annually are being provided by organisations that are able to meet specified standards, and that the over \$2.2 billion taxpayer funded investment in those services is being used effectively.

## Overview

In 2008, the decision was made to implement the Diagnostic Imaging Accreditation Scheme (the Scheme) in stages. This was to ensure practices had ample time to prepare for accreditation and to enable the continuation of Medicare benefits during the transition to the Scheme.

### The Stage I Scheme

When the Stage I Scheme was introduced in July 2008, the accreditation arrangements only covered practices providing radiology services. The Scheme did not cover non-radiology services, which account for around 16% of the total number of Medicare funded diagnostic imaging services performed annually.

By early 2010 there were around 2700 practices providing radiology services participating in the Stage I Scheme.

### The Stage II Scheme

From 1 July 2010, the Stage II Scheme continues the accreditation arrangements for practices providing radiology services, and broadens the scope of the Scheme to include practices providing non-radiology services such as cardiac ultrasound and angiography; obstetric and gynaecological ultrasound and nuclear medicine imaging services.

Practices intending to render any diagnostic imaging services for the purpose of Medicare benefits from 1 July 2010 must be accredited under the Stage II Scheme. Practices that do not have accreditation cannot provide Medicare funded Diagnostic Imaging Services Table (DIST) services and must inform clients prior to carrying out services. It is an offence for a proprietor of a practice not to notify patients that the practice is not accredited and a Medicare benefit is not payable *before* providing diagnostic imaging services.

For the purposes of the Scheme, a diagnostic imaging service is any service listed in the DIST of the Medicare Benefits Schedule.

## Legislative background

The *Health Insurance Act 1973* (the Act) provides the legislative framework for the introduction and operation of the Diagnostic Imaging Accreditation Scheme (the Scheme) for practices providing diagnostic imaging services under Medicare.

The Act allows the Minister for Health and Ageing to establish through legislative instruments the rules governing the operation of the Scheme, including the organisations able to provide accreditation services. In addition, the Act prescribes a number of other matters including:

- The circumstances governing the payment of Medicare benefits for diagnostic imaging services;
- The type of rules the Scheme must include. For example, how practices must obtain and maintain accreditation and how accreditation decisions can be reconsidered; and
- Offence provisions relating to a failure by a proprietor of a practice to notify patients that the practice is not accredited and a Medicare benefit is not payable before providing diagnostic imaging services.

While the Act establishes the legislative framework for the Scheme, there are several other pieces of legislation which impact on the operation of the Scheme, including the:

- *Health Insurance Amendment (Diagnostic Imaging Accreditation) Act 2009*;
- *Health Insurance Regulations 1975*;
- *Health Insurance (Diagnostic Imaging Services Table) Regulations* as amended from time to time;
- *Health Insurance (Diagnostic Imaging Accreditation) Instrument 2010*; and
- *Health Insurance (Diagnostic Imaging Accreditation – Approved Accreditors) Instrument 2010*.

## Pathways to accreditation

Depending on the circumstances of the practice, there are five main pathways to accreditation under the Stage II Scheme. Arrangements have been set up for each practice type with the aim of allowing ample time to prepare for accreditation while enabling the continuation of Medicare benefits during the transition to the Stage II Scheme. Practices will not be eligible to provide Medicare funded diagnostic imaging services until they obtain accreditation.

### ***1. Stage I accredited practices moving to Stage II***

All practices holding Stage I accreditation will automatically be granted accreditation for Stage II for a period of 2 years from 1 July 2010. See page 5 for more details.

### ***2. Non-accredited practices providing non-radiology services entering Stage II***

Practices providing non-radiology services that were in operation prior to 30 June 2010 and were not accredited under the Stage I Scheme are eligible to enter the Stage II scheme under transitional arrangements. See page 6 for more details.

### ***3. Non-accredited practices seeking accreditation for the first time from 1 July 2010***

Non-accredited practices seeking accreditation for the first time on or after 1 July 2010 must apply for accreditation against either entry level or the full suite of Practice Accreditation Standards under the Stage II Scheme. See page 7 for more details.

### ***4. Non-accredited practices that have previously been accredited***

Non-accredited practices that have previously been accredited under the Stage I or Stage II Scheme where their accreditation was revoked or otherwise ended must apply for and obtain accreditation against the full suite of standards in order to re-enter the Scheme. See page 8 for more details.

### ***5. MIAP Accredited Practices***

Practices with Medical Imaging Accreditation Program (MIAP) accreditation may seek recognition of their MIAP accreditation under the Stage II Scheme. See page 9 for more details.

## Stage I accredited practices moving to Stage II

All practices holding Stage I accreditation for radiology services will automatically be granted accreditation for radiology and non-radiology services where relevant under the Stage II Scheme for a period of 2 years from 1 July 2010.

The Medicare claims system will automatically be updated to acknowledge the continuation of accreditation, allowing practices to continue to provide Medicare funded Diagnostic Imaging Services Table (DIST) services.

Before 30 June 2012, practices will need to apply for and be awarded accreditation against the full suite of Practice Accreditation Standards (see page 14, 'Standards').

To achieve accreditation, practices must submit an application, including documentary evidence in support of compliance with the full suite of standards, to the accreditor of their choice. The accreditor will perform an off-site desk-top audit to determine the extent of the practice's compliance with the Standards. Practices demonstrating compliance will be granted accreditation for 4 years from the date of the award of accreditation.

Practices accredited against the full suite of standards will then enter the accreditation maintenance program, which requires them to be re-accredited every 4 years.

### Key points

- Stage I accredited practices are automatically granted accreditation against entry level standards for the Stage II Scheme
- Accreditation against entry level standards includes all DIST services provided by the practice
- Practices must apply for and be awarded accreditation against the full suite of standards by 30 June 2012
- Practices awarded accreditation against the full suite of standards must be re-accredited every 4 years under the accreditation maintenance program

## Practices providing non-radiology services entering Stage II

Practices providing non-radiology services that were in operation prior to 30 June 2010 and were not accredited as a radiology service provider under the Stage I Scheme are eligible to enter the Stage II scheme under the transitional arrangements.

Under the transitional arrangements, these practices are able to register for 'deemed accreditation' by 30 June 2010. Registering for 'deemed accreditation' means that from 1 July 2010 to 30 June 2011 the practice can continue to provide Medicare funded DIST services while working towards accreditation under the Stage II Scheme.

Before 30 June 2011, practices with 'deemed accreditation' will need to apply for and be awarded accreditation against entry level standards. Alternatively, practices may choose to apply for accreditation against the full suite of standards (see page 14, 'Standards').

Practices awarded accreditation against entry level standards must apply for and be awarded accreditation against the full suite of standards within 24 months of being awarded accreditation against entry level standards.

Practices awarded accreditation against the full suite of standards will enter the accreditation maintenance program, which requires them to be re-accredited every 4 years.

To achieve accreditation, practices must submit an application, including documentary evidence in support of compliance with the Standards, to the accreditor of their choice. The accreditor will conduct an off-site desk-top audit to determine the extent of the practice's compliance with the Standards.

### Key points

- Non-accredited practices providing non-radiology services can register for 'deemed accreditation' by 30 June 2010
- Non-accredited practices **not** registered by 30 June 2010 **cannot** provide Medicare funded DIST services
- Practices must apply for and be awarded at least accreditation against entry level standards by 30 June 2011
- Practices must apply for and be awarded accreditation against the full suite of standards within 24 months of being awarded accreditation against entry level standards
- Practices awarded accreditation against the full suite of standards must be re-accredited every 4 years under the accreditation maintenance program



## New practices applying for accreditation from 1 July 2010 for the first time

Non-accredited practices applying for accreditation on or after 1 July 2010 for the first time must apply for accreditation against either entry level or the full suite of standards under the Stage II Scheme (see page 15, 'Standards').

This includes practices who

- were eligible to participate in the Stage I Scheme but did not participate; or
- were eligible to enter the Stage II Scheme transitional arrangements but did not register by 30 June 2010; or
- commenced operation on or after 1 July 2010.

Practices awarded accreditation against entry level standards must apply for and be awarded accreditation against the full suite of standards within 24 months of being awarded accreditation against entry level standards.

Practices awarded accreditation against the full suite of standards will enter the accreditation maintenance program, which requires them to be re-accredited every 4 years.

To achieve accreditation, practices must submit an application, including documentary evidence in support of compliance with the Standards, to the accreditor of their choice.

The accreditor must conduct an off-site desk-top audit to determine the extent of the practice's compliance with the Standards. The accreditor must complete the audit within 15 business days for accreditation against entry level standards, or within 30 business days for accreditation against the full suite of standards.

### Key points

- Practices must apply for accreditation against entry level standards as a minimum
- Practices must apply for and be awarded accreditation against the full suite of standards within 24 months of being awarded accreditation against entry level standards
- Practices awarded accreditation against the full suite of standards must be re-accredited every 4 years under the accreditation maintenance program
- Accreditors must complete the off-site desk-top audit within the time limits provided

## **Non-accredited practices that have previously been accredited**

Non-accredited practices that have previously been accredited under the Stage I or Stage II Scheme where their accreditation was revoked or otherwise ended must apply for and obtain accreditation against the full suite of standards in order to re-enter the Scheme (see page 14, 'Standards'). These practices are not eligible to apply for accreditation against entry level standards.

To achieve accreditation, practices must submit an application, including documentary evidence in support of compliance with the Standards, to the accreditor of their choice.

The accreditor will conduct an off-site desk-top audit to determine the extent of the practice's compliance with the Standards. The audit must be completed within 30 business days from receipt of the application.

Practices awarded accreditation against the full suite of standards will enter the accreditation maintenance program, which requires them to be re-accredited every 4 years.

Practices that do not have accreditation cannot provide Medicare funded DIST services and must inform clients prior to carrying out services. Failure by a proprietor of a practice to notify patients that the practice is not accredited and a Medicare benefit is not payable before providing diagnostic imaging services is an offence.

### **Key points**

- Practices whose accreditation has been revoked or otherwise ended must apply for accreditation against the full suite of standards
- Accreditors must complete the off-site desk-top audit within 30 business days
- Practices awarded accreditation against the full suite of standards must be re-accredited every 4 years under the accreditation maintenance program
- Practices that do not have accreditation cannot provide Medicare funded DIST services and must inform clients prior to carrying out services

## **MIAP Accredited Practices**

The Medical Imaging Accreditation Program (MIAP) is recognised for accreditation under the Stage II Scheme. This includes practices with MIAP accreditation which was recognised under the Stage I Scheme and practices applying for the first time. Practices accredited with MIAP should contact the accreditor of their choice to discuss the MIAP recognition arrangements under the Stage II Scheme.

Accreditation under the Scheme will be granted until the date of the expiration of the recognised MIAP accreditation. By this date, practices will need to either provide their accreditor with evidence of renewal of MIAP accreditation or be granted accreditation against the full suite of standards (see page 15, 'Standards').

### ***Maintaining MIAP accreditation***

A practice must notify their accreditor if their MIAP accreditation lapses, is not renewed or is revoked.

When MIAP accreditation lapses, is not renewed or is revoked, a practice no longer satisfies recognition arrangements under the Scheme. Therefore accreditation under the Stage II Scheme will be revoked and the practice cannot provide Medicare funded DIST services.

Eligibility to provide Medicare funded DIST services is not re-established until the practice either renews their MIAP accreditation (which is then recognised under the Stage II Scheme) or is accredited against the full suite of standards.

### **Key points**

- MIAP accreditation is recognised for accreditation under the Stage II Scheme
- Accreditation under the Stage II Scheme is granted up to the expiry date of the MIAP accreditation
- Practices must renew their MIAP accreditation and provide proof of renewal or apply for and receive accreditation against the full suite of standards under the Scheme prior to the expiry of their MIAP accreditation in order to ensure continuity of access to Medicare benefits

## Accreditation Maintenance Program

Accreditation against the full suite of standards under the Stage II Scheme applies for a period of 4 years from the date of accreditation.

By the date of the fourth anniversary of the practice's previous accreditation against the full suite of standards, the practice must apply for and be granted accreditation against the full suite of standards (see page 14, 'Standards').

To achieve accreditation, practices must submit an application, including documentary evidence in support of compliance with the Standards, to the accreditor of their choice.

The accreditor will conduct an off-site desk-top audit to determine the extent of the practice's compliance with the Standards.

The application process must be complete by the anniversary date. Practices should ensure that they submit their applications in plenty of time for their accreditor to complete the re-accreditation process before the anniversary date. Practices can contact their accreditors for more information.

### Key points

- Practices awarded accreditation against the full suite of standards must be re-accredited every 4 years under the accreditation maintenance program
- Practices must be re-accredited by their anniversary date to allow continuity of service
- Practices should ensure they allow sufficient time for the accreditor to complete the re-accreditation process

## Accreditation time frames and eligibility

The Stage II Scheme initially provides for three levels of accreditation. Deemed accreditation only applies during the transition to Stage II, and only certain practices are eligible. The following table shows the levels of accreditation, the time frames under which they operate and which practices are eligible for each level.

Accreditation	Time frames and eligibility
<b>'Deemed accreditation'</b>	<ul style="list-style-type: none"> <li>Available <b>only</b> to non-radiology practices that do not hold Stage I accreditation as a radiology service practice and register before 30 June 2010. Practices that are 'deemed accredited' must apply for and obtain accreditation against entry level standards or the full suite of standards before 30 June 2011.</li> </ul>
<b>Accreditation against entry level standards</b>	<ul style="list-style-type: none"> <li>Available from 1 July 2010. Non-accredited practices may apply at any time after 1 July 2010. All practices must receive accreditation against the full suite of standards within 2 years of receiving accreditation against entry level standards in order to retain their accreditation.</li> </ul>
<b>Accreditation against the full suite of standards</b>	<ul style="list-style-type: none"> <li>Available from 1 July 2010. Both accredited and non-accredited practices may apply at any time after 1 July 2010. Practices must be re-accredited every 4 years as part of the accreditation maintenance program in order to retain their accreditation.</li> </ul>
<b>Accreditation maintenance program</b>	<ul style="list-style-type: none"> <li>Practices accredited against the full suite of standards must apply for and be granted re-accreditation before the fourth anniversary of their accreditation against the full suite of standards.</li> </ul>

## Accreditors

### What is an Accrerator?

An accrerator is an independent organisation appointed by the Minister for Health and Ageing as an accrerator for the Scheme.

Accrereators accept applications for accreditation, perform desk-top and on-site audits as required and grant accreditation. They also advise Medicare Australia of practices' accreditation status and liaise with the Department of Health and Ageing as required.

In order to become an accrerator, organisations are required to demonstrate their credentials and capacity to provide independent, timely and affordable accreditation services to a diversity of practice types. Under the Stage II Scheme, approved accrereators are required to assess all practice types including those practices which only provide non-radiology services.

Accrereators approved for the Scheme are named in subordinate legislation as the organisations able to receive registrations for 'deemed accreditation' from practices in operation before 1 July 2010 and accredit practices under Section 23DZZIAA of the *Health Insurance Act 1973*.

### Choose an Accrerator

The Department has appointed multiple accrereators for the Scheme, with the aim of providing accreditation services that are available nationally to all diagnostic imaging practices. **Practices should choose a single approved accrerator.**

Each accrerator operates independently within the guidelines provided by the Department, and as such has its own application forms and sets its own fees. Practices should direct any enquiries regarding application processes or fees to the accrerator of their choice.

***The Department does not carry out any accreditation services.***

## Changing Accreditors

Practices should choose a **single accreditor** but may choose to change their accreditor at any time. To change accreditors, practices should notify their current accreditor of their intention to change and request the release of their records, then apply to the accreditor of their choice.

Those practices whose Stage I accreditor is not continuing with the Stage II Scheme should select another accreditor. Access to the Medicare benefits will not be interrupted during this transition.

Practices should contact their accreditor of choice for more information.

## Accreditors for the Stage II Scheme

Choose **one** of the following Stage II Scheme accreditors:

- Health and Disability Auditing Australia  
Phone: 1800 601 696  
Website: <http://www.hdaau.com.au>
- National Association of Testing Authorities, Australia  
Phone: 1800 621 666  
Website: <http://www.nata.com.au>
- Quality in Practice  
Phone: 1300 888 329  
Website: <http://www.qip.com.au>

For more information visit [www.diagnosticimaging.health.gov.au](http://www.diagnosticimaging.health.gov.au) and select The Diagnostic Imaging Accreditation Scheme from the menu.

## Key points

- Accreditors accept registrations and applications for accreditation
- Accreditors may perform desk-top audits (not located at practice sites), and may perform on-site audits (located at practice sites).
- Practices may choose a single accreditor
- Questions regarding accreditation fees and forms should be directed to an accreditor

## The Standards

The Stage II Standards were developed by the Consultative Working Group (CWG), comprising 13 individuals with expertise and demonstrated experience in the delivery of diagnostic imaging services, health administration, technical standards and health consumer advocacy.

### ***Stage II Standards – entry level***

There are three entry level Stage II Practice Accreditation Standards. These standards cover existing regulatory requirements regarding the licensing and registration of staff and equipment and radiation safety. Interim Guidelines for the entry level Practice Accreditation Standards are available online at the Department's website.

- Standard 1.2— Registration and Licensing Standard
- Standard 1.3— Radiation Safety Standard
- Standard 1.4— Equipment Inventory Standard

### ***Stage II Standards – full suite***

Guidance material for the full suite of Practice Accreditation Standards will be available online at the Department's website by October 2010. The full suite of Stage II Practice Accreditation Standards are available on the department's website. They comprise three entry level standards, plus an additional twelve standards:

- Standard 1.1—Safety and Quality Governance Standard
- Standard 1.2—Registration and Licensing Standard
- Standard 1.3—Radiation Safety Standard
- Standard 1.4—Equipment Inventory Standard
- Standard 1.5—Equipment Servicing Standard
- Standard 1.6—Infection Control Standard
- Standard 2.1—Provision of Service Standard
- Standard 2.2—Consumer Information Standard
- Standard 2.3—Patient Identification & Procedure Matching Standard
- Standard 2.4—Medication Management Standard
- Standard 3.1—Diagnostic Imaging Protocol Standard
- Standard 3.2—Technique Charts Standard
- Standard 4.1—Communicating with Requesting Practitioners Standard
- Standard 4.2—Results of Self-Determined Services Standard
- Standard 4.3—Consumer Feedback & Complaints Management Standard



## **Location Specific Practice Numbers (LSPNs)**

In order to provide Medicare funded DIST services, practices must be participating in the Stage II Scheme and must also have a Location Specific Practice Number (LSPN).

LSPNs are allocated and registered by Medicare Australia. An LSPN is a unique number which identifies the location of the site or base for Medicare Australia. Before a practice can provide Medicare funded diagnostic imaging services, a practice must apply to Medicare Australia in order to obtain a registered LSPN.

After practices have received a registered LSPN, Medicare Australia writes to practice sites every 12 months and asks them to update their registration details. If a site fails to comply with this request, their registration may be suspended for up to 3 months. Registration will be cancelled by Medicare Australia after a continuous period of 3 months suspension.

For more information about LSPNs or to obtain an LSPN Registration Form, visit the Medicare Australia website [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au) or call Medicare Australia on 1800 620 589 toll free Monday to Friday, 9am to 4.30pm AEST

### **Obtaining your Location Specific Practice Number (LSPN)**

#### **Medicare Australia contact details:**

**Website:** [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au)

**Phone:** 1800 620 589 (toll free Monday to Friday, 9am to 4.30pm AEST)

## Contacts

### Department of Health and Ageing: Diagnostic Imaging Accreditation Scheme

**Website:** [www.diagnosticimaging.health.gov.au](http://www.diagnosticimaging.health.gov.au)

(select *The Diagnostic Imaging Accreditation Scheme* from the menu)

**Post:**

Diagnostic Imaging Section  
MDP 852  
GPO Box 9848  
Canberra ACT 2601  
Australia

**E-mail:** [di.accreditation@health.gov.au](mailto:di.accreditation@health.gov.au)

**Phone:** 02 6289 8859

**Fax:** 02 6289 4028

### Medicare Australia: LSPNs

**Website:** [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au)

**Phone:** 1800 620 589 (toll free Monday to Friday, 9am to 4.30pm AEST)

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**Phone:** 1800 601 696

**Website:** [www.hdaau.com.au](http://www.hdaau.com.au)

**National Association of Testing Authorities, Australia**

**Phone:** 1800 621 666

**Website:** [www.nata.com.au](http://www.nata.com.au)

**Quality in Practice**

**Phone:** 1300 888 329

**Website:** [www.qjp.com.au](http://www.qjp.com.au)