Interventional Cardiology Recognized as Distinct Specialty by CMS

Traditionally, the Centers for Medicare and Medicaid Services (CMS) has not made a distinction between interventional cardiologists and general cardiologists in regards to reimbursement, which has led to many consultations and referral claims being denied, because both general cardiology and interventional cardiology are considered to be the same specialty. Quality metric comparisons also present confounding results because of the different patient populations and complexities that interventional cardiologists treat, in contrast to general cardiologists. To assist in remedying these issues, the Society for Cardiovascular Angiography and Interventions (SCAI) filed for a dedicated physician specialty code in 2013 upon confirming that the treatments provided, and patient populations treated by interventional cardiologists were significantly different from other cardiology specialties. In 2014, CMS granted this request which was implemented January 5, 2015.

An interventional cardiologist is a physician who is trained to treat and diagnose cardiovascular disease, as well as congenital and structural heart conditions through catheter-based procedures such as angioplasty and stenting. Interventional cardiologists have one to two years of additional education and training beyond their initial certification as a general cardiologist, which places them among the foremost authorities on cardiovascular disease and treatment. Interventional cardiologists may seek additional credentialing by becoming members or fellows of the SCAI. To become a fellow, the physician must be out of training for five years and have performed at least 1,000 procedures. This additional training results in the designation FSCAI. Those earning the title of Master Interventionalist are nominated by other physicians, and earn the designation of MSCAI. Both of these designations indicate a high level of expertise in the field of interventional cardiology, identify specific skill sets unique to the interventional cardiologist, and distinctly differentiate them from general cardiologists.

The new specialty code identified for Interventional Cardiologists is C3, and physicians can request an update to their specialty status through CMS in a process which should only take “about 15 minutes of their time.” The advantages to updating the status of physicians include:

1. Fewer claim denials, allowing both the general cardiologist and the interventional cardiologist to treat the same patient, but be fairly reimbursed for the skills and services they each provide.

2. Fairer comparison of resource utilization, which will address concerns over an apples-to-oranges comparison between general cardiologists and interventional cardiologists, and ensure that the naturally higher resource utilization by interventional cardiologists is not detrimental to the physician.

3. Improved evaluation of performance and outcomes, which addresses the fact that the quality-of-care performance scores for interventional cardiologists may have been negatively affected due to their grouping with general cardiologists. This new designation should assist with appropriately evaluating performance, and perhaps improving public perception of the specialty; and,

4. Better data and enhanced advocacy, which will provide accurate data about the number of practicing interventional cardiologists (previously unavailable), the number and types of procedures performed, and an improved assessment of performance.

Peter Duffy, MD, MMM, FSCAI, secretary and chair of the advocacy and government relations committee for SCAI, elaborated upon the reasons SCAI pursued this new specialty designation at a webinar in December. “The concern is that if we are compared to general cardiologists, we are going to be seen in some cases as overutilizers of procedures; our length of stay may be different; our mortality, even risk-adjusted, may be different. We want to… be able to compare ourselves to our colleagues who are doing pretty much the same work that we are doing. That hadn’t been possible in the past. With that comparison, we will be able to improve quality, find outliers…and improve performance across the board.”
With the new designation in effect, interventional cardiologists will now be able to reap these benefits and continue to further progress within their field.


2 Ibid.


Mr. Cimasi holds a Masters in Health Administration from the University of Maryland, as well as several professional designations: Association of Accredited Business Appraiser (ASBA); Certified Appraiser (CA); Fellow Royal Institution of Chartered Surveyors (FRICS – Royal Institute of Chartered Surveyors); Master Certified Business Appraiser (MCBA – Institute of Business Appraisers); Accredited Valuation Analyst (AVA – National Association of Certified Valuators and Analysts); and, Certified Merger & Acquisition Advisor (CM&AA – Alliance of Merger & Acquisition Advisors). He has served as an expert witness on cases in numerous courts, and has provided testimony before federal and state legislative committees. He is a nationally known speaker on healthcare industry topics, the author of several books, the latest of which include: “Accountable Care Organizations: Value Metrics and Capital Formation” [2013 - Taylor & Francis, a division of CRC Press], “The Adviser’s Guide to Healthcare” – Vols. I, II & III [2010 – AICPA], and “The U.S. Healthcare Certificate of Need Sourcebook” [2005 - Beard Books]. His most recent book, entitled “Healthcare Valuation: The Financial Appraisal of Enterprises, Assets, and Services” was published by John Wiley & Sons in 2014.

Mr. Cimasi is the author of numerous additional chapters in anthologies; books, and legal treatises; published articles in peer reviewed and industry trade journals; research papers and case studies; and, is often quoted by healthcare industry press. In 2006, Mr. Cimasi was honored with the prestigious “Shannon Pratt Award in Business Valuation” conferred by the Institute of Business Appraisers. Mr. Cimasi serves on the Editorial Board of the Business Appraisals Practice of the Institute of Business Appraisers, of which he is a member of the College of Fellows. In 2011, he was named a Fellow of the Royal Institution of Chartered Surveyors (RICS).

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