

NAEC 2025 Accreditation Process – Updates and Reminders

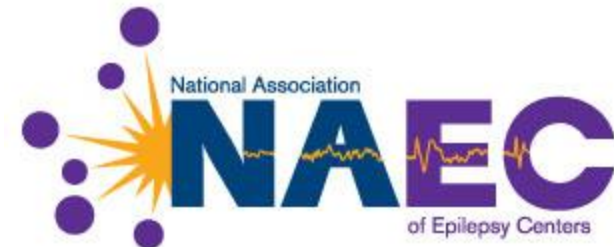
January 9, 2025

Dr. Fred Lado, President

Dr. Stephan Schuele, Vice President

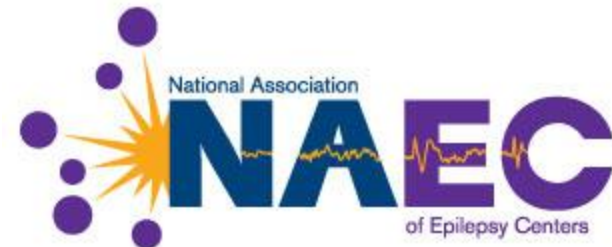
Ellen Riker, Executive Director

Barbara Small, Programs Manager



Webinar Agenda

- Timeline
- Overview of 2025 Accreditation Criteria including changes for 2025
- Instructions, Logistics, and Resources
- Q &A - Discussion



2025 Accreditation Timeline

- **November 25, 2024**: NAEC 2025 accreditation process began; Instructions distributed.
- **January 31, 2025**: Deadline to pay dues, complete the Center Annual Report, upload required documents to Box.com, and complete the supplemental survey.
- **February 1-15, 2025**: Review and Revise Period: NAEC staff will review your center's submission for completion and let you know if anything is missing.
- **March 1, 2025**: Final deadline for any revisions or additions. **We cannot accept dues or materials after this date.**



2025 Accreditation Process Steps

Pay 2025 Membership Dues

- All centers

Complete Center Annual Report

- All centers

Upload Required Documents

- Only centers completing full process in 2025



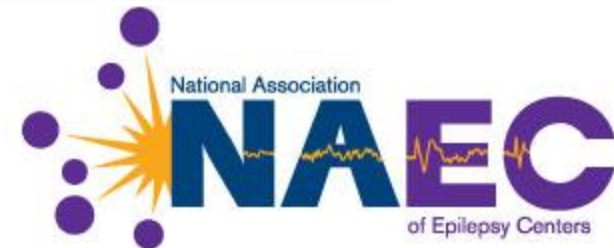
Overview of NAEAC Accreditation Criteria

EMU

Services

Personnel

Protocols



2025 Changes and Clarifications

Physician Board
Certifications

Neuromodulatory
Devices

Case Minimums

EMU Policy

Protocols

EMU Caring

AANN Certificate
Program

ABRET LAB-LTM-
EM+

Moving to a Three-
Year Accreditation
Cycle

Surgical Criteria
for Level 3 Centers

Referral
Agreements for
Level 3 and 4
Centers

Accessing the
Center Annual
Report



EMU Criteria - 1

	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
EPILEPSY MONITORING UNIT - Core Criterion		
All NAEC Centers are required to have an EMU that includes:		
1) Designated hospital beds where video and EEG data is captured and sent to a central location	Center Annual Report Response “Yes” with appropriate details in uploaded EMU policy	
2) Remote-control video cameras with 24/7 recording available (not a fixed camera)	Center Annual Report Response “Yes” with appropriate details in uploaded EMU policy	
3) Trained personnel dedicated 24/7 to monitoring video and EEG – someone trained in seizure recognition and recording integrity, not necessarily a traditional EEG technologist.	Center Annual Report Response “Yes” with appropriate details in uploaded EMU policy	
4) EMU safety-trained inpatient nurses	Center Annual Report Response “Yes” with appropriate details in uploaded EMU policy	

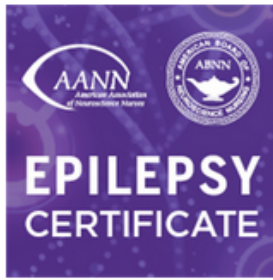
EMU Criteria - 2

	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
EPILEPSY MONITORING UNIT- Core Criterion		
All NAEC Centers are required to have an EMU that includes:		
5) Epilepsy-specific staff training and protocols for seizure safety	Center Annual Report Response “Yes” with appropriate details in uploaded EMU policy	
6) Clinical decision-making by an epileptologist	Center Annual Report Response “Yes” with appropriate details in uploaded EMU policy	
7) EMU Policy must be signed by the center medical director, EMU administrative nurse manager or equivalent, and lab EEG manager (change for 2025)	Upload policy with signature in 2025 (change for 2025)	
8) NAEC/AANN Training Program	This criterion is on hold for 2025 as NAEC and AANN develop a new way for centers to be able to access the training program. (change for 2025)	
9) Training for personnel dedicated 24/7 to monitoring video and EEG	Enter name and email in Center Annual Report. Upload ASET LTM certificate or center training materials.	

2025 Changes: EMU Policy

- For centers in their full accreditation year in 2025 and accreditation cycles following, **the EMU Policy must be dated and signed by the center medical director, EMU administrative nurse manager or equivalent, and lab EEG manager.**





Seizure and Epilepsy Healthcare Professional in a Comprehensive Epilepsy Center Certificate Program: 8 Modules

- For the 2025 accreditation cycle, **NAEC will not require that centers to show that an additional nurse has completed the AANN 8-module epilepsy course. (Change)**
- NAEC has worked with AANN to pull out 2 modules for epilepsy center nurses. Nurses at NAEC member centers will be able to access these modules at no cost to centers later this year.
- Access to the full certificate program course will be available to nurses at NAEC centers for only \$200.
- NAEC will announce 2026 requirements in summer 2025.



Epilepsy Center Services Criteria – 1

	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
1) ELECTRODIAGNOSTIC SERVICES		
a) 24-hour video-EEG with scalp electrodes	Adequate volume of 100+ EMU admissions reported on Center Annual Report. Upload 5 EMU reports from patients admitted in a single month in 2024. Pediatric centers must upload a report for a patient younger than 2 years old.	Adequate volume of 50+ EMU admissions reported on Center Annual Report. Upload 2 EMU reports from patients admitted in a single month in 2024. Pediatric centers must upload a report for a patient younger than 2 years old.
b) 24-hour video-EEG recording with intracranial electrodes (subdural, epidural, or depth electrodes)	Adequate volume of at least 6 cases from 2022 to 2024 in Center Annual Report. Upload 6 reports from 2022 through 2024, including at least one report from 2024.	NOT REQUIRED
c) Access to Wada testing or functional neuroimaging	Center Annual Report Response "Yes"	NOT REQUIRED
d) Functional cortical mapping by stimulation of intracranial electrodes	Center Annual Report Response "Yes"	NOT REQUIRED

Reminder: How to Count EMU Admissions

NAEC is seeking the **number of patients admitted to the EMU in the past calendar year**. All patients in the EMU for diagnosis or evaluation of epilepsy, seizures or spells, and/or evaluation for epilepsy surgery can be counted. These include:

- Elective EMU admissions
- EMU admissions from your Emergency Department and other non-elective admissions if the patient was admitted and monitored in your EMU and managed by the EMU team.
- Patients that are admitted as observation stays that are admitted to EMU after 24 – 48 hours.

Do not count:

- ICU patients that receive VEEGs
- Patients boarded in an EMU bed but were not admitted with the primary purpose of managing seizures.
- Patients admitted in the EMU setting but not receiving VEEGs (i.e., for ketogenic diet initiation without VEEG monitoring).



Epilepsy Center Services Criteria - 2

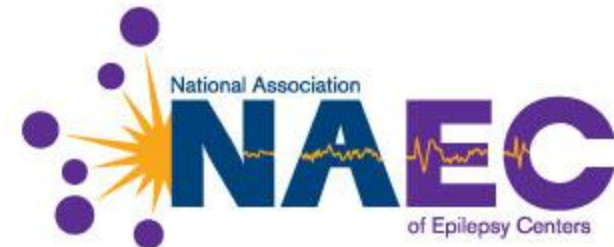
	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
2) IMAGING SERVICES		
a) Magnetic resonance imaging (at least 1.5T)	Upload 1 report from 2024 reflecting expertise in epilepsy signed/approved by the neuroradiologist listed on Center Annual Report	
b) Computerized axial tomography	Center Annual Report Response “Yes”	
c) Cerebral angiography	Center Annual Report Response "Yes"	NOT REQUIRED
d) Access to interictal PET or ictal/interictal SPECT by established arrangement or on site	Require upload of 1 PET or SPECT report from 2024	NOT REQUIRED
3) PHARMACOLOGICAL SERVICES		
a) Quality-assured anticonvulsant serum drug levels	Center Annual Report Response “Yes”	
4) NEUROPSYCHOLOGICAL SERVICES		
a) Comprehensive neuropsychological test batteries	Upload 1 report from 2024;	

Epilepsy Center Services Criteria - 3

	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
5) SURGICAL SERVICES		
a) Any resective or ablative epilepsy surgery with goal of controlling seizures	Upload 1 operative report from 2024 signed by the neurosurgeon listed in Center Annual Report; At least one operative case in 2024 listed in the Center Annual Report	NOT REQUIRED
b) Placement of intracranial electrodes	Center Annual Report Response “Yes”	NOT REQUIRED
c) Implantation of neuromodulatory devices (VNS, DBS, or RNS) (change for 2025)	Upload 1 operative report of a VNS, DBS or RNS implantation from 2024 (change for 2025)	NOT REQUIRED
d) Management of neuromodulatory devices (VNS, DBS, or RNS)	Center Annual Report Response “Yes”	
6) REHABILITATION SERVICES (inpatient and outpatient): Sufficient physical, occupational, and speech therapy	Center Annual Report Response “Yes”	

2025 Changes: Neuromodulatory Devices

- For 2025, NAEC will require all level 4 centers to:
 - List a minimum of 1 case of implantation of VNS, DBS, or RNS in their Center Annual Report
 - Submit one VNS/DBS/RNS de-identified patient report in their full accreditation year.
 - A VNS battery change case is not sufficient to count for this criterion.



2025 Clarification: Services in Interim Accreditation Year

- All centers must meet case minimums every year, not just their full accreditation year.
 - Level 3 Centers: At least 50 EMU admissions
 - Level 4 Centers: At least 1 resective or ablative surgery; at least 1 VNS/DBS/RNS implantation case; and at least 100 EMU admissions



Epilepsy Center Personnel Criteria - 1

	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
1) PHYSICIANS - Core Criterion		
a) Medical Director with ABPN epilepsy board certification and/or the ABPN or ABCN clinical neurophysiology or ABCN epilepsy monitoring board certifications. Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience (change for 2025)	Upload CV	
b) Second epileptologist who is board-certified or board-eligible for ABPN epilepsy board certification and/or the ABPN or ABCN clinical neurophysiology or ABCN epilepsy monitoring board certifications. NAEC will only accept board eligibility for 7 years after completion of training. Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience. (change for 2025)	Upload CV	NOT REQUIRED
c) Pediatric and adult/pediatric centers must have a board-certified pediatric epileptologist, who has ABPN Child Neurology in addition to the other certifications mentioned above. Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience. (change for 2025)	Upload CV	
d) At least one neurosurgeon who is ABNS board-certified or board-eligible tracking toward certification	Upload CV	NOT REQUIRED

2025 Changes: Physician Criteria

- Second Epileptologist: Level 4 centers' 2nd epileptologists that are **“board-eligible” can only have this status for 7 years after completion of training.** S/he must become board certified within 7 years for NAEC accreditation purposes.
- Foreign-Trained Physicians:
 - Starting in 2025, all NAEC center directors will be held to the same standard for ABPN/ABCN subspecialty board certification.
 - ABCN offers examination and certification for international candidates who are ineligible for US board certification.
 - **Current center medical directors who completed their training outside of the US have up to 3 years to meet the ABPN/ABCN subspecialty board certification requirement. New centers applying for accreditation will be required to meet the medical director board certification criterion without the phase-in period.**



Epilepsy Center Personnel Criteria - 2

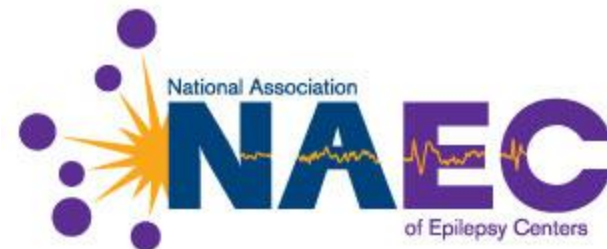
	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
2) Neuropsychologist	Upload CV	
3) Psychosocial: Social Worker	Name and info listed in Center Annual Report	
4) Nursing/Nurse Practitioner/Physician Assistants		
a) Outpatient clinic nurse/nurse practitioner/physician assistant with expertise in epilepsy	Name and info listed in Center Annual Report	
b) Inpatient EMU nurse/nurse practitioner/physician assistant with expertise in epilepsy	Name and info listed in Center Annual Report	
5) EEG Technologist(s): At least one technologist board-certified by ABRET	Name and info listed in Center Annual Report	
6) Trained personnel dedicated 24/7 to monitoring video and EEG	Name and info listed in Center Annual Report. Upload certificate (if completed ASET's LTM 100 course)	
7) Neuroradiologists	Name and info listed in Center Annual Report	

Center Protocols Criteria

	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
1) Examination of speech, memory, level of consciousness, and motor function during and following a seizure (change for 2025)	Upload	
2) Measures to be taken if number, duration, or severity of seizures is excessive, including number or duration of seizures requiring physician notification (change for 2025)	Upload	
3) Medication reduction to increase seizure yield	Upload	
4) Care of head dressings and measures to prevent postoperative infections or other complications in patients studied with intracranial electrodes	Upload	NOT REQUIRED
5) Management of status epilepticus and seizures in hospitalized patients (change for 2025)	Upload	
6) Letter indicating that protocols have been reviewed, are current, and are being followed by the center must be signed by the center medical director, EMU administrative nurse manager or equivalent, and lab EEG manager (change for 2025)	Upload letter dated in 2025 (change for 2025)	
7) Admission order set for EMU patients	Upload	

2025 Changes: Center Protocols

- For centers in their full accreditation year in 2025 and years following, all centers will be required to upload a statement that is dated and signed by the center medical director, EMU administrative nurse manager or equivalent, and lab EEG manager indicating: “we have reviewed the protocols provided to NAEC. They are current and they are being followed by the center.”
- NAEC has also updated the checklist of the required elements for center protocols and has made incremental updates for protocols 1, 2 and 5; these updates to the criteria are included in the accreditation instructions.

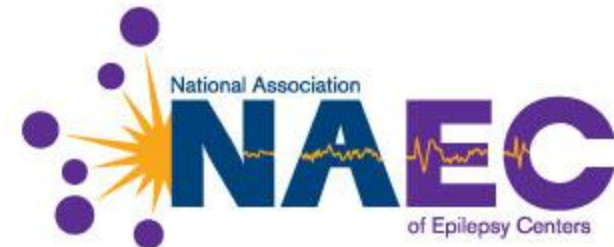


Additional Safety and Other Criteria

	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES	
8) Layout and furnishings should allow easy access to and continuous observation of patients and minimize risk of injury due to falls and other safety concerns	Center Annual Report Response “Yes”	
9) EMU Caring - one physician and one nurse or tech must complete	Enter name and emails in Center Annual Report. Upload certificates (if received)	
LEVEL 3 AND LEVEL 4 CENTER REFERRAL AGREEMENT	Agreement not required but must answer questions in the Center Annual Report if relevant. (change for 2025)	Upload and answer relevant questions in the Center Annual Report. (change for 2025)
CONTINUAL COMPLIANCE		
Centers are required to maintain continual compliance with accreditation criteria throughout their accreditation period.	Attestation in Center Annual Report and interim notification of NAEC of substantial changes, if necessary	

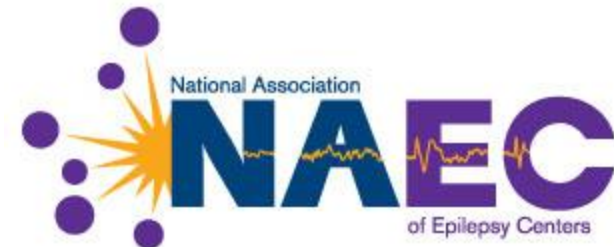
2025 Changes: Level 3 and 4 Center Referral Relationships

- To encourage meaningful partnerships, NAEC is considering strengthening the criteria for referral arrangements between level 3 and 4 centers.
- Step 1: NAEC added questions to the Center Annual Report - both level 3 and 4 center partners must report how many patients the level 3 center referred to the level 4 partner in the last year and how many multi-disciplinary conferences the teams have participated in together.
- NAEC will review information received in 2025 to assess whether any additional criteria or required elements should be included in future years.



2025 Changes: Level 3 Centers

- In recent years, level 3 centers that perform epilepsy surgeries or implant VNS devices have been required to meet some level 4 center surgical criteria.
- This has been confusing for centers and raised concerns about fairness.
- Accordingly, **NAEC will have just one set of criteria for level 3 centers that does not include any surgical requirements.**
- While level 3 centers will still be required to submit the number of surgeries that they provide annually in their center annual report, there will be no other surgery-related criteria for them to meet.



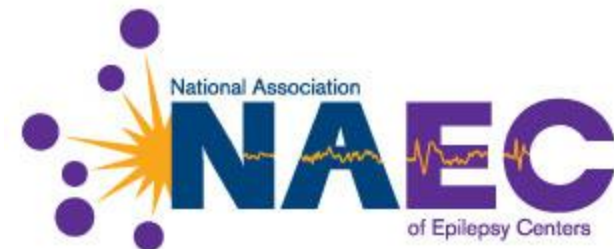
2025 Changes: ABRET LAB-LTM-EM+ Recognition

- **NAEC will phase out its allowance for LAB-LTM-EM+ centers to not have to submit scalp and intracranial vEEG reports for NAEC Accreditation**
 - All centers that currently have LAB-LTM-EM+ or who had filed their letter of intent with ABRET by July 1, 2024 and achieved it, will continue to be excused from submitting the required vEEG patient reports during their current 5-year accreditation period.
 - Once their current ABRET accreditation period is over, these centers will have to submit all relevant patient reports.
- NAEC will continue to recognize members with LAB-LTM-EM+ on the NAEC website and is continuing conversations with ABRET about ways to coordinate our programs in future years.



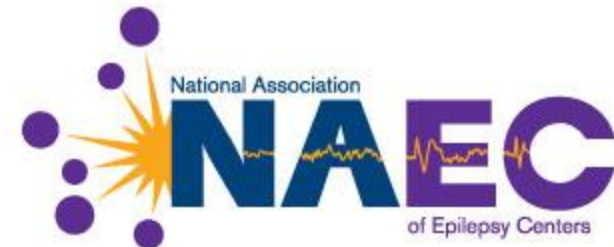
2025 Changes: Extending to Three-Year Accreditation Cycle

- NAEC is moving to a three-year accreditation cycle to mitigate the burden of completing the process for members and to more evenly balance the number of members completing the full accreditation process in any given year.
 - To begin the rebalancing process, when centers next complete the full accreditation process in either 2025 or 2026, those that receive full accreditation will be randomly assigned to either receive 2- or 3-year accreditation.
- Once implemented, fully-accredited centers will receive accreditation for 3 years and only need to submit documents every 3 years, instead of every other year. Centers that receive conditional accreditation will continue to have to complete the full process in the following year.



2025 Changes: Adult/Pediatric Center Split

- NAEC will no longer accredit combined adult/ped centers – this change first took effect in 2024.
- Centers going through full process in 2025 must either be accredited as an adult **OR** pediatric center or as **separate** adult and pediatric centers.
- Centers that split may have different accreditation levels for the adult and pediatric programs.
- **A level 3 center may refer to a level 4 partner at the same institution,** but it must certify that it has sufficient resources and provide a document of the referral arrangement



LOGISTICS FOR 2025 ACCREDITATION PROCESS

Pay 2025 Membership Dues

- All centers

Complete Center Annual Report

- All centers

Upload Required Documents

- Only centers completing full process in 2025



Log Into the Members-Only Section of Website



About Resources ▾ Latest News Contact

Find a Center

Member Login

- Who has access to Members-Only Section of Website?
 - All center contacts from previous Center Annual Report submission
- Who has access to Center Annual Report?
 - Pre-set access for Center Director, Co-Medical Director, Administrator, Additional Admin Contact
- What if I don't have my log-in info or need to make other changes?
 - Please contact NAEC staff at 202-800-7074 or info@naec-epilepsy.org



Accreditation Tools Page on NAEC Website



Member Resources



My Centers

Select a Center to View

[NAEC Test Center](#)



Accreditation Tools

NAEC has provided centers with many tools to assist them in completing the annual accreditation process.



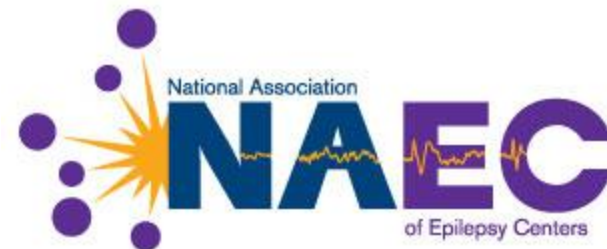
Center Operations Tools

Epilepsy center personnel training manuals and communications tools produced by NAEC Member Centers.



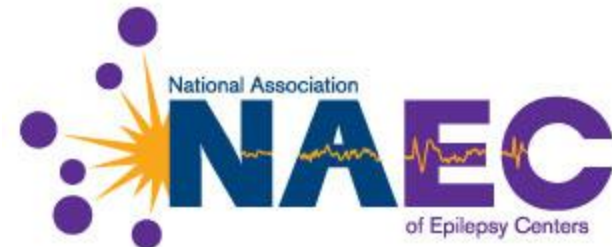
Meetings & Webinars

Each year at the NAEC Annual Meeting, NAEC Board Members present summary data from the Center Annual Reports submitted that year.



Complete 2025 Center Annual Report

- Form is accessed via the NAEC website:
<https://naec-epilepsy.org/center-annual-report>
- If you need assistance accessing the Center Annual Report, please contact NAEC staff at 202-800-7074 or email info@naec-epilepsy.org
- **Change for 2025:** Multiple people have access to CAR but the submission can only be accessed by one person at a time and only one version of the report will be maintained online.



Logging In to Complete the Form



[About](#) [Resources](#) [Latest News](#) [Contact](#)

[Find a Center](#)

[Log Out](#)

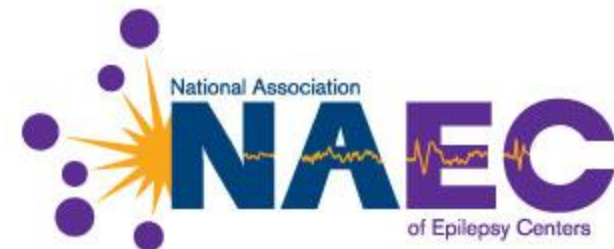


Resources for Epilepsy Centers



[Center Annual Report](#)

[Start a New Center Annual Report](#)

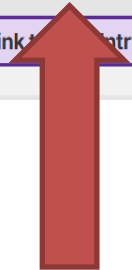


Logging Back In to Complete a Form

Center Annual Report

 Start a New Center Annual Report

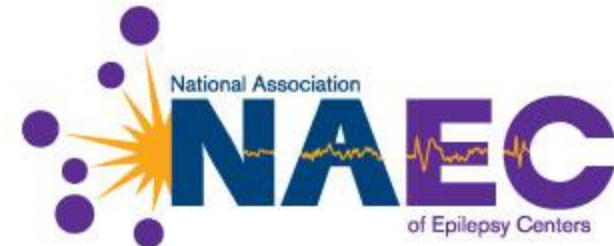
Link to Edit Entry	Reporting Center	Reporting Year	Created By (User)	Last Updated	Submission Status	NAEC Review
View & Edit Report	NAEC Test Center	2024		November 25, 2024	Not complete, still working on it	Pending
Link to Edit Entry	Reporting Center	Reporting Year	Created By (User)	Last Updated	Submission Status	NAEC Review



Full Accreditation

Upload Required Documents

- Upload documents to your center's Box.com folder – www.naec.box.com
- If you forget your password, click the “reset password” button on the www.naec.box.com login page and a link to reset your password will be emailed to you.
- Let us know if you have difficulties with Box.com – we have developed a few work arounds.



Your Box Folder

NAME ↑



Admission Order Set



CVs



EMU Caring



EMU Policy



Patient Reports



Protocols

You must upload documents into each folder on the screen that looks like this!

HIPAA Compliance

All patient reports must be de-identified and HIPAA-compliant

- Centers will be notified if PHI is found in a report and will be required to properly de-identify and resubmit all reports.
 - Center will not be accredited if reports are not properly de-identified.
- Instructions list the 18 components to be removed
 - Common question: Delete date and month of all procedures but leave year.



HIPAA Safe Harbor Standard

Remove these elements on every page!

(A) Names	
(B) All geographic subdivisions smaller than a state, including street address, city, county, precinct, ZIP code, and their equivalent geocodes, except for the initial three digits of the ZIP code if, according to the current publicly available data from the Bureau of the Census: (1) The geographic unit formed by combining all ZIP codes with the same three initial digits contains more than 20,000 people; and (2) The initial three digits of a ZIP code for all such geographic units containing 20,000 or fewer people is changed to 000	
(C) All elements of dates (except year) for dates that are directly related to an individual, including birth date, admission date, discharge date, death date, and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older	
(D) Telephone numbers	(L) Vehicle identifiers and serial numbers, including license plate numbers
(E) Fax numbers	(M) Device identifiers and serial numbers
(F) Email addresses	(N) Web Universal Resource Locators (URLs)
(G) Social security numbers	(O) Internet Protocol (IP) addresses
(H) Medical record numbers	(P) Biometric identifiers, including finger and voice prints
(I) Health plan beneficiary numbers	(Q) Full-face photographs and any comparable images
(J) Account numbers	(R) Any other unique identifying number, characteristic, or code, except
(K) Certificate/license numbers	as permitted by paragraph (c) of this section; and

2025 Accreditation Timeline

- **November 25, 2024:** NAEC 2025 accreditation process began; Instructions distributed.
- **January 31, 2025:** Deadline to pay dues, complete the Center Annual Report, upload required documents to Box.com, and complete the supplemental survey.
- **February 1-15, 2025:** Review and Revise Period: NAEC staff will review your center's submission for completion and let you know if anything is missing.
- **March 1, 2025:** Final deadline for any revisions or additions. **We cannot accept dues or materials after this date.**



Questions?

