OBER KALLER

Payment Matters®

Subscribe

Reprints

Health Law Group

www.ober.com

Payment Matters Archive

In this Issue

Expensive Consequences: Failure to Report RHQDAPU Data Will Have Significant Impact Under FY 2010 Acute Care IPPS Rule

New Ambulatory Surgery Center (ASC) Survey Process

Lost Revenue, Overpayments and Harsh Sanctions — Updated CMS Enrollment Rules

CMS Imposes Significant Limitations on "New" Medical Education Programs Qualifying for IME/GME Reimbursement

Resubmission of Some Electronically Submitted Comments to Proposed Regs is Required

Tips from the RAC Cave: "RAC Man and QIC Boy Wonder Unmasked"

Payment Group

New Ambulatory Surgery Center (ASC) Survey Process

Howard L. Sollins 410-347-7369 hlsollins@ober.com

SEPTEMBER 2, 2009

Lisa D. Stevenson 410-347-7381 Idstevenson@ober.com

In response to an increase in health care associated infections and the growing number of procedures being performed at ASCs, the Centers for Medicare and Medicaid Services (CMS) developed a new ASC survey process that is being rolled out in 12 states. Maryland, Michigan, Maine, New Jersey, North Carolina, Oregon, Utah, Wyoming, Arkansas, Indiana, Florida and Kansas have all volunteered to implement the new survey process. As a result, more than 125 Medicare participating ASCs will be surveyed before September 30, 2009. This will affect any Medicare certified ASC, including freestanding, multi-specialty ASCs as well as an ASC that may be established alongside a medical office.

In conjunction with the Centers for Disease Control (CDC), CMS developed this new survey process to reduce the number of health care associated infections (HAIs) in ASCs. HAIs are infections patients acquire while receiving treatment for medical or surgical conditions. The CDC has seen an increase in the number of HAIs in outpatient settings such as ASCs. The new ASC survey process utilizes an infection control survey tool, a team approach to health surveys for medium and large ASCs, and a case tracer methodology, which tracks patients from admission to discharge.

In 2008, three states collaborated with the CDC to pilot test the new ASC infection control survey process. During the pilot program, 68 ASCs were surveyed and a number of unsafe medical practices were identified. Common infection control deficiencies discovered during the pilot program include: multiple use of single dose vials; improper sterilization of instruments; and failure to report notifiable diseases to State Agencies. Given the success of the pilot program at identifying deficient practices in infection control, CMS concluded the new survey process, in conjunction with more frequent ASC inspections, will significantly reduce HAIs.

The American Recovery and Reinvestment Act of 2009 will make fifty million dollars available to State Survey Agencies to implement HAI reduction strategies. Ten million dollars of this funding is set aside specifically to expand ASC oversight, allowing each state to hire up to four additional ASC surveyors. An additional nine million will be made available for national implementation of the new ASC survey tool, which is scheduled to occur in 2010.

Ober|Kaler's Comments: CMS and state agencies are increasingly focusing The Payment Group is a work group within Ober Kaler's on services provided in ASCs from an outcome and quality of care perspective, Health Law Group. as well as from a survey and certification and reimbursement perspective. ASCs come in many varieties, from large, multi-specialty facilities that comply Principals with accreditation standards and have formal privileging processes, to smaller ASCs that function as adjuncts to medical practices. All ASCs, but particularly smaller ones without the same administrative infrastructure, should review how Thomas W. Coons they independently meet regulatory requirements and whether they have solid quality assurance and compliance processes that takes into account enhanced Leslie Demaree Goldsmith scrutiny. Carel T. Hedlund CMS press release can be viewed here. S. Craig Holden Copyright© 2009, Ober, Kaler, Grimes & Shriver Julie E. Kass Paul W. Kim Robert E. Mazer Christine M. Morse Laurence B. Russell Donna J. Senft Susan A. Turner Associates Kristin Cilento Carter Joshua J. Freemire Mark A. Stanley Lisa D. Stevenson