Beyond 23 Hours: ASCs and the Evolution of Extended Care

Kara Marshall Newbury
Assistant Director, Health Policy

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Timely Topic
A new InstaPoll has just been posted by Outpatient Surgery:

Are overnight stays a good idea for ASCs?
How would you answer?
• Yes
• No

http://www.outpatientsurgery.net/
Webinar Overview

- Federal Regulations
- State Laws
- Procedures
- Considerations

ASC Definition (§416.2)

- Distinct entity that
- Operates exclusively for the purpose of providing surgical services to patients
- Not requiring hospitalization and
- In which the expected duration of services would not exceed 24 hours following admission.
Physician Discharge
§416.52(c)(2)

- Discharge order, signed by the operating physician
- The time calculation begins with admission and ends with the discharge of the patient from the ASC after the surgical procedure.
- Interpretive Guidelines: It is expected patient will leave ASC within 15-30 minutes of physician signing discharge order

Covered Surgical Procedures
Before January 1, 2008 (§416.65)

- Covered surgical procedures are limited to those that do not generally exceed—
  - A total of 90 minutes operating time; and
  - A total of 4 hours recovery or convalescent time.
Covered Surgical Procedures
January 1, 2008 – Present (§416.166 (b))

Â Separately paid under the OPPS;
Â Not expected to pose a significant safety risk to a Medicare beneficiary when performed in an ASC; and
Â Standard medical practice dictates beneficiary would not typically be expected to require active medical monitoring and care at midnight following the procedure.

Reasons for Exclusions

- Pays for unless meets one or more of the following:
  - ASC List Exclusion Criteria
    - Is on the inpatient only list
    - Poses a significant safety risk to the beneficiary
    - Typically requires active medical monitoring and care past midnight
    - Directly involves major blood vessels
    - Requires major or prolonged invasion of body cavities
    - Generally results in extensive blood loss
    - Is emergent in nature
    - Is life-threatening in nature
    - Commonly requires systemic thrombolytic therapy
    - Can only be reported using an unlisted surgical procedure code
Nevada Extended Recovery Units
(NAC 449.9937)

Â ASCs may operate extended recovery units
Â Separate from the other operations of the center;
Â Audio and visual privacy for each patient in the unit;
Â Physician supervision;
Â Physician available;
Â At least two nurses trained in advanced cardiac life support on duty if patient in unit; 1:2 ratio in the unit;
Â System for making emergency calls; oxygen; cardiac defibrillator; manual breathing bag; suction equipment

Nevada Extended Recovery Units
Cont’d

Â Physician Discharge
Â 23 hours and 59 minutes
Â ASC policies and procedures for extended recovery unit:
  ï Clinical criteria for determining patient eligibility for admission;
  ï Clinical criteria for determining patient eligibility for discharge;
  ï Procedures for providing emergency services; and
  ï Procedures for transferring a patient in need of other health care services.
Â ASC shall provide food to meet the needs of patients in an extended recovery unit
Colorado Convalescent Care Centers
6 CCR 1011-1 Chap 11

• State Licensed
• Up to 72 hour stay
• Must conform to Chapter IV, General Hospital, requirements
• Must have an integrated affiliation with hospital, by written agreement
• Follow FGI Guidelines

Outpatient Procedures Requiring Longer Stays

• Spine
• Reconstructive Shoulder & Knee
• Total Joint
• Hysterectomy
Spine Procedures

- Single and 2-3 level ACDF
- Lumbar laminectomy / laminotomy / discectomy
- Lumbar decompression and fusion

These procedures typically take 1-2 hours of operating time, involve less than 300cc of blood loss, and are well tolerated

Source: Sohrab Gollogly, M.D.

Non-Instrumented Spine Surgery

- Microdiscectomies/Nerve Decompressions
- (1690 Patients)
- OR Time: 74 Minutes
- PACU Time: 78 Minutes
- Convalescent Time: 19 Hours

Kenneth A. Pettine, M.D., Society for Ambulatory Spine Surgery
CMMI Demonstration Project

**Total Joint Replacement**

- CMMI – innovative delivery model/$$$
- Inpatient total joint – 2-3% savings
- 22 ASCs in 8 states

Total Joint in the ASC Setting

- Patient Selection
- Pre-Operative Preparation
- Pain protocol
- Surgical technique
- Post-Operative Recovery

Examples of Overnight Care in ASCs

- Alaska: Shift differential for nursing staff to work 7 pm to 7 am shift; patient meals from local caterer;
- California: All nurses have current advanced cardiac life support certification; provide meals when necessary;
- Ohio: Semi-private rooms with TV/DVD and private phone line;
- Texas: One meal, wireless internet & satellite TV


Key Components of Successful Programs

- Physician Selection
- Patient Selection
  - Healthy (ASA 1 or ASA 2)
  - Home Support
- Staff Training
Recommendations

- Visit Facilities
- ASCACnect
- Contact healthcare attorney

Questions?

Kara Marshall Newbury
Assistant Director, Health Policy
(703) 636-0705
knewbury@ascassociation.org