

RULE

Department of Health and Human Resources Office of Family Services

The Department of Health and Human Resources, Office of Family Services, has adopted regulations to allow reimbursement under Title XIX for medically necessary services rendered at an ambulatory surgical center. The recommended policy and procedures are as follows:

I. Definition of Ambulatory Surgical Center Services.

The services rendered must be medically necessary preventative, diagnostic, therapeutic, rehabilitative, or palliative items or services furnished to an outpatient by or under the direction of a physician, osteopathic physician or dentist (for emergency and life threatening situations and for early and periodic screening, diagnosis, and treatment eligibles with prior authorization) in a facility which is not part of a hospital but which is organized and operated to provide medical care to patients.

This type facility will not provide services or other accommodations for patients to stay overnight. Therefore, the ambulatory surgical center shall have a system to transfer patients requiring emergency admittance or overnight care to a fully licensed and certified Title XIX hospital following any surgical procedure performed at the facility.

II. Basis of Payment.

Reimbursement for services rendered at an ambulatory surgical center to eligible Title XIX patients will be paid on a per diem basis per patient. This fee covers all operative functions attendant to medically necessary surgery performed at the center by a private physician, osteopathic physician or dentist; including admitting and laboratory tests, patient history and physical, operating room staffing and attendants, recovery room cases, and discharge. It includes all supplies related to the surgical care of the patient while in the center. The per diem payment excludes the physician fee, the radiologist fee, or the anesthesiology fee.

**William H. Stewart, M.D., Secretary
Department of Health and Human Resources**