

Washington, D.C. – U.S. Congressmen Pete Sessions (R-TX) and John Larson (D-CT) today introduced *The Ambulatory Surgical Center Quality and Access Act of 2011* (H.R. 2108). The legislation would promote Medicare cost savings by putting policies in place that would establish an appropriate Medicare reimbursement for ambulatory surgery centers (ASCs) and protect access to high quality health care services for patients.

“Our bill would protect patient access to high-quality, cost-efficient services by establishing reasonable Medicare reimbursement and quality reporting for ASCs,” said Sessions. “This legislation is imperative to ensure that our Medicare beneficiaries may continue to have a choice in where they receive outpatient procedures at a lower cost to them and to the American taxpayer.”

“This is a commonsense, pragmatic fix to ensure that patients continue to have access to high quality surgical and preventive care that is highly cost effective,” said Larson. “ASCs are providing vital services to patients every day and this legislation will help them keep it up by fixing the illogical way they get paid by Medicare. It will also empower patients to choose the best services possible by requiring ASCs to meet new quality reporting standards.”

Ambulatory Surgery Centers (ASCs) are modern health care facilities focused on providing same-day surgical care, including vital diagnostic and preventive health care procedures such as colonoscopies. Last year, approximately 5,200 ASCs provided 5 million outpatient surgeries. Currently, ASCs are reimbursed by Medicare at only 56% of the amount paid to hospital outpatient departments (HOPDs) for identical services. This disparity continues to grow from year to year because ASCs reimbursement rate is not tied to the same market basket as HOPDs.

Larson and Sessions’ legislation would establish parity and balance by providing ASCs with the same market basket update that HOPDs receive. The legislation would incorporate and expand upon a Medicare Payment Advisory Commission recommendation that ASCs be required to provide quality data — ensuring that consumers have comparable information on price and quality to inform their decisions about where to receive outpatient surgery. Additionally, under the proposed legislation, Medicare would continue to save money while rewarding ASCs for providing high quality care by requiring the Centers for Medicare & Medicaid Services (CMS) to implement a value-based purchasing program.

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