



1966 AMA promotes virtues of outpatient surgery

1971

AMA endorses outpatient surgery under general and local anesthesia for select patients and procedures

1973

American Society of Anesthesiologists issues ASC guidelines

1975

The Joint Commission's Ambulatory Care Accreditation Program established



1979

Accreditation Association for Ambulatory Health Care (AAAHC) established



1970

First freestanding ASC opens in Phoenix, AZ



1972

Adoption of federal Anti-Kickback Statute

1974

Federated Ambulatory Surgery Association (FASA) formed

1978

American Academy of Ambulatory Care Nursing founded



American Association of Ambulatory Surgery Centers (AAASC) formed

1981

93% of outpatient surgeries performed in hospital-owned facilities

1982

Medicare approves payment to ASCs for

200 procedures



1987

Medicare approves payment to ASCs for

1,535 procedures



1995

Medicare approves payment to ASCs for more than

2,000 procedures



1991

Small entity investment safe harbor issued, upon which ASCs primarily relied until ASC safe harbors issued

1999

Safe harbors for ASCs issued



2001

OIG issues Advisory Opinion 01-17. Addresses hospital ownership of ASCs and level of hospital's ability to influence referrals to ASCs, and indirect physician ownership in ASCs

OIG issues Advisory Opinion 01-21. Addresses when distributions based on equity ownership (as opposed to capital investment) are permissible

2002

OIG issues Advisory Opinion 03-5. Addresses group practice ownership of ASCs

2005

45% of outpatient surgeries performed in hospital-owned facilities

2008

OIG issues Advisory Opinion 08-08. Addresses an ASC joint venture between a physician group practice and hospital

ASCA

Ambulatory Surgery Center Association (ASCA) formed through merger of FASA and AAASC

2011

More than 5,000 accredited and operational ASCs

2011

Medicare approves payment to ASCs for more than

3,500 procedures



2012

OIG issues Advisory Opinion 12-06. Addresses proposed structure for anesthesia services provided to ASCs

2015

MedPAC recommends CMS create a value-based purchasing program for ASCs by end of 2016

2016

MedPAC reiterates previous recommendation that ASCs be directed to provide cost data to CMS



BCBSA publishes study showing substantial savings achieved by shifting elective procedures* from inpatient to outpatient setting

ASCs become a critical component in lowering healthcare costs by their inclusion in bundled payments, IPU and ACOs

* On average, patients saved \$320 for lumbar/spine surgeries, \$483 for hysterectomies, \$924 for gallbladder removals and \$1,062 for angioplasties in 2014 when these procedures were performed in the outpatient setting.