

CASCA Legal/Policy Agenda 2007-2008

There are a number of policy and legal issues that CASCA will be addressing in the next year. These issues impact the industry. It is in the best interest of the industry that we continue to provide a targeted and balanced approach by advocating for issues that directly affect our industry. Membership involvement is critically important.

- **Exclusive Use Policy**

CASCA will be working with the CDPHE this year to provide a clear explanation with regards to leasing space at an ambulatory surgery center (ASC). This includes policies that will inform the CDPHE that ASCs are in compliance with CMS requirements and patient safety.

- **Facility Fee Reimbursement**

To assure that the State of Colorado adequately reimburses ASCs.

- **Convalescent Care**

After-surgery convalescent care should continue to be allowed at ASCs. Our patients deserve the right to choose where they recover. There is a defacto freeze, which is unacceptable and we seek to oppose any dilution of the current convalescent care regulations.

- **Health Care Reform**

We are committed to making the health care industry more transparent and to provide better choices to patients. CASCA is monitoring the Blue Ribbon Commission and plans formal meetings and presentations with the members. The CASCA Research Initiative results will be shared through a major multi-dimensional communications effort.

- **Infection Control/Patient Safety**

Medical facility-acquired infections are of concern to our members. We hope to show to the public and the rest of the medical field that ASCs show a lower incidence rate of infection because of quality management, oversight and the quality of patient care.

- **Emergency Preparedness**

Due to the nature of the times we live in, it is of the utmost importance for ASCs to have an emergency preparedness plan in place to deal with natural disasters, terrorism and emergencies. We are developing an emergency preparedness checklist and related information to help aid our members in this crucial part of the operations planning process. Further, CASCA seeks a formal seat at the emergency-planning table in Colorado. Finally, areas of exposure to ASCs have been identified and possible legislative/regulatory remedies will be developed.

- **Quality Management/Peer Review in the ASC Setting**

We are working on introducing legislation that would take the confidentiality which hospitals and other medical facilities' peer-review committees enjoy currently and make that applicable to ASCs. With a *confidential* peer-review committee in place to review patient complaints and other issues, action can be taken without the fear of litigation. We already have a self-disciplinary process in place; this legislation would make the process confidential and improve quality patient care.

- **Deemed Status**

We are working to introduce legislation that would exempt ASCs in Colorado from state licensing, *if* they are accredited. This would be better for public health and safety, since the accreditation standards are demanding. This would be consistent with what is happening in a number of states.

- **Insurance Lockout**

Continue to seek remedies to create more consumer choice, level the playing field for providers to compete and new enforcement powers for the Division of Insurance. CASCA would seek to develop a coalition of providers to address the non-responsive nature of the insurance industry.