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Anne Sharamitaro, Esq. - Vice President of Research . Cora Drew, JD - Editor

CMS Proposes 0% Change in 2011 ASC Payment Rates

Ambulatory Surgery Centers (ASCs) can expect to see a zero percent increase in Medicare reimbursements in 2011, according to the proposed rule released by the Centers for Medicare and Medicaid Services (CMS) on July 2, 2010, related to the ASC and hospital outpatient prospective payment system. In contrast, the proposed market basket update for hospital outpatient departments (HOPDs) for the provision of the same services performed is set at 2.15%, in 2011.²

Earlier in January of this year, the Medicare Payment Advisory Commission (MedPAC) recommended to Congress that ASC reimbursement rates be increased by 0.6 percent.³ However, CMS failed to follow MedPAC's recommendation and instead calculated the proposed ASC reimbursement rate based on several provisions of the Patient Protection and Affordable Care Act (PPACA), which are scheduled to be implemented on January 1, 2011 together with the reimbursement methodology required under the final transition year of the ASC reimbursement system. Under the current ASC reimbursement methodology, the ASC payment rate for 2011 should increase by 1.6 percent based on the Consumer Price Index for Urban Consumers (CPI-UC).⁴ However, the PPACA stipulates that a negative 1.6 percent offset be applied to ASC payment rates due to certain productivity adjustments, thereby resulting in a zero percent increase for ASC payment rates in 2011.⁵

The ASC Advocacy Committee (ASCAC), which includes the national ASC association and many state ASC associations as well as representatives of all types of ASC operators and physicians, has already indicated that they will "vigorously protest" this proposed zero percent increase as it is not in accord with MedPAC's recommended increase of 0.6 percent put before Congress back in January. 6 MedPAC made a significant effort this year to show that the CPI-UC is an inaccurate method for determining payment increases, and that increases should instead be based on the hospital "market basket" adjustment." The hospital "market basket" has been described by CMS as "a fixed-weight index because it answers the question of how much more or less it would cost, at a later time, to purchase the same mix of goods and services that was purchased in a base period."8 The ASCAC stated that if CMS had used this market basket model instead of the CPI-UC, then the proposed update percentage, even after the

productivity adjustments under the PPACA were taken into account, would be a positive instead of remaining a net zero. According to the ASCAC committee, ASCs provide significant savings to the Medicare program, i.e., "Every procedure performed in an ASC saves the Medicare program more than 40 percent and saves Medicare beneficiaries more than 50 percent on copayments" as compared to hospital outpatient departments, whose updates are calculated according to the market basket. 10

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Robert James Cimasi, MHA, ASA, FRICS, MCBA, AVA, CM&AA, serves as President of HEALTH CAPITAL CONSULTANTS (HCC), a nationally recognized healthcare financial and economic consulting firm headquartered in St. Louis, MO, serving clients in 49 states since 1993. Mr. Cimasi has over thirty years of experience in serving clients, with a professional focus on the financial and economic aspects of healthcare service sector entities including: valuation consulting and capital formation services; healthcare industry transactions including joint ventures, mergers, acquisitions, and divestitures; litigation support & expert testimony; and, certificate-of-need and other regulatory and policy planning consulting.

Mr. Cimasi holds a Masters in Health Administration from the University of Maryland, as well as several professional designations: Accredited Senior Appraiser (ASA – American Society of Appraisers); Fellow Royal Intuition of Chartered Surveyors (FRICS – Royal Institute of Chartered Surveyors); Master Certified Business Appraiser (MCBA – Institute of Business Appraisers); Accredited Valuation Analyst (AVA – National Association of Certified Valuators and Analysts); and, Certified Merger & Acquisition Advisor (CM&AA – Alliance of Merger & Acquisition Advisors). He has served as an expert witness on cases in numerous courts, and has provided testimony before federal and state legislative committees. He is a nationally known speaker on healthcare industry topics, the author of several books, the latest of which include: "The U.S. Healthcare Certificate of Need Sourcebook" [2005 - Beard Books], "An Exciting Insight into the Healthcare Industry and Medical Practice Valuation" [2002 – AICPA], and "A Guide to Consulting Services for Emerging Healthcare Organizations" [1999 John Wiley and Sons].

Mr. Cimasi is the author of numerous additional chapters in anthologies; books, and legal treatises; published articles in peer reviewed and industry trade journals; research papers and case studies; and, is often quoted by healthcare industry press. In 2006, Mr. Cimasi was honored with the prestigious "Shannon Pratt Award in Business Valuation" conferred by the Institute of Business Appraisers. Mr. Cimasi serves on the Editorial Board of the Business Appraisals Practice of the Institute of Business Appraisers, of which he is a member of the College of Fellows.



Todd A. Zigrang, MBA, MHA, ASA, FACHE, is the Senior Vice President of HEALTH CAPITAL CONSULTANTS (HCC), where he focuses on the areas valuation and financial analysis for hospitals and other healthcare enterprises. Mr. Zigrang has significant physician integration and financial analysis experience, and has participated in the development of a physician-owned multi-specialty MSO and networks involving a wide range of specialties; physician-owned hospitals, as well as several limited liability companies for the purpose of acquiring acute care and specialty hospitals, ASCs and other ancillary facilities; participated in the evaluation and negotiation of managed care contracts, performed and assisted in the valuation of various healthcare

entities and related litigation support engagements; created pro-forma financials; written business plans; conducted a range of industry research; completed due diligence practice analysis; overseen the selection process for vendors, contractors, and architects; and, worked on the arrangement of financing.

Mr. Zigrang holds a Master of Science in Health Administration and a Masters in Business Administration from the University of Missouri at Columbia, and is a Fellow of the American College of Healthcare Executives. He has co-authored "Research and Financial Benchmarking in the Healthcare Industry" (STP Financial Management) and "Healthcare Industry Research and its Application in Financial Consulting" (Aspen Publishers). He has additionally taught before the Institute of Business Appraisers and CPA Leadership Institute, and has presented healthcare industry valuation related research papers before the Healthcare Financial Management Association; the National CPA Health Care Adviser's Association; Association for Corporate Growth; Infocast Executive Education Series; the St. Louis Business Valuation Roundtable; and, Physician Hospitals of America.



Anne P. Sharamitaro, Esq., is the Vice President of HEALTH CAPITAL CONSULTANTS (HCC), where she focuses on the areas of Certificate of Need (CON); regulatory compliance, managed care, and antitrust consulting. Ms. Sharamitaro is a member of the Missouri Bar and holds a J.D. and Health Law Certificate from Saint Louis University School of Law, where she served as an editor for the Journal of Health Law, published by the American Health Lawyers Association. She has presented healthcare industry related research papers before Physician Hospitals of America and the National Association of Certified Valuation Analysts and co-authored chapters in "Healthcare Organizations: Financial Management Strategies," published in 2008.