Understanding Ambulatory Surgical Centers and Office Surgical Suites

The Issues of Code, Licensing, and Reimbursement

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Who is Studio+?

• People
• Passion
• Process
• Performance
Architectural Gray Area

- Trend amongst physicians and physician groups to avoid AHCA
- Alternative accreditation or claiming “office based surgery”
- Architects avoiding ASC/OBS projects due to regulatory gray area and associated risk
## Ambulatory/Office Based Surgery 101

<table>
<thead>
<tr>
<th>Ambulatory Surgery Centers (ASC)</th>
<th>Office Based Surgery Centers (OBSC)</th>
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<tbody>
<tr>
<td>• Elective surgical procedures</td>
<td>• Under jurisdiction of state health department</td>
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<tr>
<td>• No overnight stays</td>
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<tr>
<td>• Licensed by AHCA</td>
<td>• Primarily pain management, plastic surgery, and GI procedures</td>
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<tr>
<td>• Optional Medicare certification</td>
<td>• Optional Accreditation</td>
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Defining Differences

- Licensure and accreditation process
- Permitted surgical procedures
- Programmatic and physical plant requirements
Licensure & Accreditation

- Ambulatory Surgery Centers (ASC)
  - Licensure obtained through AHCA (395.001-395.1065)
  - May choose to be Medicare Certified & Accredited. (59A-5.004(3))

- Office Based Surgery Centers (OBSC)
  - Under Jurisdiction of state health department as dictated by Florida Statutes & Florida Administrative Codes
  - May seek accreditation through nationally recognized accreditation boards (RULE 64B8-9.0091 F.A.C.)
# Licensure & Accreditation (ASC)

<table>
<thead>
<tr>
<th>ACCREDITING BODY</th>
<th>DEEMED FOR STATE LICENSURE</th>
<th>DEEMED OPTION FOR MEDICARE CERTIFICATION</th>
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<tbody>
<tr>
<td>AAAHC (Accreditation Association for Ambulatory Healthcare)</td>
<td>YES</td>
<td>YES</td>
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<tr>
<td>AAAASF (American Association for Accreditation of Ambulatory Surgical Facilities)</td>
<td>NO</td>
<td>YES</td>
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<tr>
<td>AOA/HFAP (AMERICAN OSTEOPATHIC ASSOCIATION / HEALTH CARE FACILITY ACCREDITATION PROGRAM)</td>
<td>YES</td>
<td>YES</td>
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<tr>
<td>JCAHO(Joint Commission on Accreditation of Healthcare Organizations)</td>
<td>YES</td>
<td>YES</td>
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Licensure & Accreditation (OBSC)

- Nationally recognized accrediting agencies according to Rule 64b8-9.0091 (2a) F.A.C:
  - AAAASF
  - AAAHC
  - JCAHO

- Licensure based on “level” of surgery performed according to Rule 64b8-9.009:
  - LEVEL 1
  - LEVEL II / II(A)
  - LEVEL III
Permitted Procedures (OBSC)

Level I Office Surgery (*Rule 64b8-9.009-3*):

- Anesthesia: Local, Topical or none
- Post operative observation is not required
- Assistance of other personnel is not required
- Excision of skin lesions, moles, warts, cysts, lipomas & repair of lacerations, Surgery limited to the skin and subcutaneous tissue
- Liposuction involving less than 4000cc of supernatant fat
- Incision and drainage of superficial abscesses, limited endoscopies such as proctoscopies, skin biopsies, arthrocentesis, thoracentesis, paracentesis, dilation of urethra, cysto-scope procedures, and closed reduction of simple fractures or small joint dislocations (i.e., finger and toe joints)
Permitted Procedures (OBSC)

Level II Office Surgery (Rule 64b8-9.009-4):

- Anesthesia: Peri-operative medication and sedation used intravenously, intramuscularly, or rectally
- Post-operative monitoring is necessary.
- Transfer agreement is required
- Staff Privileges at a licensed hospital to perform the same procedure
- Assistance of other personnel is required.
Permitted Procedures (OBSC)

Level III Office Surgery *(Rule 64b8-9.009-6):*

- Anesthesia: general anesthesia, major conduction anesthesia, pre-operative sedation & Intravenous sedation beyond what is specified for Level II
- Anesthesiologist’s (ASA) risk classification Class I or II
- ASA Class III and higher are not permitted. Must be performed in a licensed hospital or ASC
- Post-operative monitoring is necessary.
- Transfer agreement is required
- Assistance of other personnel is required.
Programmatic and Physical Plant Requirements

Ambulatory Surgery Centers (ASC)

- Florida Building Code: Section 451 (Ambulatory Surgical Centers)
- FGI 2010 – Chapter 3.7 (Out Patient Surgical Facilities)
- NFPA 99, Health Care Facilities
- NFPA 110, Emergency Standby Power Systems

Office Based Surgery Centers (OBSC)

- FGI 2018 – Chapter 3.8 Specific requirements for Office Surgical Facilities
- Local AHJ
Programmatic and Physical Plant Requirements (ASC)

- Operating Rooms
- Pre/Post Operative Holding Areas
- Parking
- HVAC
- Medical Gasses
- Fire Protection
- Emergency Electrical
Programmatic and Physical Plant Requirements (ASC)

- Operating Rooms/ Pre-post Holding:

  - **CLASS A:** Minimum 150 SF
    Minimum 12’-0” Clear Dimension
    Minimum 3’-6” Clearance
    0-1 Patient Station / O.R. (Semi or Un-restricted)

  - **CLASS B:** Minimum 250 SF
    Minimum 15’-0” Clear Dimension
    Minimum 3’6” Clearance
    1 Patient Station / O.R.

  - **CLASS C:** Minimum 400 SF
    Minimum 18’-0” Clear Dimension
    Minimum 4’-0” Clearance
    1 Patient Station / O.R.
Programmatic and Physical Plant Requirements (ASC)

• **Parking:**
  - 4 spaces per O.R.

• **HVAC:**
  - No Variable Volume Systems
  - Limited use of Friable Duct Linings in O.R.’s & Recovery

• **Medical Gasses:**
  - Flammable anesthetics shall not be used in outpatient surgical facilities

• **Fire Protection:**
  - Dedicated supply main serving only the space occupied by the ASC
  - Shared building fire alarm system is permitted

• **Emergency Electrical Service:**
  - Type 1 essential electrical system shall
  - Level 1, Type 10, Class 8 generator per NFPA 110
Programmatic and Physical Plant Requirements (OBSC)

This is a gray area...
Programmatic and Physical Plant Requirements (OBSC)

Chapter 3.8 FGI 2010

- No more than 3 patients rendered incapable of self preservation
- O.R. requirements same as ASC
- Pre/post operative holding in O.R.
- Minimal corridor width requirements
- No HVAC requirements
- No medical gas requirements
- No fire protection requirements
- No emergency power requirements
Section 469 Florida Building Code
Office Surgery Suite

• New Section in Chapter 4 to 5th Edition of FBC
• Part of physician’s office where surgery is performed
• Surgery that is required to be registered…Chapter 64B8-9.009
• Chapter 64B8-9.009 (1)(a) FAC Department of Health
Codes and Standards

- Fire safety Codes as adopted and identified by Chapter 69A-3.012 FAC
- Part of the the FGI Guidelines for the Design and Construction of Health Care Facilities as referenced in Chapter 35 FBC
- Chapter 4, Section 469 Florida Building Code
- Enforcement of all Codes and Standards by the local building and fire inspection authorities…not by AHCA or Department of Health
Occupancy Classification

- Classified as Ambulatory Health Care Occupancy if it meets the definition of AHCO in NFPA 101, Life Safety Code...4 or more simultaneously rendered incapable of self preservation

- All other Office Surgical Suites classified as Business Occupancy in NFPA 101 and FBC
Physical Plant Standards

- Waiting Room or Lobby
- Public toilet(s) with handwashing facilities
- Drinking Fountain or cup dispensing unit
- May be provided as part of office building’s public areas
- Other areas as determined by Functional Program
  - Admitting office
  - Medical record storage
  - DON
  - Conference Room for in-service training
Pre-operative and Post-operative Areas

• As determined by the Functional Program

• Pre-operative Area/Post-operative area…This can be shared with Primary Recovery area if it meets all the same requirements as Primary Recovery
  • One Pre-op/post-op station per OR
  • Three feet clearance on three sides
  • Privacy with cubical curtains
  • Located in “direct” view of the nurse station
  • Dedicated handwashing
• Operating room types depend on services offered and the Functional Program

• Class A: Level I as defined by Rule 64B8-9.009
  • Clear floor area of 150 sf with 12 feet minimum dimension
  • Minimum clearance of 3 feet 6 inches on all sides of operating room table

• Class B: Levels I, II, and IIA defined by Rule 64B8-9.009
  • Clear floor area of 250 sf with a 15 feet minimum dimension
  • Minimum clearance of 3 feet 6 inches on all sides of operating room table

• Class C: Levels I, II, IIA, and III as defined by Rule 64B8-9.009
  • Clear floor area of 400 sf with a 15 feet minimum dimension
  • Minimum clearance of 4 feet on all sides of operating room table

• Class B and C ORs shall be located inside the semi-restricted area of the Suite

• There shall be a emergency communication (Code Blue) to occupied location
Step-down recovery area

- As required by the functional program for patients who require additional time for recovery
- Includes: clinical workspace, space for family, provisions for privacy, access to toilets large enough for assistance, handwashing stations, and nourishment facilities
Surgical Service Areas

- Control Station
- Drug Distribution Statin
- Scrub Station
- Fluid Waste Disposal System
- Anesthesia Equipment and supplies
- Medical Gas Storage
- Staff Clothing Change Area
- Stretcher/wheelchair Storage Area
- Staff Lounge
- Nourishment Room
Sterilizing Facilities

- Must have either on site or off site sterilizing facilities.
- If off site is used adequate space for storage of clean supplies shall be provided.
- On site: Soiled workroom and clean/assembly workroom and clean supply storage.
Details and Finishes

- Similar to ASC in that finishes must be cleanable in semi restricted areas
- Doors to patient toilet rooms shall open outward or have emergency release hardware
- Coved base in ORs. Ceilings to be monolithic in ORs.
Elevators

- Must be sized to be 51 inches by 80 inches inside with a door opening of at least 42 inches.

- These means that office surgical suits may not be able to be located inside of certain multi story buildings.
Mechanical Systems

- There are requirements for a medical gas and vacuum system
- There is a reference to ASHRAE 170 Ventilation for Health Care Facilities for all rooms and areas used for patient care or treatment
- Floor drains not permitted inside of ORs
**Electrical Standards**

- Must meet NFPA 99…edition as adopted by the State Fire Marshall
- Receptacle requirements are similar to ASCs.
- Nurse Call System required for multiple ORs and for recovery beds not in direct view of the nurse station
- Code Blue is required
- Emergency electrical service shall be provided for at least 2 hours in accordance with either NFPA 110 (electrical generator) or NFPA 111, (battery systems)
- Fire alarm system shall be in compliance with NFPA 101 and NFPA 72.
Questions?

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