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CHAPTER 29: AMBULATORY SURGICAL CENTERS

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COVERED SERVICES

An ambulatory surgical center (ASC) is any distinct entity that operates exclusively for the purpose of providing surgical services to beneficiaries not requiring hospitalization and in which the expected duration of services would not exceed 24 hours following an admission. The services must be medically necessary, preventive, diagnostic, therapeutic, rehabilitative or palliative services furnished to an outpatient by or under the direction of a physician or dentist in a facility which is not part of a hospital but is organized and operated to provide medical care to beneficiaries.

ASC services are items and services furnished by an outpatient ambulatory surgical center in connection with a covered surgical procedure. Covered services include, but are not limited to, the following:

- 1. Nursing, technician and related services;
- 2. Use of an ambulatory surgical center;
- 3. Lab and x-ray, drugs, biologicals, surgical dressings, splints, casts, appliances, and equipment directly related to the provision of the surgical procedure;
- 4. Diagnostic or therapeutic services or items directly related to the provision of a surgical procedure;
- 5. Administrative, record keeping, and housekeeping items and services;
- 6. Materials for anesthesia;
- 7. Intra-ocular lenses; and
- 8. Supervision of the services of an anesthetist by the operating surgeon.

Exclusions

Items and services for which payment may be made under other provisions are excluded from ASC services. The following are not included in ASC services:

- 1. Physician services;
- 2. Lab and x-ray not directly related to the surgical procedure;

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- 3. Diagnostic procedures (other than those directly related to performance of the surgical procedure);
- 4. Prosthetic devices (except intraocular lens implant);
- 5. Ambulance services;
- 6. Leg, arm, back, and neck braces;
- 7. Artificial limbs;
- 8. Durable medical equipment for use in the patient's home; and
- 9. Chronic pain management.

NOTE: Funds reimbursed for the purpose of chronic pain management, are subject to recoupment.