

3701-83-15

Definitions - ambulatory surgical facilities.

For the purposes of rules 3701-83-15 to 3701-83-22 of the Administrative Code, the following definitions shall apply:

(A) "Ambulatory surgical facility" or "ASF" means a facility whether or not a part of the same organization as a hospital, which is located in a building distinct from another in which inpatient care is provided, and to which any of the following apply:

- (1) Outpatient surgery is routinely performed in the facility and the facility functions separately from a hospital's inpatient surgical service or emergency department, and from the offices of private physicians, podiatrists, and dentists;
- (2) Anesthesia is administered in the facility by an anesthesiologist or certified registered nurse anesthetist and the facility functions separately from a hospital's inpatient surgical service or emergency department, and from the offices of private physicians, podiatrists, and dentists;
- (3) The facility applies to be certified by the centers for medicare and medicaid services as an ambulatory surgical center for purposes of reimbursement under Part B of the medicare program, Part B of Title XVIII of the "Social Security Act" 49 Stat. 620 (1935), 42 U.S.C.A. 301, as amended;
- (4) The facility applies to be certified by a national accrediting body approved by the centers for medicare and medicaid services for purposes of deemed compliance with the conditions for participating in the medicare program as an ambulatory surgical center;
- (5) The facility bills or receives from any third-party payer, governmental health care program, or other person or government entity any ambulatory surgery facility fee that is billed or paid in addition to any fee for professional services; or
- (6) The facility is held out to any person or government entity as an ambulatory surgical facility or similar facility by means of signage, advertising, or other promotional efforts.

(B) "Ambulatory surgical facility fee" means a fee for certain overhead costs associated with providing surgical services in an outpatient setting, but does not include any additional payment in excess of a professional fee that is provided to encourage physicians, podiatrists, and dentists to perform certain surgical procedures in their office or their group practice's office rather than a health care facility, if the purpose of the additional fee is to compensate for additional cost incurred in performing

office-based surgery. A fee is an ambulatory surgical facility fee only if it directly or indirectly pays for costs associated with any of the following:

- (1) Use of operating rooms, procedure rooms, recovery rooms, preparation areas, and waiting rooms and lounges for patients and relatives;
 - (2) Administrative functions, record keeping, housekeeping, utilities, and rent;
 - (3) Services provided by nurses, orderlies, technical personnel, and others involved in patient care related to providing surgery.
- (C) "Anesthesia" means total or partial loss of sensation, tactile sensibility, or protective reflexes, with or without the loss of consciousness, produced by a pharmacological or non-pharmacological agent or method, or combination thereof.
- (D) "Anesthesia qualified dentist" means a dentist who holds a permit of authorization to utilize general anesthesia issued pursuant to rule 4715-5-05 of the Administrative Code.
- (E) "Anesthesiologist" means a physician who has completed a residency training program in anesthesiology accredited by the accreditation council of graduate medical education or the American osteopathic association.
- (F) "Certified registered nurse anesthetist" or "CRNA" means a registered nurse who is authorized to practice as a certified registered nurse anesthetist under section 4723.43 of the Revised Code and is credentialed and privileged by the HCF to administer anesthetics to patients within his or her scope of practice.