

Section Overview

Since 2001, The Leapfrog Group has measured and publicly reported on the safety and quality inpatient hospital care. In 2019, Leapfrog launched two new initiatives to measure and publicly report on the safety and quality of same day surgery in ambulatory surgery centers and hospital outpatient departments (HOPDs): the Leapfrog ASC Survey and the Outpatient Procedures section of the Leapfrog Hospital Survey.

The information Leapfrog is collecting from both Surveys will be used to assist consumers in their decision-making and to assist purchasers and payors in network design, direct contracting, bundled payment models, and other value-based payment strategies.

Why is Same Day Surgery Important?

Same day surgery, often referred to as outpatient or ambulatory surgery, now accounts for the majority of surgeries in the U.S. These procedures, ranging from cataracts surgery to total joint replacements, are now often performed in hospital outpatient departments or ambulatory surgery centers. With these outpatient settings likely offering an improved patient experience and greater cost-efficiency, the trend of moving surgeries from the inpatient setting to outpatient settings is growing rapidly. In 1982, outpatient surgeries represented just 4.7% of Medicare surgical billings¹. Today, 53% of all surgeries are done in an outpatient setting².

As most of the surgeries done in outpatient settings are elective, this enables patients to “shop” for their care in advance of treatment. However, there is currently little information on the quality and safety of surgery done in outpatient settings. There is also significant cost variation and virtually no other information to inform provider choice.

What is the difference between a hospital outpatient department and an ambulatory surgery center?

An **Ambulatory Surgery Center (ASC)** is a distinct entity that exclusively provides same-day surgical services to patients not requiring hospitalization. Important characteristics of ASCs include the following:

- If certified by Medicare, the facility is certified as an ASC (not all ASCs are certified by Medicare) and has been assigned a 10-digit CMS Certification Number (nn-Cnnnnnnn)
- Provides surgical services that do not exceed 24 hours
- May or may not be affiliated with a hospital
- Often are specialty-specific

ASCs should complete and submit the [Leapfrog ASC Survey](#).

A **Hospital Outpatient Department (HOPD)** is a location that provides outpatient hospital services and operates under the licensure/approval of a hospital. Important characteristics of HOPDs include the following:

- If certified by Medicare, the facility is certified as a hospital (not all hospitals are certified by Medicare) and has been assigned a 6-digit CMS Certification Number (nn-nnnn)
- Provides outpatient hospital services, meaning preventive, diagnostic, therapeutic, rehabilitative, or palliative services that are furnished to outpatients
- May be co-located with a hospital (e.g., a unit within the building or building connected to the main hospital) or separately located (e.g., a separate on/off campus surgical center)

HOPDs should complete and submit the [Leapfrog Hospital Survey](#).

Outpatient Surgery Scoring

Through its two Surveys, Leapfrog is asking facilities about outpatient surgery in both ASCs and HOPDs. The list of procedures for which Leapfrog is currently collecting data are reflected in the table below. The procedures included in the list reflect the most common procedures done in outpatient settings as paid for by commercial insurers.

The data collected through both of these Surveys includes:

- basic information about the ASC/HOPD;
- volume and safety of procedures;
- patient safety practices; and,
- the experience of patients who had a same day surgery.

Details on how facilities are scored on each of these sections of the Survey can be found at [Hospital Scoring and Results Webpage](#) (hospital) and the [ASC Scoring and Results Webpage](#) (ASC).

Why Purchasers Need to Get Involved

As the movement of surgeries and procedures from the inpatient setting to outpatient settings holds the possibility of reduced costs for patients and purchasers, and greater convenience for patients, it becomes even more important for there to be publicly available data about the quality and safety of care in these settings.

Through its conversations with healthcare providers and payers, purchasers can play a key role in requesting that facilities, both hospitals and ASCs, report their quality and safety data on outpatient surgeries through

Leapfrog's Survey. It is with greater transparency that purchasers and consumers will be able to better understand how different facilities compare in the quality and safety of outpatient surgery.

References

1. Fisher CR. Impact of the prospective payment system on physician charges under Medicare. *Health Care Financ Rev.* 1987;8(4):101–103. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4192857/>
2. Steiner CA, Karaca Z, Moore BJ, Imshaug MC, Pickens G. Surgeries in Hospital-Based Ambulatory Surgery and Hospital Inpatient Settings, 2014. *HCUP Statistical Brief #223.* May 2017. Agency for Healthcare Research and Quality, Rockville, MD. www.hcup-us.ahrq.gov/reports/statbriefs/sb223-Ambulatory-Inpatient-Surgeries-2014.pdf.

Appendix A: Leapfrog ASC Procedures List

Discipline	Procedures
Gastroenterology	Upper GI endoscopy; Other upper GI procedures; Small intestine and stomach endoscopy; Lower GI endoscopy
General Surgery	Cholecystectomy and common duct exploration*; Hemorrhoid procedures*; Inguinal and femoral hernia repair; Other hernia repair; Laparoscopy*; Lumpectomy or quadrantectomy of breast*; Mastectomy*
Ophthalmology	Anterior segment eye procedures; Posterior segment eye procedures*, Ocular adnexa and other eye procedures
Orthopedic	Finger, hand, wrist, forearm, and elbow procedures; Shoulder procedures; Spine procedures; Hip procedures; Knee procedures; Toe, foot, ankle, and leg procedures; General orthopedic procedures
Otolaryngology	Ear procedures; Mouth procedures; Nasal/ sinus procedures; Pharynx/ adenoid/ tonsil procedures**
Urology	Circumcision*; Cystourethroscopy; Male genital procedures; Urethra procedures; Vaginal repair procedures
Dermatology	Complex skin repairs*
Neurological Surgery	Spinal fusion procedures*
Obstetrics and Gynecology	Cervix procedures*; Hysteroscopy*; Uterus and adnexa laparoscopies*
Plastic and Reconstructive Surgery	Breast repair or reconstruction*; Skin graft/reconstruction procedures*

*For this surgery/procedure, facilities are asked to report on adult (18 years and older) patients only.

**For this surgery/procedure, facilities are asked to report on pediatric (17 years or younger) patients only.