

INCORPORATED

an ASC



CATHLEEN M. McCABE, MD

- Cataract and refractive specialist, The Eye Associates in Bradenton and Sarasota, Florida
- Member, *CRST* Editorial Advisory Board
- cmccabe13@hotmail.com; Twitter @cathyeye
- Financial disclosure: Consultant (Alcon, Bausch + Lomb, Glaukos, Ivantis, Omeros, Shire, Sun Ophthalmics)



AMANDA BRADY

- Administrative Assistant, The Eye Associates in Bradenton and Sarasota, Florida
- Financial disclosure: None

ATTENDING

Understand
the benefits
for your
practice.

Knowing the financial reward, patient satisfaction, and flexibility that an ambulatory surgery center (ASC) affords, it would be difficult for us personally to ever consider a hospital or a nonaffiliated ASC as a preferred venue. In our experience, the myriad benefits offered by a practice-affiliated ASC far outweigh the obstacles that developing an ASC may present.

CONTROL

Physicians who operate in an ASC that is incorporated into their practice are accustomed to an unprecedented level of control over many different aspects of the surgical process. For me (author CM), the most important thing is the ability to hire and maintain my own surgical staff. I can oversee their training and continue their education.

Organizational culture is crucial in order to create a positive patient experience. On any given day, I (author CM) can feel confident that the staff I am working with cares just as much about my patients as I do, and I can enjoy the peace of mind that comes from knowing every staff member has undergone our practice's rigorous training program. I never need to worry that an ASC staff member has not been properly trained in the ophthalmic procedures that our practice offers.

TECHNOLOGY AND EQUIPMENT

The partners in our practice choose the technology we have available for patients. As a result, we can provide the highest quality of care when making decisions for patients—something not always possible when dealing with another facility's policies, equipment, and technology.

Similarly, we can also ensure that surgeons who practice at our facility have their preferred instruments on hand at all times. Because of our staffing policies, even specialized equipment is kept in good condition, and our staff is proficient in the use of all of the equipment and technology offered by our ASC. They can troubleshoot problems and contact vendors when necessary.

Our practice has an excellent biometry team, and a member of this team is always available when there is a surgeon in the ASC. If a last-minute calculation is needed, the staff ensures that surgery is not delayed. Our ASC keeps a variety of IOLs on hand to accommodate unique cases or a late change that is in the best interest of the patient. Our practice can also approve the overnight charges associated with shipping IOLs if the need arises. If a patient in the preoperative holding area changes his or her IOL choice, the ASC staff can quickly make the necessary adjustments and follow the new plan put in place. In an outside ASC or hospital setting, these hurdles could easily result in postponed surgery.

Our dedicated biometry staff allows surgeons to use any lens or implant that they feel would most benefit the patient. Our experience has been similar to that reported by Jonathan D. Solomon, MD. As he has said, "I like the practice of optimizing surgical solutions for each patient. I want my

sole motivation to be the best in class for each case. I have been in the situation with other surgical centers where it was politely, yet firmly, suggested that I consider an alternative lens that would help with the bottom line.”¹

ECONOMICS

Having a dedicated ASC allows a much higher volume of patients to be seen on any given day because the specialized nature of the department helps to minimize turnaround time. An ASC that caters strictly to ophthalmology also exercises much greater cost control compared with a hospital or multispecialty facility. Another benefit is that staff members can equip our ASC for multiple ophthalmic subspecialties, such as retina and oculoplastics. The staff in charge of stocking our ASC can order from preferred vendors and choose the most

effective and cost-efficient product in every instance.

Because Nd:YAG laser procedures may be performed through the ASC, we can recoup the facility fee. Moreover, our patients enjoy familiarity with our processes and staff when receiving different subspecialty care in the same facility.

If a practice’s current volume is not high enough to support a dedicated ophthalmic ASC, the space can still be used for maximum profit. Unused time can be contracted for use by outside physicians, and a block scheduling strategy can allow for more efficient use of available time.

SCHEDULING

All of our surgeons appreciate the flexible scheduling offered by our integrated ASC. The surgery schedule is tailored to the individual needs of each

ophthalmologist. If a surgeon needs to work through lunch or if some OR time needs to be shared, the schedule can accommodate that. Surgeons can also easily switch days depending on their busy schedules.

PHILANTHROPY

Charitable giving is a passion of mine (author CM). As a practice, we decided to donate cataract surgery to some of our patients in need. If we did not have an incorporated ASC, we might not have had this opportunity to give back to our community. The ability of the practice to absorb the surgery cost allows us the latitude to provide charitable care when needed. This could be difficult or impossible in an outside ASC or hospital where cost issues may be more tightly controlled. ■

1. Solomon J. ASC: One surgeon’s perspective on ownership. *MillennialEYE*. <https://millenniaeye.com/articles/2015-nov-dec/asc-one-surgeons-perspective-on-ownership>. Updated December, 2015. Accessed August 1, 2018.