Facts about Ambulatory Care Accreditation

The Joint Commission’s Ambulatory Care Accreditation Program was established in 1975, and today more than 1,900 freestanding ambulatory care organizations are Joint Commission-accredited. These organizations generally fall into the broad categories of surgical, medical/dental and diagnostic/therapeutic services, and represent a variety of settings, including:

- Ambulatory surgery centers
- Audiology
- Cancer therapy
- Catheterization labs
- Chiropractic practices
- College/University health
- Community health centers
- Convenient care centers
- Correctional health facilities
- Dental practices
- Dermatology practices
- Dialysis centers
- Ear, nose and throat practices
- Endoscopy centers
- Family practices
- Gastroenterology services
- Group medical practices
- In vitro fertilization clinics
- Indian Health Services
- Imaging centers
- Infusion therapy services
- Laser surgery centers
- Lithotripsy services
- Military clinics
- Mobile imaging
- Occupational health
- Ophthalmology practices
- Optometry
- Oral and maxillofacial surgery
- Orthotics/prosthetics
- Orthopedic services
- Plastic/cosmetic surgery
- Podiatric services
- Pain management centers
- Radiation oncology
- Rehabilitative and physical therapy
- Recovery care/short stay
- Sleep centers
- Teleradiology
- Telemedicine diagnostics
- Urgent care centers
- Urology services
- VA clinics
- Women’s health centers

Benefits of accreditation

- Demonstrates a commitment to the highest level of patient safety and patient care.
- Eases access to managed care contracts and encourages patient referrals.
- Nationally acknowledged benchmark of quality.
- Increases competitive edge.
- Provides constructive educational opportunity.
- Experienced surveyors offer valuable insights and compliance tips.
- Dedicated account executives offer organization-specific services.
- Enhances ability to attract and recruit quality staff.

Standards

The Joint Commission’s standards address the ambulatory care organization’s performance in specific areas, and specify requirements to ensure that patient care is provided in a safe manner. The Joint Commission develops its standards in consultation with health care experts, providers and researchers, as well as purchasers and consumers. The standards-based performance areas for ambulatory care organizations are:

- Environment of Care
- Emergency Management
- Human Resources
- Infection Prevention and Control
- Information Management
- Leadership
- Life Safety
- Medication Management
- National Patient Safety Goals
- Performance Improvement
- Provision of Care, Treatment and Services
- Record of Care, Treatment and Services
- Rights and Responsibilities of the Individual
- Transplant Safety
- Waived Testing
Accreditation process
The Joint Commission’s accreditation process concentrates on operational systems critical to the safety and quality of patient care. To earn and maintain accreditation, an ambulatory care organization must undergo an on-site survey by a Joint Commission survey team every three years. The objective of the survey is not only to evaluate the organization, but to provide education and guidance that will help staff continue to improve the organization’s performance. Surveys are conducted by professionals with at least five years of leadership experience in an ambulatory care organization, and a strong educational background. Ambulatory care surveyors have advanced medical or clinical degrees and receive continuing education to keep them up-to-date on advances in quality-related performance evaluation. The survey process focuses on evaluating actual care processes by tracing patients through the care, treatment and services they received. In addition to these patient “tracers,” surveyors conduct systems tracers to analyze key operational systems that directly impact the quality and safety of patient care. Surveyors use pre-survey information, from the Priority Focus Process, to conduct a more organization-specific and consistent survey.

At the conclusion of the survey, the organization will receive a summary of survey findings that includes preliminary findings that were identified during the survey. Next, the summary of survey findings undergoes a comprehensive review by The Joint Commission’s Central Office staff. Following the review, the final summary of survey findings will be posted to the organization’s Joint Commission Connect™ extranet site. The summary will indicate which findings require an Evidence of Standards Compliance (ESC) submission within 45 or 60 days. Once an organization’s ESC is accepted by The Joint Commission, their accreditation decision is posted to their extranet site and to Quality Check. For more information, go to www.jointcommission.org/accreditation/ambulatory_healthcare.aspx

Deemed status for ambulatory surgical centers
The Centers for Medicare & Medicaid Services (CMS) officially recognizes The Joint Commission’s Ambulatory Care accreditation requirements for surgical centers, and Joint Commission-accredited ambulatory surgical centers have "deemed status" and are eligible to participate in the Medicare program. Joint Commission-accredited ambulatory surgical centers have enjoyed this deemed status since 1996.

- Accreditation remains voluntary, with the deemed status review an option, not a requirement.
- CMS retains the authority to conduct random validation surveys and complaint investigations.
- Ambulatory surgical centers also may be required to meet state licensure requirements.
- CMS requires that all accreditation surveys used for deemed status purposes be unannounced.

New! Designated accreditor of advanced diagnostic imaging centers
CMS has named The Joint Commission a designated accreditor of advanced diagnostic imaging centers. Medicare suppliers furnishing the technical component of advanced diagnostic imaging services must become accredited by a CMS-designated accrediting organization, such as The Joint Commission, by January 1, 2012, to qualify for Medicare reimbursement payments. This rule affects providers of MRI, CT, PET and nuclear medicine imaging services for Medicare beneficiaries on an outpatient basis.

Cost of accreditation
The Joint Commission uses a subscription billing process. For most organizations, the annual fee is approximately 20 percent of the total survey fee. In addition, in the year of survey, organizations pay the remaining 40 percent after the survey has been conducted. An organization’s survey fees are based on the type of services provided, volume and the sites to be included in the organization’s accreditation. In addition, there are modest fee increases for ambulatory care organizations choosing to use either of the optional services for ASC deemed status or accreditation for advanced diagnostic services.

Customers receive the annual fee invoice in January of each year. The on-site survey fee is billed within five days of the survey’s completion. The fee billed covers the direct costs of the survey. The Joint Commission Connect extranet includes a fee calculator to help estimate annual subscription billing costs for current customers. New customers and customers who desire more information, including a weighted volume worksheet for annual fees, can contact The Joint Commission’s Pricing Unit at pricingunit@jointcommission.org or (630) 792-5115.
2011 Base Fees (total paid over the three-year accreditation cycle)

**Surgery/Anesthesia Services**
- Small (up to 5,000 patient visits per year) $9,735
- Large (5,001-10,000 visits per year) $14,655

**Medical/Dental Services**
- Small (up to 20,000 patient visits per year) $9,140
- Medium (20,001 to 60,000 visits per year) $15,100
- Large (60,000-120,000 visits per year) $19,660
- Largest (more than 120,000 visits per year) $27,080

**Diagnostic/Therapeutic Services**
- Small (up to 5,000 patient visits per year) $8,600
- Medium (5,001 to 50,000 visits per year) $9,650
- Large (more than 50,000 visits per year) $12,760

**Ambulatory care information available to the public**
Information about the safety and quality of accredited ambulatory organizations is available to the public at Quality Check™, www.qualitycheck.org. This comprehensive listing includes each accredited ambulatory care organization’s name, address, telephone number, accreditation decision, current accreditation status and effective date, and its most recent Quality Report.

For questions about standards, contact the Standards Interpretation Group at (630) 792-5900 or complete the online form at www.jointcommission.org/Standards/OnlineQuestionForm.

For more information about the Ambulatory Care Accreditation Program, call (630) 792-5286 or visit The Joint Commission Web site at www.jointcommission.org.