Great Achievements
Come One Step at a Time

Deemed Status for ASCs Seeking Medicare Certification

The Joint Commission is designated by the Centers for Medicare & Medicaid Services (CMS) as an approved accreditor for ASCs seeking Medicare initial certification, and can provide accreditation and Medicare certification simultaneously through its survey process.

Note: CMS, not The Joint Commission, grants the final decision for Medicare certification.

1. Review Licensing Requirements
   Check with your state agency regarding licensing requirements for ambulatory surgery centers. If applicable, forward a copy of the license to your account executive upon request.

2. Complete 855B Medicare Enrollment Application
   It is crucial that the 855B Medicare Enrollment Form is completed, submitted, and be accepted by your Medicare contractor prior to scheduling a deemed status survey.
   - Complete and submit 855B form to your Medicare contractor.
   - When accepted, you will receive an 855B Approval Letter. Submit this letter to your account executive upon request.

3. Apply for Accreditation
   Request an application by calling (630) 792-5286. Once your request is processed, you will be given access to the personalized, secure extranet site, Joint Commission Connect®. When given access, complete the electronic application making sure to:
   - Click “yes” button for ‘ambulatory deemed status’.
   - Answer ASC-specific Medicare questions.
   - Provide specific date by which ASC will be ready to undergo an unannounced deemed status survey.
   - Pay $1,700 deposit online.
   - Notify your state agency of your intent to seek deemed status with The Joint Commission. Submit a copy of this notification to your account executive upon request.

For more information on Joint Commission Ambulatory Care Accreditation, please call (630) 792-5286.
Assess Your Readiness

When you apply for deemed status, you must meet both Joint Commission standards and CMS requirements. Upon submitting an application and initial deposit, you will receive complimentary access to E-dition, the electronic standards manual.

Know Joint Commission Requirements
– Review the ambulatory care standards, and compare your ASC’s organizational policies and procedures against standards in E-dition.
– Ensure minimum 10 patients served, with 2 active patients at the time of survey, preferably during Day 1.
– Have ready for day of survey your electronic Statement of Conditions (ESOC), which addresses your facility’s physical plan and Environment of Care®. Access this form on Joint Commission Connect®.

Know Additional CMS Requirements
Review the Medicare “Conditions for Coverage” (CFCs), in E-dition. During the on-site survey, CMS expects you to provide the surveyor with:
– List of surgical cases from 6 months prior to survey.
– List of cases from previous 12 months that required a patient to be transferred to a hospital or a case during which the patient died.
– Documents related to your infection control program. (e.g., description, policy, procedures, surveillance data)
– Infection Control Worksheet (to be completed by surveyor on-site).

Note: Surveyors will observe at least two surgical procedures, one in its entirety, during the survey. Also, your survey will be unannounced—survey dates will not be provided to your facility (mandated by CMS).

TIP! Review the Survey Activity Guide for detailed agendas of the on-site survey and requirements specific to ASCs seeking Deemed Status.

Prepare for Simultaneous Accreditation and Medicare Certification Survey
Access your organization’s extranet site for valuable preparation resources such as your account executive, your main point-of-contact for the duration of the accreditation process, and the Survey Activity Guide which provides detailed agendas for the on-site survey.

Need additional help? Visit www.jcrinc.com for additional educational resources to help you prepare for accreditation.