

Clinical Criteria for Hospital Outpatient Department Site of Care

The use of a hospital-based facility (i.e., on-campus or off-campus outpatient hospital) as an appropriate site of care instead of an ambulatory surgery center (ASC) for certain non-emergent, elective, outpatient surgical procedures is considered appropriate for members with any of the following:

1. Age Considerations, including any of the following:
 - a. Pediatric patients under 18 years of age
 - b. Adults 75 years of age or older
2. Anesthesia Risk, including any of the following:
 - a. American Society of Anesthesiologists Physical Status (ASA PS) score III or higher
 - b. Personal or family history of anesthesia complications (e.g., malignant hyperthermia)
 - c. Known or suspected difficult airway
 - d. Prolonged surgery expected to exceed 3 hours
3. Cardiovascular Risk, including any of the following:
 - a. Uncompensated chronic heart failure (NYHA Class III or higher)
 - b. History of myocardial infarction within 6 months
 - c. History of cerebrovascular accident (CVA) or transient ischemic attack (TIA) within 3 months
 - d. Poorly controlled or resistant hypertension
 - e. Symptomatic cardiac arrhythmia despite medication
 - f. Significant valvular heart disease
 - g. Coronary artery disease with ongoing ischemia or recent stent (i.e., within 1 year of a drug-eluting stent placement or within 90 days of an angioplasty)
 - h. Implantable cardioverter-defibrillator (ICD) or mechanical cardiovascular support
4. Pulmonary Risk, including any of the following:
 - a. Moderate to severe COPD (i.e., FEV1 < 50%)
 - b. Poorly controlled asthma (FEV1 < 80% despite treatment)
 - c. Moderate to severe obstructive sleep apnea (OSA)
 - d. Ventilator-dependent patient
5. Metabolic/Hepatic/Renal Conditions, including any of the following:
 - a. Poorly controlled diabetes (i.e., HbA1C ≥ 8.5% or recurrent DKA/hypoglycemia)
 - b. Advanced liver disease (MELD Score > 8)
 - c. End-stage renal disease on dialysis
 - d. Morbid obesity (BMI ≥ 40)
6. Hematologic Conditions, including any of the following:
 - a. Bleeding disorders requiring replacement factor, blood products, or special infusion products
 - b. Anticipated need for blood transfusion
7. Neurologic Conditions, including any of the following:
 - a. Poorly controlled epilepsy

- b. Significant cognitive impairment or developmental disability
 - c. Neuromuscular disorders (e.g., muscular dystrophy, cerebral palsy, ALS)
- 8. Other Conditions, including any of the following:
 - a. Pregnancy
 - b. Alcohol dependence with risk for withdrawal syndrome
 - c. History of organ transplantation requiring immunosuppression
 - d. Recent drug abuse (e.g., cocaine) < 3 months
 - e. Preoperative planning indicates that overnight recovery and post-surgical care are necessary
- 9. There is no geographically accessible ASC with the necessary equipment for the procedure*
- 10. There is no geographically accessible ASC where the member's physician has surgical privileges*
- 11. There is no geographically accessible ASC whose clinical guidelines permit the procedure to be performed for the member's health conditions*
- 12. There is no geographically accessible ASC whose scheduling availability permit the procedure to be performed within the planned time period*
- 13. The planned surgical procedure is not included on Medicare's ASC list of covered procedures

*Blue Cross NC follows CMS "maximum time and distance" definitions for geographic accessibility.

References:

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2. American Society of Anesthesiologists. *Statement on Ambulatory Anesthesia and Surgery*. October 18, 2023. Accessed June 9, 2026, at asahq.org.
3. Centers for Medicare & Medicaid Services. *Medicare ASC Procedures List*. Accessed June 9, 2026, at cms.gov.
4. Fleisher LA, Fleischmann KE, Auerbach AD, et al. 2024 ACC/AHA Guideline for Perioperative Cardiovascular Management for Noncardiac Surgery. *J Am Coll Cardiol*. 2024;80(18):e187-e280. Accessed June 9, 2026, at jacc.org.
5. Heidenreich PA, Bozkurt B, Aguilar D, et al. 2022 AHA/ACC/HFSA Guideline for the Management of Heart Failure. *Circulation*. 2022;145(18):e895-e1032. Accessed June 9, 2026, at heart.org.
6. Joshi GP, Ahmad S, Riad W, et al. Selection of obese patients undergoing ambulatory surgery: a systematic review of the literature. *Anesth Analg*. 2013;117(5):1082-1091.
7. Joshi GP, Ankichetty SP, Gan TJ, Chung F. Society for Ambulatory Anesthesia consensus statement on preoperative selection of adult patients with obstructive sleep apnea scheduled for ambulatory surgery. *Anesth Analg*. 2012;115(5):1060-1068.
8. Mathis MR, Naughton NN, Shanks AM, et al. Patient selection for day case-eligible surgery: identifying those at high risk for major complications. *Anesthesiology*. 2013;119(6):1310-1321.
9. Centers for Medicare & Medicaid Services. *Medicare Claims Processing Manual, Chapter 14 – Ambulatory Surgical Center*. Accessed June 9, 2026, at cms.gov.
10. Society of Anesthesia and Sleep Medicine. Guideline on Preoperative Screening and Assessment of Adult Patients With Obstructive Sleep Apnea. *Anesthesia & Analgesia*. 2016;123(2):452-473. Accessed June 9, 2026, at harvard.edu.