

---

**Office for Oregon Health  
Policy and Research**



***2004 Oregon Ambulatory Surgery***

***In Free-Standing and Hospital-based  
Ambulatory Surgical Centers (ASCs)***

***April 2006***

---



---

# ***2004 Oregon Ambulatory Surgery***

## ***In Free-Standing and Hospital-based Ambulatory Surgical Centers (ASCs)***

*Prepared by:*

Department of Administrative Services  
Office for Oregon Health Policy and Research  
<http://www.oregon.gov/DAS/OHPR>

Jeanene Smith, MD  
Acting Administrator

Tina Edlund  
Research and Data Manager

Hanten Day  
Research Analyst

Katya Medvedeva  
Research Assistant

*If you would like additional copies of this report, or if you need this material in an alternate format, please call (503) 378-2422 x415*

---



---

## Key Data of Oregon's Free-Standing Ambulatory Surgical Centers:

- ❖ There are currently 72 free-standing Ambulatory Surgical Centers (ASCs) in Oregon in year 2006, compared to only 32 in 2000, a 125% increase.
  - ❖ The following data are based on the most recent 2005 Oregon ASC Survey conducted by OHP and reported by 60 Free-standing ASCs of their 2004 data. As with other surveys, not every ASC answered ALL questions.
  - ❖ There were 125 licensed operation rooms reported by 60 Oregon Free-standing ASCs in year 2004, compared to only 68 in 2000, an 84% increase.
  - ❖ Free-standing ASCs expanded from 12 Oregon counties in 2000 to 16 in 2004, concentrating along the I-5 corridor in the Metro, Willamette Valley and southern Oregon areas, while the majority of Oregon counties had none.
  - ❖ Lane County had the most increase from 3 Free-standing ASCs (with 7 licensed operating rooms) in 2000 to 11 (with 23 licensed operating rooms) in 2004, the highest numbers of any Oregon counties.
  - ❖ In 2004, Lane, Marion and Multnomah County had the highest numbers of Free-standing ASCs (11, 9, 7) and operating rooms (23, 20 and 19, respectively).
  - ❖ There were 1,078 personnel and 690 FTE reported by 60 Oregon Free-standing ASCs in year 2004, compared to only 597 personnel and 375 FTE in 2000, a 84% increase in FTE.
  - ❖ The total number of procedures and operations reported in 2004 by Free-standing ASCs were 160,457 and 122,332, respectively, compared to 70,906 and 52,788 in 2000. One operation may involve one or more procedures.
  - ❖ From 2000 to 2004, the top four surgical volumes by Free-standing ASCs were digestive, ophthalmologic, neurological, and orthopedic; their ranks changed with digestive system procedures increased more than 5 folds from 10,011 to 57,488 to take the number one and pushed ophthalmologic procedures to number two.
  - ❖ The average length in the operation rooms had been less than one hour: 48 minutes in 2004 and 59 minutes in 2000, nearly 20% reduction, while the total length of stay (LOS) shortened from an average of 2.5 hours (150 minutes) to 2.3 hours (135 minutes).
  - ❖ From 2000 to 2004, total charges reported by Free-standing ASCs increase 222% from \$64.33 millions to \$206.88 millions, average charge per procedure (operation) increase 42% (50%) from \$907 (\$1,077) to \$1,289 (\$1,602).
  - ❖ From 2000 to 2004, private insurance had been the single largest primary payer of Free-standing ASCs charges, and its share remained at about 55%; Medicare accounted for slightly less than one third of the total charges; Medicaid accounted for about 5% and self-pays about another 4%.
-

---

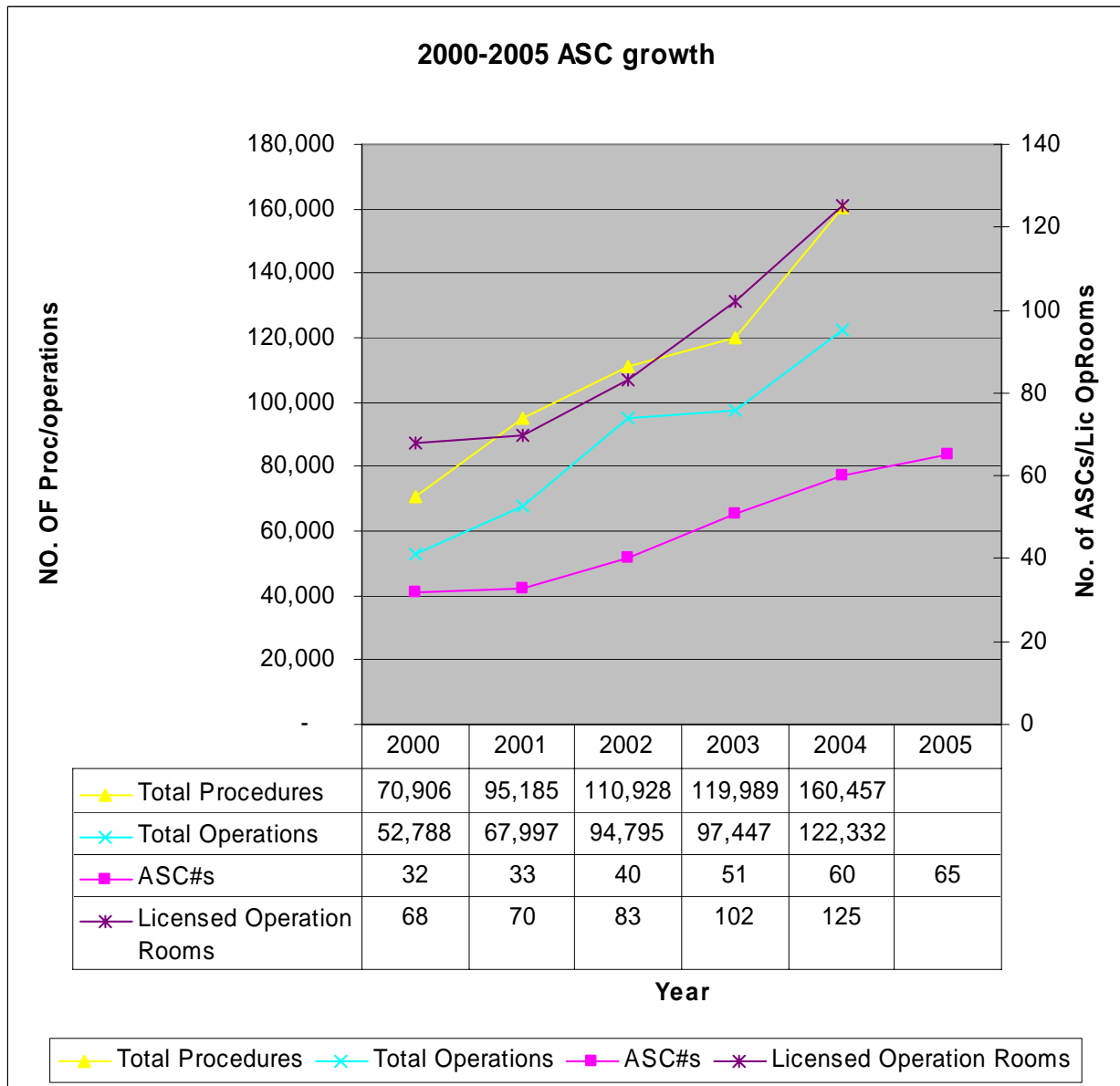
## Key Data of Oregon's Hospital-based Ambulatory Surgical Centers:

- ❖ There are currently 57 hospital-based Ambulatory Surgical Centers (ASCs) in Oregon in year 2006, compared to only 52 in 2000, a 10% increase.
- ❖ The following data are based on the most recent 2005 Oregon Hospital Survey conducted by OHPR and reported by 57 Oregon hospitals of their 2004 ASC data. As with other surveys, not every hospital answered ALL questions.
- ❖ Hospital-based ASCs expanded from 30 counties in 2000 to 31 in 2004, concentrated along the I-5 corridor in the Metro, Tri-county, Willamette Valley areas; with Multnomah County had the highest number;
- ❖ The total number of procedures and operations reported in 2004 were 382,660 and 348,375, respectively, 2.4 and 4.9 times that of the Free-standing ASCs';
- ❖ The total number of ambulatory surgical procedures in hospitals increased only 10% from 2000 to 2004, compared to 126% for Free-standing ASCs;
- ❖ The biggest increase (185%) came from oral surgical procedures, followed by neurological (97.4%) and endocrine system (95.3%); though their total volumes were relatively small compared to other procedures;
- ❖ The biggest decrease (83.3%) came from cardiology and vascular surgical procedures (76.5%), perhaps due to their high risks and more are done as inpatient procedures after admission;
- ❖ Digestive, orthopedic and ophthalmologic procedures moved up their volume ranks from 3, 4, 5 to 1, 2, 3;
- ❖ Five surgical categories (Gynecological, Oral, Thoracic, Hemic and Lymphatic, Endocrine system) all increased in volumes but their relative ranks remained about the same.
- ❖ The 2004 average length in hospital operation rooms and the total length of stay (LOS) were 65 minutes and 6.2 hours for hospital outpatient procedures, comparing with 59 minutes and 2.5 hours in Free-standing ASCs.
- ❖ Total charges reported by hospital ASCs increased 54% from \$618.47 millions in 2000 to \$952.15 millions in 2004, and the average charge per procedure increased 40% from \$1,775 in 2000 to \$2,488 in 2004.
- ❖ From 2000 to 2004, private insurance had been the single largest primary payer of hospital-based ASC charges, and its share remained at about 55%. Even though Medicaid's share increased from 5% to 7.5% but the total share of Medicaid and Medicare combined remained the same at 36-37% level.

## Free-standing ASCs: Overview

Oregon has experienced a rapid growth in recent years in free-standing Ambulatory Surgical Centers (ASCs) and sees no signs of slowing down, as is shown in Figure 1. At the end of 2005, there were 65 free-standing Ambulatory Surgical Centers (ASCs) in Oregon and the number jumped to 72 by March 2006, compared to only 32 in 2000, a 125% increase.

**Figure 1 - Oregon ASC Capacity and Production, 2000 – 2004**



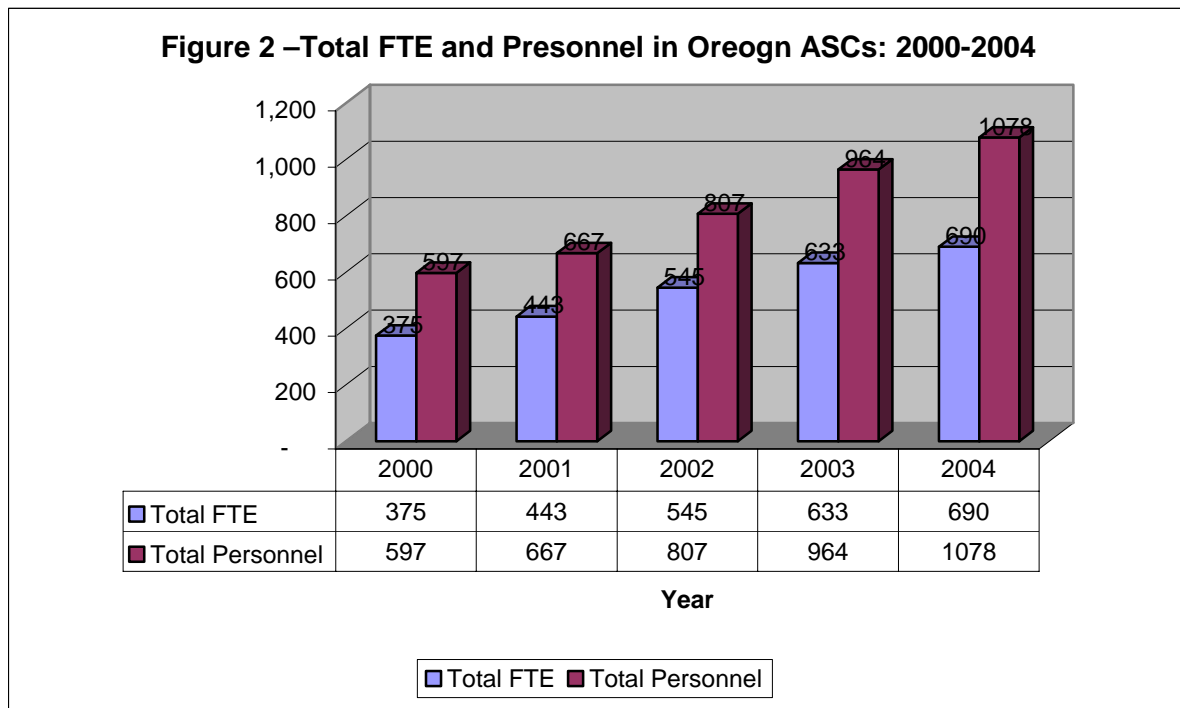
Each year, the Office for Oregon Health Policy and Research (OHPR) conducts a survey to collect statistics about Free-standing ASCs capacity, staffing, number of procedures or operations as well as charges and payer information, of both free-standing and hospital-based ASCs.

The following data are based on the most recent 2005 ASC Survey conducted by OHPR and reported by 60 Oregon free-standing Ambulatory Surgical Centers (ASCs) encompassing the reporting period from January 1, 2004 to December 31, 2004. As with other surveys, not every ASC answered ALL questions in the survey.

### Free-standing ASCs: Growth and Distributions

As shown in figure 1, there were 125 licensed operation rooms reported by 60 free-standing Ambulatory Surgical Centers (ASCs) in year 2004, compared to only 68 reported by 32 ASCs in 2000, representing over 84% increase in both the number of licensed operation rooms and ASCs. .

Free-standing ASCs expanded from 12 Oregon counties in 2000 to 16 in 2004, mainly along the I-5 corridor in the Metro, Willamette Valley and southern Oregon areas; Lane County had the most increase from 3 (with 7 licensed operating rooms) in 2000 to 11 (with 23 licensed operating rooms) in 2004, the highest numbers of Oregon counties.





In 2004, Lane, Marion and Multnomah had the highest ASC numbers (11, 9 and 7, respectively) and licensed operating rooms (23, 20 and 19, respectively), while the majority of Oregon counties had none.

### Free-standing ASCs: FTE/Personnel

There were 1,078 personnel and 690 FTE reported by 60 Oregon free-standing Ambulatory Surgical Centers (ASCs) in year 2004, compared to only 597 personnel and 375 FTE, a 84% increase in FTE, as shown in figure 2.

Further analyses found that about half of ASC FTEs are registered nurses (RNs) and another one-fourth is non-health personnel. From 2000 to 2004, the percentage of RNs decreased from 51.3% to 47.6%, while the percentage of LPN/CNA increased from 1.3% to 5.1%.

### Free-standing ASCs: Procedures/ Operations

As shown in figure 1, the total number of procedures and operations reported by Free-standing ASCs in 2004 were 160,457 and 122,332, respectively, compared to 70,906 and 52,788 in 2000. It needs to be noted that one operation may involve one or more procedures, and some ASCs may report them differently.

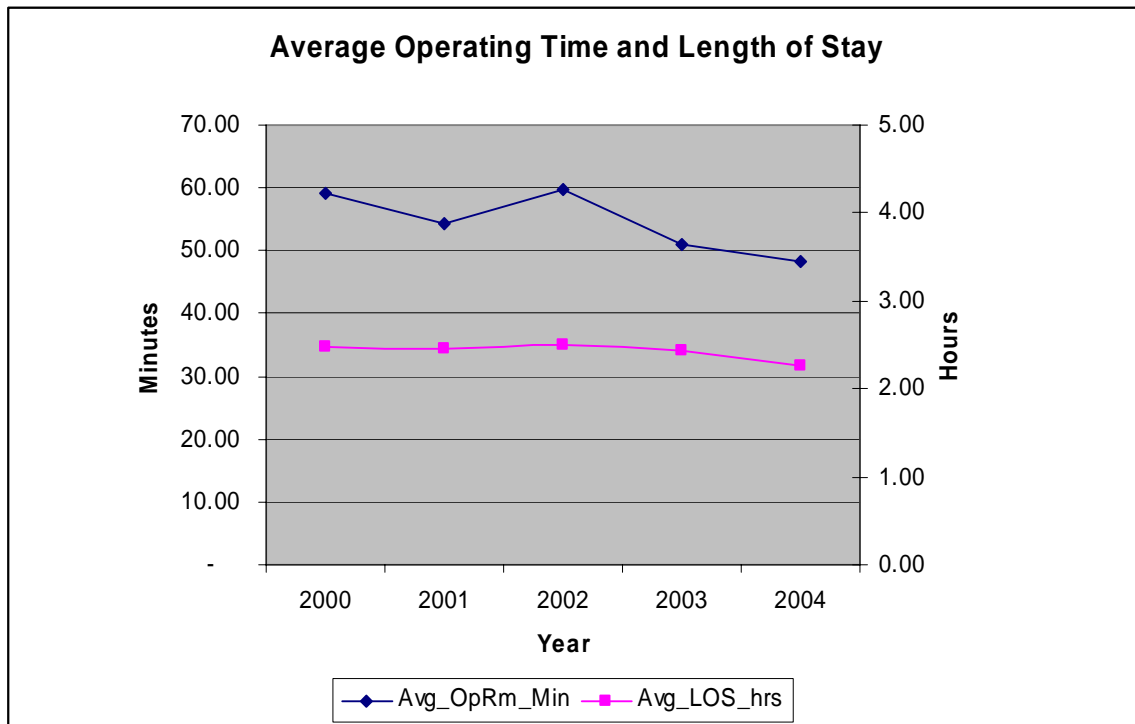
**Table 1- Volumes of Free-standing ASCs procedures and changes from 2000 to 2004**

Surgical procedure	2004		2000		Change	
	No. of Proc	Rank	No. of Proc	Rank	%chg	ranks chg
Digestive System	57,488	1	10,011	2	474.20%	1
Ophthalmologic	35,169	2	19,345	1	81.80%	-1
Neurological	20,407	3	8,001	4	155.10%	1
Orthopedic	15,239	4	9,268	3	64.40%	-1
Otolaryngological	8,838	5	2,686	7	229.00%	2
Integumentary(Skin-Related)	7,926	6	2,243	8	253.40%	2
Other Outpatient	6,599	7	1,607	10	310.60%	3
Urological	3,142	8	1,777	9	76.80%	1
Gynecological	2,344	9	6,483	6	-63.80%	-3
Oral	1,563	10	1,077	11	45.10%	1
Cardiology	490	11	95	15	415.80%	4
Proctology	432	12	7,810	5	-94.50%	-7
Hemic & Lymphatic	362	13	192	12	88.50%	-1
Vascular	359	14	158	13	127.20%	-1
Thoracic	96	15	142	14	-32.40%	-1
Endocrine System	3	16	11	16	-72.70%	0
<b><u>TOTAL</u></b>	<b>160,457</b>		<b>70,906</b>		<b>126.30%</b>	

Table 1 shows volumes of Free-standing ASCs procedures and changes from 2000 to 2004.

1. The total number of procedures performed were more than doubled (126% increase);
2. The biggest increase (474%) came from digestive system procedures, followed by cardiology (416%), integumentary (253%), otolaryngological (229%), neurological (155%), vascular (127%) and other outpatient surgeries (311%), all more than doubled;
3. The top four ASC surgical categories (digestive, ophthalmologic, neurological, orthopedic) hold up their volume leads but their relative ranks changed with digestive system procedures became number 1, exchanging position with ophthalmologic procedures which increased 82%;
4. Neurological volumes increased faster to take the number 3 position, push orthopedic to number 4;
5. Four surgical categories (proctology, gynecology, Thoracic and Endocrine system) shown decline volumes in ASCs; proctology decreased from 7,810 to only 432 (95%) and gynecology from 6,483 to 2,344 (64%)... perhaps due to their higher risks.

Figure 3 – Average Operating Time and Length of Stay in Free-standing ASCs



---

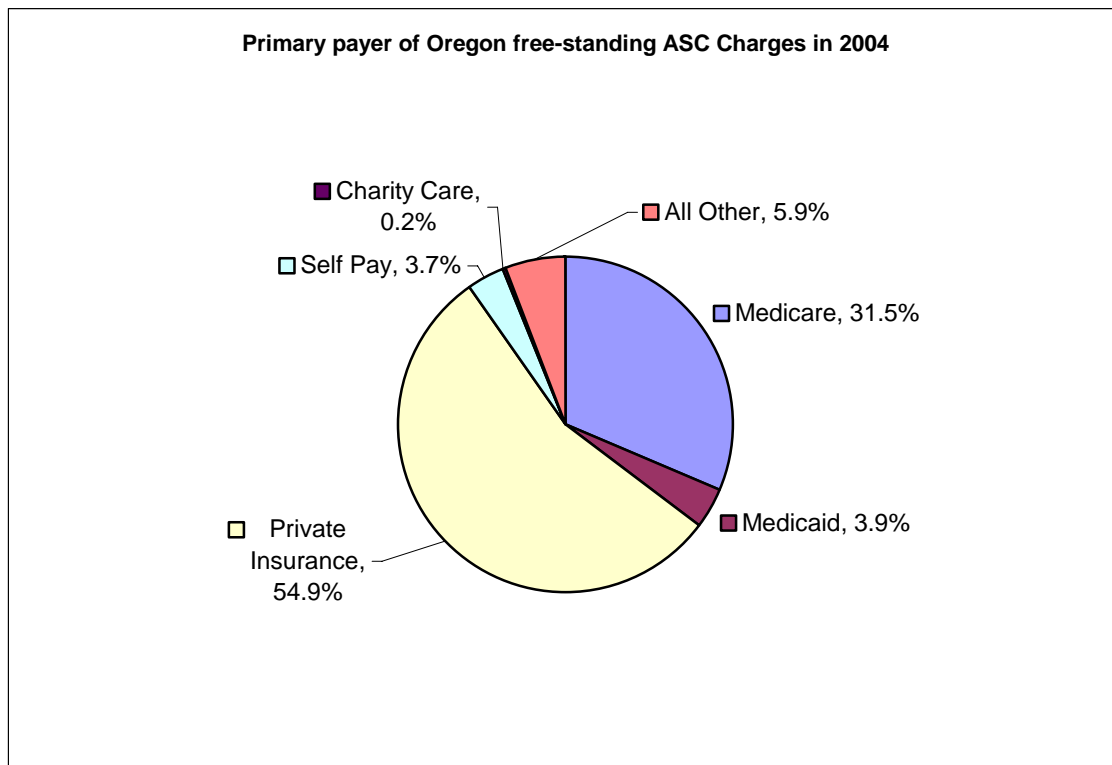
The average time in the operating rooms had been less than one hour: 59 minutes in 2000 and 48 minutes in 2004 and nearly 20% reduction, while the total length of stay (LOS) in ASCs shortened from an average of 2.5 hours (150 minutes) to 2.3 hours (135 minutes).

### Free-standing ASCs: Charges and Payers

From 2000 to 2004, total charges reported by Free-standing ASCs increase 222% from \$64.33 millions to \$206.88 millions, average charge per procedure (operation) increase 42% (50%) from \$907 (\$1,077) to \$1,289 (\$1,602).

Private insurance has been the single largest payer for the ASC procedures, and its share of the charges remained at about 55% across the five year span; Medicare accounted for slightly less than one third of the total charges; Medicaid accounted for about 5% and self-pays about another 4%.

Figure 4-



---

## Hospital-based ASCs: Overview

While the growth of Oregon's standing Ambulatory Surgical Centers (ASCs) is rapid, the number of hospital-based ASCs remained stable. There are currently 57 hospital-based Ambulatory Surgical Centers (ASCs) in Oregon in year 2006, compared to only 52 in 2000, a 10% increase.

The following data are based on the most recent 2005 Oregon Hospital Survey conducted by OHPR and reported by 57 Oregon hospitals of their 2004 ASC data. As with other surveys, not every hospital answered ALL questions.

Hospital-based ASCs expanded from 30 counties in 2000 to 31 in 2004, concentrated along the I-5 corridor in the Metro, Tri-county, Willamette Valley areas; with Multnomah County had the highest number.

## Hospital-based ASCs: Procedures/ Operations

The total number of procedures and operations reported by hospitals in 2004 were 382,660 and 348,375, respectively, 2.4 and 4.9 times that of the Free-standing ASCs'.

**Table 2- Volumes of hospital-based ASC procedures and changes from 2000 to 2004**

Surgical Categories	2004		2000		Change	
	No. proc	Rank	No. proc	Rank	% Chg	RankChg
Digestive System Surgery	77,669	1	45,686	3	70.0%	2
Orthopedic	66,563	2	41,890	4	58.9%	2
Ophthalmologic Surgery	43,068	3	38,584	5	11.6%	2
Integumentary (Skin-Related)	37,759	4	25,912	6	45.7%	2
Otolaryngological Surgery	31,078	5	20,717	7	50.0%	2
Neurological Surgery	28,848	6	14,612	9	97.4%	3
Urological Surgery	19,151	7	12,556	10	52.5%	3
Gynecological Surgery	17,829	8	16,082	8	10.9%	0
Other Outpatient	12,284	9	11,463	11	7.2%	2
Proctology	11,212	10	6,164	12	81.9%	2
Vascular	11,116	11	47,241	2	-76.5%	-9
Cardiology Surgery	9,856	12	59,092	1	-83.3%	-11
Oral Surgery	7,562	13	2,658	14	184.5%	1
Thoracic	3,933	14	2,958	13	33.0%	-1
Hemic and Lymphatic	3,002	15	1,874	15	60.2%	0
Endocrine System	1,730	16	886	16	95.3%	0
<b><u>TOTAL</u></b>	<b>382,660</b>		<b>348,375</b>		<b>9.8%</b>	

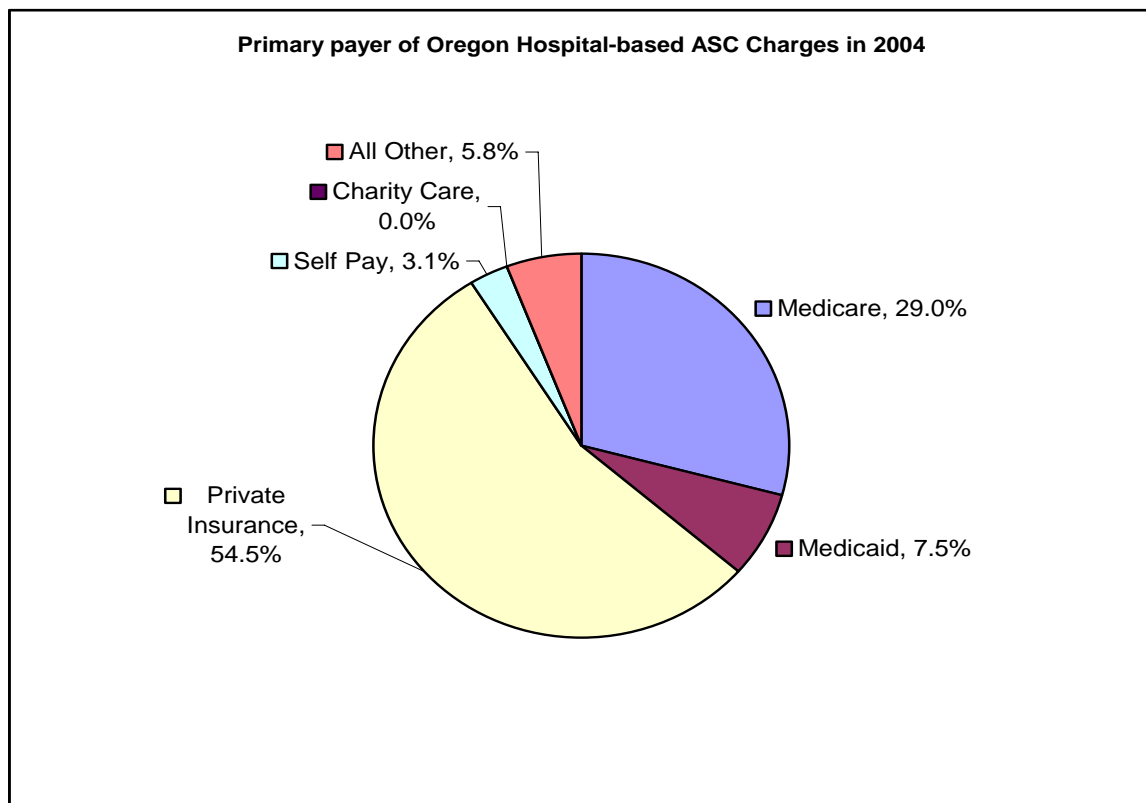
---

Table 2 shows volumes of hospital-based ASC procedures and changes from 2000 to 2004.

1. The total number of procedures performed increased only 10%, compared to 126% for Free-standing ASCs);
2. The biggest increase (185%) came from oral surgical procedures, followed by neurological (97.4%) and endocrine system (95.3%); though their total volumes were relatively small;
3. The biggest decrease (83.3%) came from cardiology, followed by vascular surgical procedures (76.5%);
4. Digestive, orthopedic and ophthalmologic procedures moved up their ranks from 3, 4, 5 to 1, 2, 3;
5. Five surgical categories (Gynecological, Oral, Thoracic, Hemic and Lymphatic, Endocrine system) all increased in volumes but their relative ranks remained about the same.

The 2004 average length in hospital operation rooms and the total length of stay (LOS) were 65 minutes and 6.2 hours in hospital-based ASCs, comparing with 59 minutes and 2.5 hours of Free-standing ASCs.

### Hospital-based ASC: Charges and Payers



---

From 2000 to 2004, total charges reported by hospital ASCs increased 54% from \$618.47 millions to \$952.15 millions, average charge per procedure increased 40% from \$1,775 in 2000 to \$2,488.

Private insurance had been the single largest primary payer of hospital-based ASC charges, and its share remained at about 55%. Even though Medicaid's share increased from 5% to 7.5% but the total share of Medicaid and Medicare combined remained the same at 36-37% level.

Both Hospital-based and Free-standing ASCs provide some charity care. With Free-standing ASCs having a higher percentage, though both were very low compared to other payers.