

AMBULATORY SURGERY CENTER GUIDE

ASC Payment Guidelines, Form Deployments, and Discount Rules

ASC FACILITY BILLING STRUCTURES

Ambulatory Surgery Centers (ASCs) are distinct outpatient surgical facilities that operate under separate guidelines from standard acute-care hospital surgical suites.

THE PROFESSIONAL VS. FACILITY FORM SPLIT

An ASC procedure always requires two separate claims: the surgeon bills their professional time using an electronic 837P / CMS-1500 form, while the ASC facility bills its operating room, nursing care, and supply costs separately on an electronic 837I / UB-04 form (or CMS-1500 depending on specific carrier contracts).

MULTIPLE PROCEDURE DISCOUNTING FRAMEWORK

When a surgeon performs multiple surgical procedures in the same session, the ASC facility fee schedule applies a standard discount structure:

- **Primary Procedure:** Reimbursed at 100% of the highest contractually negotiated ASC fee schedule rate.
- **Secondary & Subsequent Lines:** Automatically subjected to a **50% payment reduction**. The billing system must track this to prevent artificial overpayment rejections.