

Single-Specialty Ambulatory Surgery Facility Demonstration Project
Annual Evaluation Report Summary
Triangle Orthopaedics Surgery Center
Year 1 (2/26/13 – 2/25/14)

Triangle Orthopaedics Surgery Center was licensed in February 2013 to operate as an ambulatory surgical facility pursuant to the demonstration project in the 2010 State Medical Facilities Plan (Plan).

One of the criteria in the Plan was for the facility to submit an annual report to the agency showing the facility's compliance with the project criteria. The first year's project report was received by the agency on April 30, 2014 for the time period of February 26, 2013 to February 25, 2014.

The report revealed that of the nineteen physicians practicing at the facility, three were not owners of the practice. They sought other physicians for their facility by making phone calls to local physicians and by sending invitations to the Triangle Orthopaedics open house. In addition, all the physicians maintained privileges at local hospitals, took ER call at local hospitals and the number of hours they took call was listed in the report. (Attachment H)

By the submission of information related to the number of and payor source of the patients they served, the agency was able to verify that the facility's total revenue attributed to self-pay and Medicaid was at least seven percent. The spreadsheet submitted in the report revealed that 9.33% of the facility's revenue was attributed to self-pay and Medicaid patients. (Attachment A and B)

The surgical safety checklist that had been used since the initial licensure of the facility and was adapted from the World Health Organization. This checklist is integrated into the electronic health records (EHR) and are required fields. According to daily chart audits, 100% of the surgeries had used this checklist. (Attachment D)

The facility addressed the required measures for tracking Quality Assurance in accordance with the conditions set forth in the certificate of need. They even went above and beyond and tracked additional measures. The report contained information showing minuscule negative results based on the numbers and percentages reported. (Attachment E)

There is an EHR interface between the facility and physicians' offices. This software is specifically designed to be used in surgical centers. Additional interfaces are being considered. A detailed explanation of this operation was provided. (Attachment F)

In the report, the facility was to supply evidence of their reporting of utilization and payment data to the statewide data processor as required by G.S. 131E-214.2 and as a criterion of the 2010 SMFP. (Attachment C)

Based on the review of their annual report submitted to the agency, it was determined Triangle Orthopaedics Surgery Center has demonstrated substantial compliance with the demonstration project criteria outlined in the Plan and the Certificate of Need.