

Freeman Surgical Center

SUBJECT: Disclosure of Physician Ownership

Policy # ADMB.11

PURPOSE: To assist the patient in making an informed decision regarding his or her care by making the patient or the patient's representative or surrogate, aware of when physicians who refer their patient to the ASC for procedures, or physicians who perform procedures in an ASC, also have an ownership or financial interest in the ASC.

POLICY: The ASC must disclose, in accordance with 42 C.F.R. §416.50(b), and where applicable, provide a list of physicians who have financial interest or ownership in the ASC facility

The required form "Notice to Patients: Disclosure of Ownership" will be provided to each patient, the patient's representative or surrogate prior to the start of the surgical procedure.

SCOPE: All patients, the patient's representative or surrogate.

PROCEDURE:

1. At the beginning of the patient's out-patient visit, the Notice to Patient – Statements of Disclosure form will be provided to each patient, the patient's representative or surrogate prior to the surgical procedure.
2. For purposes of this policy, the outpatient visit begins upon admission to the Facility. The admitting personnel will provide the required information.

Associated Form

Form – Notice to Patient – Statements of Disclosure

[To be given to all patients at the beginning of their out-patient visit.]

Reference:

Centers for Medicare and Medicaid Conditions for Coverage 42 C.F.R. §416.50(b) Patient Rights
