



Ambulatory Surgery
Center Association

Understanding Medicare's Final Rule for 2025

Hospital Outpatient Prospective Payment System (OPPS) / ASC Payment Rule Timeline

Proposed rule: Usually early July

Comments due 60 days after proposed rule

Final rule: Typically issued 60 days prior to January 1 effective date

Payment Rates Effective January 1

- Correction Notices
- Quarterly Updates

Medicare Payment Policy

2025 Final Payment Update

ASC Effective Inflation Update: 2.9%

- CMS to use hospital market basket index through 2025
- Hospital Market Basket: 3.4%
- Multi-factor productivity (MFP) adjustment: 0.5%

HOPD Effective Inflation Update: 2.9%

- Hospital Market Basket: 3.4%
- Multi-factor productivity (MFP) adjustment: 0.5%

Secondary Rescaling Factor: 0.872

Rate change varies by procedure

2025 Final Rule: Top 100 Procedures by Volume

Specialty	Total Codes in Top 100	2022 ASC Volume for Top 100 Codes	Δ 2024F – 2025F
Dermatology	6	50,869	2.89%
Gastrointestinal	15	1,903,049	3.57%
General	1	5,818	4.52%
Ophthalmology	22	1,803,124	3.03%
Orthopedics	21	358,553	3.04%
Otolaryngology	4	58,229	5.74%
Pain Management	15	969,018	1.75%
Spine	3	50,005	3.6%
Urology	10	169,557	2.86%
Vascular/Cardio Surgery	3	42,180	-0.4%
Grand Total	100	5,410,402	2.93%

2025 Final Rule: Top 100 Procedures by Volume

HCPCS	Descriptor	Specialty	2022 Volume	2024 Rate	2025 Final Rule	Δ 2024F – 2025F
66984	Cataract surg w/iol 1 stage	Ophthalmology	1,165,208	\$1,183.57	\$1,214.31	2.55%
43239	Egd biopsy single/multiple	Gastroenterology	474,978	\$470.17	\$503.39	6.68%
45385	Colonoscopy w/ lesion removal	Gastroenterology	465,629	\$612.08	\$632.96	3.33%
45380	Colonoscopy and biopsy	Gastroenterology	432,508	\$612.08	\$632.96	3.33%
64483	Inj foramen epidural l/s	Pain Management	257,601	\$472.76	\$477.94	1.08%
66821	After cataract laser surgery	Ophthalmology	235,975	\$301.49	\$294.52	-2.28%
64493	Inj paravert f jnt l/s 1 lev	Pain Management	189,565	\$472.76	\$477.94	1.08%
G0105	Colorectal scrn; hi risk ind	Gastroenterology	152,106	\$474.05	\$489.47	3.17%
62323	Njx interlaminar lmb/sac	Pain Management	125,844	\$358.69	\$371.75	3.51%
64635	Destroy lumb/sac facet jnt	Pain Management	106,989	\$897.67	\$924.93	2.96%
			3,606,403			2.54%

Medicare ASC Covered Procedures List (ASC-CPL)

- Historically includes surgical procedures CPT 10000-69999 (unless excluded)
- Ancillary services (when provided in conjunction with surgical code)
- List updated annually (mid-year coding changes)
- Evaluates excluded procedures to determine if any codes currently excluded should be added to the ASC-CPL

General Exclusions

- c) General exclusions. Notwithstanding paragraph (b) of this section, covered surgical procedures do not include those surgical procedures that—
- (1) Generally result in extensive blood loss;*
 - (2) Require major or prolonged invasion of body cavities;*
 - (3) Directly involve major blood vessels;*
 - (4) Are generally emergent or life-threatening in nature;*
 - (5) Commonly require systemic thrombolytic therapy;*
 - (6) Are designated as requiring inpatient care under §419.22(n) of this subchapter;*
 - (7) Can only be reported using an unlisted surgical procedure code*
 - (8) Otherwise excluded under §411.15 of this subchapter*

ASC-CPL Nomination Process

- Cardiovascular Codes
 - Electrophysiology Studies and Ablations: 93613, 93619, 93620, 93623, 93650, 93653, 93654, 93655, 93656 and 93657
 - Cardioversion and TransEsophageal Echocardiogram: 92960 and 93355
- Spine Codes
 - Posterior Lumbar Inter-body Fusion: 22630
 - Combined Posterior Lumbar and Posterior Lumbar Inter-body Fusion: 22633
- **NONE** were added to ASC-CPL.

Final ASC-CPL Additions for 2025

- CMS added the following codes:
 - ADRC Therapy
 - 0717T, 0718T
 - Dental Codes
 - D7251, D7280, D7320, D7321 D7410, D7411, D7412, D7413, D7414, D7415, D7450, D7451, D7460, D7461, D7471, D7485, D7521, D7530, D7540

ASC Quality Reporting Program

2025 Final Rule Changes to the ASCQR Program

CMS finalized three new measures:

- The Facility Commitment to Health Equity (FCHE) measure beginning with the CY 2025/CY 2027 payment determination period.
- The Screening for Social Drivers of Health (SDOH) measure beginning with voluntary reporting in the CY 2025 reporting period followed by mandatory reporting beginning with the CY 2026 reporting period/CY 2028 payment determination.
- The Screen Positive Rate for Social Drivers of Health (SDOH) measure beginning with voluntary reporting in the CY 2025 reporting period followed by mandatory reporting beginning with the CY 2026 reporting period/CY 2028 payment determination.

Facility Commitment to Health Equity (FCHE)

- 2025 Reporting Period/2027 Payment Determination
- Reported annually through HQR-submission: first deadline May 15, 2026
- Reporting on elements within 5 domains
- Affirmative attestation of all elements within a domain are required to receive one point for the domain (total of 5). Overall score on each domain will be publicly reported.
- CMS will provide guidance “in the future” and intend to provide educational materials



ASC 15: Outpatient/Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)

- The five survey-based measures (ASC-15a-e) are collected via one survey {OAS CAHPS}:
- ASC-15a: About Facilities and Staff;
- ASC-15b: Communication About Procedure;
- ASC-15c: Preparation for Discharge and Recovery
- ASC-15d: Overall Rating of Facility; and
- ASC-15e: Recommendation of Facility

Voluntary reporting in CY 2024; mandatory reporting beginning in CY 2025

OAS CAHPS Survey

- Survey has 34 questions:
 - 22 questions related to the patient, the facility, communication, and patient reported outcomes
 - 12 demographic questions
 - ASCs may add up to 15 supplemental questions
- Survey must be conducted via telephone, mail or mixed-mode (mail with telephone follow-up); electronic with phone and electronic with mail (these two modes added in 2022)
- CMS requires 200 completed surveys
- Must contract with CMS-certified vendor (currently 16)
- <https://www.ascassociation.org/asca/asc-operations/quality/oas-cahps>

Upcoming ASC-20 Reporting Deadlines

Quarterly Data Submission	Deadline
Quarter 3 2024 (July 1 – September 30, 2024)	February 15, 2025
Quarter 4 2024 (October 1 – December 31, 2024)	May 15, 2025
Quarter 1 2025 (January 1 – March 31, 2025)	August 15, 2025
Quarter 2 2025 (April 1 – June 30, 2025)	November 15, 2025

References

2025 OPPS/ASC Final Payment Rule:

<https://public-inspection.federalregister.gov/2024-25521.pdf>

2025 Final Rule ASC Addenda:

<https://www.cms.gov/license/ama?file=/files/zip/2025-nfrm-addendum-aa-bb-dd1-dd2-ee-and-ff.zip>

2025 OPPS/ASC Proposed Payment Rule:

<https://public-inspection.federalregister.gov/2024-15087.pdf>

2025 Proposed Rule ASC Addenda:

<https://www.cms.gov/license/ama?file=/files/zip/2025-nprm-addendum-aa-bb-dd1-dd2-ee-and-ff.zip>

ASCA Payment Resources:

<http://www.ascassociation.org/federalregulations/medicarepayments>

ASC Quality Reporting Program:

<https://qualitynet.cms.gov/asc>

<https://www.ascassociation.org/medicare/quality-reporting> <https://www.ascassociation.org/asca/asc-operations/quality/oas-cahps>

Facility Commitment to Health Measure resources:

Measure specifications: https://qualitynet.cms.gov/files/671a90d806a21494bb0ced60?filename=FCHE_MeasSpecs_ASCQR_Jul24.pdf

Attestation guidance: https://qualitynet.cms.gov/files/67259e5cdea98b54c10e1aa0?filename=AttstGdnceFCHEMeas_v1.0_ASCQR.pdf

Questions?

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