



**Date:** June 8<sup>th</sup>, 2022  
**To:** Medical Examining Board  
**From:** Wisconsin Surgery Center Association  
**Re:** Comments for the Economic Impact Analysis, Med 10 “Chaperone Rule”

The Wisconsin Surgery Center Association (WISCA) believes that the draft “chaperone rule” under Med 10-Performance of Examinations as written would cause hardship on Wisconsin’s 75 ambulatory surgery centers (ASCs) throughout the state.

ASCs in Wisconsin are CMS certified and comply with State and Federal rules for patient privacy protection and safety. The ASCs are committed to complying with these guidelines and are very concerned the rule as currently drafted would cause undue financial burden resulting in the reduction of access for patients to receive medically necessary in a cost-effective setting of the ASC.

ASCs are generally small providers without the workforce available to provide an on-call chaperone for our patients per the draft rule’s guidance. The vast majority of ASCs in Wisconsin would be impacted by this rule as they perform surgeries and procedures where a chaperone would be essentially required.

While we appreciate the Wisconsin Medical Examining Board’s overall goal of increasing patient safety and protecting patients from potential wrongdoing by unscrupulous actors, the current draft puts ASCs in the tough position of either increasing costs or opening themselves up to increased liability.

The updated rule draft does provide some flexibility in how ASCs can meet the request of a patient for a chaperone or observer, but in the end that flexibility won’t reduce overall cost or concern about the rule. Many ASCs will feel obligated to expand staff or staff duties and have a clearly defined chaperone available. Additionally, we have some concerns with the overall tracking system necessary to ensure ASCs are compliant with the rule which we believe will lead to extra staffing costs.

ASCs operate under the same goals that the MEB is trying to achieve with the draft rule. That is to provide patients comfort, safety, and protection throughout their procedure. Many centers have protocols which mirror the MEB’s draft rule but don’t meet all its specifications. While this will impact almost all ASCs it will especially place a burden on our smaller single specialty and more rural ASCs who will have to expand staff and staffing hours to comply.

It is our belief that the rule in its current form would cost an average center around \$80,000 a year. A tough pill to swallow for ASCs who believe they are already in step with the foundational reasoning for the proposed chaperone rule.

WISCA believes that with most ASCs needing to hire a chaperone in order to be in compliance with the proposed rule, the total economic impact to an ASC in Wisconsin be \$80,000 annually. Multiplied by a conservative estimate of 65 ASCs and the annual economic impact to ASCs would be \$5,200,000.

We look forward to a continuing a dialogue on this issue to ensure patient safety without harming Wisconsin’s ASC network in the process.

Please contact Bob Kwech, WISCA Legislative Chair with questions: [BobK@wigia.com](mailto:BobK@wigia.com)