

West Bridgewater MA Endoscopy ASC, LLC
CEC-24082115-AS

APPLICANT QUESTIONS #2 Respond by November 20th, 2024

Responses should be sent to DoN staff at DPH.DON@State.MA.US

While you may submit each answer as available, please

- List question number and question for each answer you provide.
- Submit responses as a separate word document, using the above application title and number as a running header and page numbers in the footer.
- When providing the answer to the final question, submit all questions and answers in order in one final document.
- Submit responses in editable WORD or EXCEL format.
- Whenever possible, include a table with the response.
- **For HIPAA compliance Do not include numbers <11.**

1. Please clarify the table below:

- a. It shows only the top 9 primary diagnoses. Please provide the 10th.

Response: Please see below for 10th primary diagnosis.

- b. Explain why/correct the left column is labeled *Top 100*.

Response: This was a typo. Please see below.

- c. Are the percentages for procedures or cases? And Are office visits included as well.

Response: The percentages listed below reflect the percentage of diagnosis codes for procedures. These are diagnoses for ASC procedures only, and do not include office visits.

Top 10 Patient Primary Diagnoses	Dx Code	2021 %	2022 %	2023 %	2024 %
Encounter for screening for malignant neoplasm of colon	Z12.11	23%	25%	33%	31%
Personal history of colonic polyps	Z86.010	18%	19%	19%	22%
Family history of malignant neoplasm of digestive organs	Z80.0	7%	6%	6%	6%
Melena	K92.1	8%	7%	4%	4%
Acute gastritis without bleeding	K29.00	5%	5%	3%	4%
Dysphagia, unspecified	R13.10	4%	5%	4%	4%
Epigastric pain	R10.13	4%	5%	4%	3%
Iron deficiency anemia secondary to blood loss (chronic)	D50.0	3%	4%	3%	3%
Gastro-esophageal reflux disease without esophagitis	K21.9	5%	3%	2%	2%
Diarrhea, unspecified	R19.7	3%	3%	2%	2%

West Bridgewater MA Endoscopy ASC, LLC
CEC-24082115-AS

2. Please explain how the acuity of cases affects the project. We note that the ASA 3 percentage of patients has fluctuated (range 15.5% to 23.5%); is there an explanation for this that impacts the project?

Response: The Applicant expects its Acuity Mix to remain relatively stable following completion of the Project, with the vast majority of patients falling within the ASA 2 category (patient with mild systemic disease.) As noted in the Initial Application, the ASA Physical Status Classification System alone does not predict perioperative risks, but is used with other factors (e.g., type of surgery, frailty, level of deconditioning) to determine the appropriateness of performing a given procedure in as ASC versus an HOPD.¹ Given that the ASA Physical Status Classification System is only one of several factors used by the physicians in determining the appropriate setting for a procedure, the Applicant is unable to identify the cause of the fluctuation in the number of ASA 3 patients from 23% in 2021 to 15% in 2022 and back up to 20% in 2024. That said, as noted in the Initial Application, moving more GI procedures, which are generally less invasive and require less recovery time, to an ASC setting will enable community hospitals in the Applicant's service area to focus on higher acuity procedures.

3. When did the Applicant sign the contract with MassHealth?

Response: The Applicant's MassHealth provider contract has been effective since October 8, 2015.

4. Is there an intention to integrate the Provation and ALLSCRIPTS EMR to improve upon data collection and reporting around race, ethnicity, payor mix, ELL, diagnosis etc for planning purposes and post-DoN reporting data such as wait times by type of scan, urgent vs screening; or adenoma detection rates by race, zip codes, and insurance? Are the clinical practices on Provation or another system and will that be integrated with the other systems? Is there any plan to integrate systems with referring PCPs rather than faxing copies back and forth.

Response: Following completion of the Project, the Applicant intends to upgrade to a new version of Provation, called Provation APEX, which will have an improved interface with ALLSCRIPTS. However, given the limitations of the ALLSCRIPTS system, the Applicant cannot guarantee that its ability to report on this data will improve following the upgrade. The Provation system is used by all of the physicians who practice at the Facility to capture operating notes, but Provation does not provide functionality for physician practices. Because the Applicant is not affiliated with its patients' PCPs, some of whom practice independently and some of whom are affiliated with large hospital systems or physician practices, it is not feasible for the Applicant to integrate systems with its referring PCPs.

¹ Statement on the ASA Physical Status Classification System available at <https://www.asahq.org/standards-and-practice-parameters/statement-on-asa-physical-status-classification-system>, accessed on August 1, 2024.

West Bridgewater MA Endoscopy ASC, LLC
CEC-24082115-AS

5. The Applicant states there are 3 “new physicians,” how many “current physicians” are there?

Response: Commonwealth Endoscopy Center, Inc. (the “Physician Practice”), which owns 49% of the Applicant, currently has 7 physician owners who perform procedures at the Facility. As noted in the initial application, in May 2024, 5 new physicians also began performing procedures at the Facility, including the 3 “New Physicians” who may obtain a minority interest in the Physician Practice.

6. Given the shortage of healthcare workers, do you have a staffing plan to add new staff to accommodate the additional capacity?

Response: The Applicant has a plan in place to add new staff to accommodate the additional capacity that will be required following completion of the Project. The Applicant plans to begin recruiting following approval of the Application and does not anticipate significant difficulties in recruiting new staff given the considerable benefits of working in an ASC (i.e. better work-life balance, more predictable schedules), especially for healthcare workers who have experienced burnout working in other settings.