AMERICAN ASSOCIATION FOR ACCREDITATION OF AMBULATORY SURGERY FACILITIES, INC.

Medicare ASC Medicare RHC Medicare RA/OPT ASF Surgical ASF Oral Mexillofacial ASF Procedural

ACCREDITATION OFFICE: 5101 Washington Street, Suite 2F P.O. Box 9500, Guinee, Illinois 50031 Toll Free: 1488-545-5222

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Initial Accreditation Decision Letter

Date of Notice: August 24, 2017

Director: Yelena Levitin, M.D.

Thank you for participating in this important quality assurance and patient safety process administered by the American Association for Accreditation of Ambulatory Surgery Facilities. The following report contains information relevant to the conclusion of your recent accreditation survey process including your facility accreditation demographic information, accreditation decision, and recent survey history. AAAASF requires that all standards be met in order to achieve accreditation and that 100% compliance must be maintained at all times. AAAASF reserves the right to conduct additional surveys to validate the findings of previous surveys and to ensure continued compliance with standards.

Attached you will find a report containing all of the deficiencies cited during the accreditation survey along with the corrective action plans submitted to AAAASF. The final Accreditation Decision based on the findings and corrective action taken in response to your recent survey process is Full.

Please note that the Centers for Medicare and Medicaid Services (CMS) Regional Office (RO) makes the final determination regarding your Medicare participation and the effective date of participation in accordance with the regulations at 42 CFR 489-13.

Survey Details Below

Accrediting Organization: AAAASF

Survey Identification Number: 19622

AAAASF Facility Identification Number: 6500

Program Type: ASC

CCN Number: Pending

Provider/Supplier Mailing Name and Address:
Associated Surgical Center LLC.
129 W Rand Rd Suite 1
Arlington Heights, IL 60004
United States

Survey Request Type: Initial

Survey Type: Full Accreditation Survey

Survey Began: June 20, 2017 Survey Ended: June 29, 2017

Date Acceptable Plan of Correction Received: August 23, 2017

Method of Follow Up: Plan of Correction

Accreditation Decision: Full

Effective Date of Accreditation: August 23, 2017

Expiration Date of Accreditation: August 23, 2020

Recommended for Deemed Status: Yes

CMS Condition for Coverage Cited: N/A

Sincerely,

Thomas S. Terranova, MA Director of Accreditation

CC!

CMS Central Office Survey & Certification Group (via Electronic Mail Box) CMS Regional Office (via Electronic Mail Box): RO V – Chicago State Department of Health Services

*** ENCLOSED REPORT INCLUDES ALL DEFICIENCIES CITED, SURVEYOR FINDINGS AND EVIDENCE, AND ACCEPTED. PLAN OF CORRECTION COMPLETED TO ADDRESS ALL CITATIONS.