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Statement of the American College of Surgeons

To the

Georgia Board of Community Health
November 28, 2007

Presented by

James K. Elsey, MD, FACS
ACS Governor
Lawrenceville, GA

Statement on General Surgery as a Single Specialty Proposed Amendment 111-2-2.-40 Specific Review Considerations For Ambulatory Surgery Services

Chairman Holmes, and members of the Board of Community Health. My name is James Elsey, MD, FACS and I am a general/vascular surgeon from Lawrenceville. I am in active surgical practice at Gwinnett Medical Center, and serve as an instructor at Emory and Mercer Universities. I have been a board certified general surgeon since 1986.

I am here today in my capacity as an American College of Surgeons Governor from the Georgia Chapter of the ACS. The American College of Surgeons is a voluntary, educational and scientific organization devoted to the ethical and competent practice of surgery, and to enhancing the quality of care provided to surgical patients. For over 94 years, the College has disseminated medical and surgical information to the profession and to the general public, and it has been deeply involved in establishing standards of practice. With over 74,000 members, nearly half of which are general surgeons, the ACS is the largest surgical association in the world.

On behalf of the American College of Surgeons and the 1,750 Georgia surgeons who are Fellows of the ACS, I am pleased to state our strong support of the proposed amendment 111-2-2.-40 Specific Review Considerations For Ambulatory Surgery Services. We thank you for your initial unanimous vote in support of this amendment, which finally recognizes general surgery as the single specialty it is, and urge you to formally adopt this amendment on December 13, 2007.



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For many years, our state has incorrectly defined general surgery as a multi-specialty, and as a result general surgeons are ineligible for the single-specialty exemption from the CON regulations for Ambulatory Surgery Centers. General surgery is and always has been a single specialty, with a specific, defined body of surgical knowledge and skills – not a broad “anything goes” specialty. Extensive testimony has been presented in many legislative, judicial and regulatory forums that general surgery is a single specialty and is recognized as such by all major medical and surgical organizations and every state in the country – with one exception: Georgia.

Opponents to the proposed amendments have argued that changing the definition of general surgery and allowing general surgeons to open ambulatory surgery centers would force hospitals around the state to close. We see little evidence to support these claims. Despite already competing with over 200 physician-owned ambulatory surgical centers throughout Georgia, most hospitals have remained open and profitable. The fact is that while hospitals do close, it is usually due to a variety of complex reasons. Rarely, if ever, do they close simply because an ambulatory surgery center opens up down the street.

To be sure, since the facility fees at an ambulatory surgery center are a third those of a hospital, general surgeons are able to provide less costly and more efficient care at their own centers. Given the burden Georgia employers and all Georgia citizens face due to the spiraling costs of health care, allowing such ambulatory centers would bring a major benefit to health care consumers and the health care system, including Medicaid recipients whose care is paid for by the state.

In closing, let me once again thank you for your support of amendment 111-2-2.-40 Specific Review Considerations for Ambulatory Surgery Services. Adopting this amendment is the right thing to do, and we urge you to do so on December 13.