

2026 LEAPFROG TOP AMBULATORY SURGERY CENTERS



METHODOLOGY AND DESCRIPTION



The Leapfrog Group applied the following criteria to determine which Ambulatory Surgery Centers (ASCs) qualified for Leapfrog's 2026 Top ASC Award. All ASCs that completed a Leapfrog Ambulatory Surgery Center Survey 2.0 by August 31, 2026, were eligible for consideration. The criteria are inclusive of all three components of Leapfrog's new ASC Public Reporting Program, including the Leapfrog ASC Survey 2.0, CMS Public Reporting, and Accreditation Standards. For more information about the Leapfrog ASC Public Reporting Program visit www.leapfroggroup.org/asc.

Leapfrog ASC Survey 2.0

I. An ASC must achieve, or make considerable or some progress towards achieving, Leapfrog's standard for Billing Ethics.

ASCs achieving Leapfrog's standard for billing ethics must provide either payer-specific negotiated charges or cash prices on their website for commonly performed procedures. They must also provide every patient with a billing statement and/or master itemized bill within 30 days of final claims adjudication. Additionally, they must give patients instructions for contacting a billing representative who has access to an interpretation service and not take legal action against patients for late or insufficient payment of a medical bill in cases where the facility did not have a written agreement in place specifying a good faith estimate for a medical service, unless they are required by federal or state law to transfer delinquent payments to a federal or state agency (e.g. Department of Treasury, Attorney General) for action.

II. An ASC must achieve, or make considerable or some progress towards achieving, Leapfrog's standard for Informed Consent.

Leapfrog's informed consent standard evaluates ASCs on staff training, the content of their informed consent forms, and their processes for gaining informed consent. ASCs must meet the requirements across all three of these domains and all applicable forms must be written at a 6th grade reading level or lower.

III. An ASC must achieve Leapfrog's standard for reporting on Never Events.

Leapfrog utilizes NQF's list of serious reportable events in asking ASCs to adopt a Never Events policy. Leapfrog's Never Events policy asks ASCs to commit to nine basic acts if a Never Event does occur: apologize to the patient and family, waive all costs related to the event and follow-up care, report the event to an external agency, conduct a root-cause analysis of how and why the event occurred, make a copy of this policy available to patients, interview patients and families to inform them of the root cause analysis, inform patients and families of actions taken by ASCs to prevent similar Never Events in the future, have protocols to provide support for caregivers involved in Never Events, and perform an annual review to ensure compliance with Leapfrog's Never Events Policy for each Never Event that occurred. ASCs that achieve Leapfrog's standard have all nine elements of the policy in place and are demonstrating their commitment to treating patients, purchasers, and payors with respect when a Never Event occurs.

IV. An ASC must show progress in their participation in the NHSN Outpatient Procedure Component (OPC) Module (if applicable).



Leapfrog has partnered with the Centers for Disease Control and Prevention (CDC) to encourage participation in the National Healthcare Safety Network (NHSN), which is the CDC's healthcare-associated infection tracking system. Facilities that meet Leapfrog's standard for reporting are enrolled in the NHSN OPC Module, completed the 2025 Annual Facility Survey, and reported twelve months of surveillance and reporting for all applicable Surgical Site Infection (SSI) measures. For the purposes of the Top ASC Award, Leapfrog measures facilities based on whether they have joined Leapfrog's NHSN group, enrolled in the NHSN OPC Module, and completed the 2025 Annual Facility Survey.

This criterion does not apply to ASCs that did not perform breast surgeries, herniorrhaphy procedures, knee prosthesis procedures, or laminectomies.

- ***In 2027, Leapfrog anticipates that this criterion will change to only include ASCs that either achieve or make considerable progress towards achieving Leapfrog's standard, meaning they have a Monthly Reporting Plan in place for at least 6 months of the reporting period for all applicable Surgical Site Infection Measures.***

V. An ASC must achieve Leapfrog's standard for Hand Hygiene.

Leapfrog's Hand Hygiene standard evaluates ASCs based on five domains: monitoring, feedback, training and education, infrastructure, and culture. ASCs must adhere to the monitoring and feedback domains, as well as any two of the three remaining domains, to achieve Leapfrog's standard. Hand hygiene compliance data must be collected monthly on at least 200 hand hygiene opportunities. Alternatively, ASCs can achieve Leapfrog's standard by collecting hand hygiene compliance data on 100 hand hygiene opportunities a month, if they adhere to all four remaining domains.

VI. An ASC must achieve, or make considerable progress towards achieving, Leapfrog's standard for NQF Safe Practice #2 – Culture Measurement, Feedback, and Intervention.

Leapfrog has aligned NQF Safe Practice #2 – Culture Measurement, Feedback, and Intervention with the National Quality Forum's (NQF) Safe Practices for Better Healthcare: A Consensus Report – Updated 2010.² To meet Leapfrog's standard, ASCs must adhere to the Safe Practice, which include questions regarding awareness, accountability, ability, and action.

This criterion does not apply to ASCs with less than 20 employees.

VII. An ASC must achieve, or make considerable progress towards achieving, Leapfrog's standards for Facility and Surgeon Volume for Total Hip Replacements, Total Knee Replacements, and Bariatric Surgery for Weight Loss (if applicable).

Leapfrog scores ASCs based on whether they met the minimum facility volume standard and whether the ASC's process for privileging surgeons includes meeting or exceeding the minimum annual surgeon volume for total hip replacements, total knee replacements, and bariatric surgery for weight loss.

ASCs must perform a minimum facility volume of 50 surgeries per year for each procedure type, and they must require surgeons to complete at least 20 bariatric surgeries, 25 total hip surgeries, and/or 25 total knee procedures a year to have privileges at the facility.



This criterion does not apply to ASCs that do not perform these procedures.

CMS Public Reporting

VIII. An ASC must achieve, or make considerable progress towards achieving, Leapfrog's standard for avoiding burns, falls, wrong site surgeries, and hospital admissions or transfers.

ASCs achieving Leapfrog's standard for burns, falls, and wrong site surgeries must report data to CMS for this outcome measure and not have any patients that experience a burn, fall, or wrong site surgery. For hospital admissions or transfers they must report data to CMS for this outcome measure and rank in the top quartile of performance among their peers for this measure to meet Leapfrog's standard.

The outcome measures reflected in this criterion are:

- ASC-1: Patient Burn
- ASC-2: Patient Fall
- ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, or Wrong Implant
- ASC-4: All Cause Transfer/Admission

This criterion does not apply to ASCs that are scored as Unable to Calculate or Not Available on these measures.

IX. An ASC must achieve Leapfrog's standard for Patient Experience (OAS CAHPS Survey).

Leapfrog assesses ASCs based on the four domains included in the Outpatient Ambulatory Surgery (OAS) CAHPS Survey: 1) Facilities and Staff, 2) Communication About Your Procedure, 3) Patients' Rating of the Facility, 4) Patients Recommending the Facility. ASCs that achieve Leapfrog's standard are in the top quartile of ASCs and HOPDs that administered the OAS CAHPS Survey based on their Top Box Scores for three out of four or four out of four domains.

This criterion does not apply to ASCs that are scored as Unable to Calculate or Not Available on these measures.

X. An ASC must achieve Leapfrog's standard for the following measures of post-surgical outcomes (if applicable):

- ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy
- ASC-14: Unplanned Anterior Vitrectomy
- ASC-17: Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures
- ASC-18: Hospital Visits after Urology Ambulatory Surgical Center Procedures
- ASC-19: Facility-Level-7-Day Hospital Visits after General Surgery Procedures at Ambulatory Surgical Centers

ASCs achieving Leapfrog's standard for these measures of post-surgical outcomes must report data to CMS for the applicable outcome measure and perform in the top quartile of performance (or, for ASC-14 Unplanned



Anterior Vitrectomy, in the top 50th percentile) among their peers for these measures to meet Leapfrog's standard.

This criterion does not apply to ASCs that did not perform the applicable procedures.

Accreditation Standards

XI. An ASC must have current national accreditation.

ASCs with active accreditation through the Accreditation Association for Ambulatory Health Care (AAAHC) or Joint Commission (JC) are required to upload proof on AAAHC or JC's accreditation to be scored and publicly reported as "Achieved the Standard" (best score) for five patient safety measures:

- Clinicians Certified in Adult Advanced Life Support Always Present
- Use of a Safe Surgery Checklist
- Medication and Allergy Documentation
- Effective Leadership to Prevent Errors
- Identification and Mitigation of Risks and Hazards

This criterion does not apply to ASCs that reported "other" national accreditation in the Profile Section of the Leapfrog ASC Dashboard.

¹ Centers for Disease Control and Prevention. Guideline for hand hygiene in health-care settings. Morbidity and Mortality Weekly Report. 2002;51(RR-16):1-56.

² National Quality Forum. Safe Practices for Better Healthcare: A Consensus Report- Updated. 2010