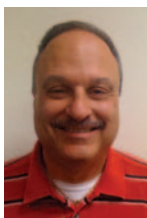




UNDERSTANDING THE CASC CREDENTIAL

Awarded for the first time in 2002, the CASC (Certified Administrator Surgery Center) credential recognizes comprehensive understanding of the diverse skill set and specialized knowledge needed to manage an ASC. Since the certification program was first introduced, more than 500 people have obtained their CASC credential. Many more are already making plans to attempt to earn the credential in the coming year.

WHY IS THE CASC CREDENTIAL VALUABLE, AND HOW DOES IT BENEFIT THOSE WHO HOLD IT AND OTHERS IN THE ASC INDUSTRY?



Immordino

"I noticed that, among the people I respected in the ASC industry, more and more of them were seeking and obtaining the CASC credential," says Charles Immordino, CASC, owner of Ambulatory Surgery Center Consultants, LLC, in Palm City, Florida, and a surveyor for the Accreditation Association for Ambulatory Health Care (AAAHC). "I believed it would be useful to me to join this elite group of administrators."



Bozorgi

"I view the CASC credentialing process as a means of documenting proficiency and, ultimately, promoting excellence in ASC management," says Kenny Bozorgi, MD, CASC, chief operating and information officer for Magna Health Systems in Chicago. "I believed it would be useful to obtain the credential because I'm on site at surgery centers on a weekly basis and review billing, collections, human resources issues and day-

to-day patient care processes. I also oversee the information technology departments.

"Having the CASC credential shows that I've spent time to learn what's happening on a day-to-day basis, not just the 10,000-foot view," he continues. "It allows me to speak to all employees and understand the challenges they face in their daily work. It makes me a better leader and teacher."

As Immordino, an ASC consultant, and Bozorgi, a physician and chief operating officer, illustrate, although most who obtain their CASC credential are ASC administrators, those who earn the credential do not have to be. They do, however, have to have experience in some of the clinical and managerial operations involved in managing an ASC and be able to demonstrate their expertise in five content areas: delivery of patient care, quality management, human resources, financial issues, and regulatory and legal issues.

All who apply for the credential are required to complete an application on which they are asked to describe their educational background and work experience that relates to the role of an ASC administrator. All of that experience is evaluated using a point system. Applicants must accrue a total of 100 points to be considered candidates for the credential. (For more information about the eligibility requirements, see the CASC Candidate Handbook available online at http://www.aboutcasc.org/docs/CASC_Handbook.pdf.)

To earn the credential, applicants who achieve the 100-point total must then sit for a four-hour exam that tests their knowledge in the five content areas identified above. Only those who pass that exam have the right to add CASC to the list of credentials following their name. To retain their certification, CASC recipients must also obtain and report relevant continuing education credits each year.

Preparing for the Exam

Many who have taken the exam say that preparing for it was a valuable experience on its own. According to Bozorgi, "It was the most valuable part of the entire experience. Much of it involved review, but I also learned



For more information about the CASC credential, upcoming exam dates, study resources and application materials, visit www.aboutcasc.org or call the CASC office at 703.836.4871.

BASC Board President Norman Burnette, CASC, congratulates CASC recipient Mary Ellen Danielsen, CASC, at ASCs 2010.

new things. As part of the process, I created a file of key information that I use today, not only for my own reference, but also to educate employees and peers. I also developed a broader view of the skill set necessary to manage ASCs that is difficult to achieve in the midst of day-to-day operations.”

“It forced me to get out of my comfort zone,” says Immordino. “I knew about how to draw up budgets, analyze profit-and-loss statements, assess case costing versus revenue, etc. Preparing for the exam helped me to become a lot more at home with other administrative areas, such as the national personnel guidelines and various financial activities. It also caused me to focus more on providing input on processes and on the way things work.”

“Through the process of preparing for the CASC exam, I was striving to ensure that I would obtain the knowledge and skills my position at my ASC requires to be a competent and effective administrator,” says Mary Craddock, MD, CASC, medical director at the Friendship Ambulatory Surgery Center in Bethesda, Maryland. “The CASC exam allowed me to benchmark my knowledge against that of professionally trained administrators.



Craddock

“The credential has given me confidence in my decisions as an administrator,” she adds. “It has also provided increased insight to my surveys for [the Accreditation Association for Ambulatory Health Care].”

Some who take the CASC exam spend little or no time studying, believing that their on-the-job experience is preparation enough. Others attend the CASC review workshop offered in conjunction with

the Ambulatory Surgery Center Association’s (ASCA) annual meetings each year or listen to a recording of the most recent presentation of that workshop (currently available on ASCA’s web site at www.ascassociation.org/tapes). Still others rely on extensive note cards or resource notebooks they compile themselves, refer to the list of study resources on the CASC web site (www.aboutcasc.org/exam/studyresources.cfm), enlist a “study buddy” who can help support them in those areas they believe they need to study in greater detail and more.



Irwin

Heather Keidel Irwin, CASC, director of client services for Ambulatory Surgery Center Association (ASCA) Supporter Member SourceMedical, in Wallingford, Connecticut, says she prepared for the exam by going to the CASC web site (www.aboutcasc.org) and examining the five content areas on the exam to determine which ones she needed to study most intensely to pass the test. She said that the knowledge she acquired by doing that has helped her better understand the daily challenges involved in running an ASC, which helps her to better support her clients.

Although she has never worked in an ASC, adds Irwin, her years of experience implementing ASC software and training personnel in its use, coupled with her management skills, made her eligible to take the exam last fall. She was awarded the credential in October.

“I’m sure that it will prove useful to me in many ways,” Irwin says about the credential. “I think that the networking opportunities that have opened up to me and the education that I received preparing for the exam have been the most useful aspects so far.”

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CONTRAINDICATIONS: None.

Enhanced Credibility



Craig

CASC credential holders and other ASC professionals say that it is useful in gauging the skills and experience of their professional colleagues, especially those who they work with or meet for the first time. "The credential has definitely created an opportunity for mentoring and common ground among ASC administrators," says Rebecca Craig, CASC, chief executive officer of Harmony Surgery Center in Fort Collins, Colorado. "When I see the CASC credential after someone's name, it shows the level of competency, no matter what their background."



Grundman

Ray Grundman, CASC, president of Raymond Grundman & Associates in New Berlin, Wisconsin, and a member of the task force that created the CASC credentialing program, agrees. "I know that when I talk to a CASC recipient he or she will understand what I'm saying if I'm talking about one of those five [content areas]. It shows that you're on top of your game, and having to obtain continuing education credits shows your commitment to staying current."

Some CASC credential holders say they believe that the establishment of and increasing interest in the credential has enhanced the credibility of the ASC administrator position and the ASC industry as a whole. According to Grundman, the professional testing agency that

helped develop the test reviewed the criteria for hundreds of administrator job positions. "They were amazed at the breadth and depth of required knowledge and experience," he says. "These people were doing several jobs. It's a very complex role. Those of us who work in the ASC industry already knew that, but how much knowledge was required had never really been validated. The CASC exam does that. The exam and the credential indicates how tough the job is and how committed credential holders are to maintaining a current practice. It has elevated ASC management as a distinct field of medical management."



Shelton

"It is important for the industry to have a credential that tests an individual's knowledge about how to effectively manage an ASC," says Brian Shelton, CASC, vice president of operations at Surgical Care Affiliates in Broomfield, Colorado. "We're running complex small health care businesses and this validates the skills of people who do it well."

Added Value in the Marketplace

Craig says she believes employers in the ASC industry are increasingly recognizing CASC as a key indicator of ASC management proficiency and expertise. "Having the credential," she says, "helps employers identify candidates who not only have the education needed for an administrator position, but also the knowledge and experience to be successful."



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Deadline—May 15, 2011

Reports Mailed/Available
Online June 15, 2011

2nd Quarter 2011

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Deadline—August 15, 2011

Reports Mailed/Available
Online September 15, 2011

3rd Quarter 2011

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Deadline—November 15, 2011

Reports Mailed/Available
Online December 15, 2011

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Deadline—February 15, 2012

Reports Mailed/Available
Online March 15, 2012

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Bohlke

Terry Bohlke, CASC, a former group vice president of Nueterra Healthcare and current vice president of operations at National Surgical Hospitals, and Ann Geier, CASC, senior vice president of operations for the Ambulatory Surgery Centers of America (ASCOA) provide examples from within those companies. Referring to the credential as “the gold standard for measuring the aptitude of ASC administrators,” Bohlke says Nueterra formally encourages all of its leaders with operational ASC responsibilities to seek the credential.



Geier

Geier says that ASCOA encourages its employees to obtain professional certifications in many areas and that she expects administrators who have worked at ASCOA for two years to sit for the CASC exam. “My administrators know early on that I expect them to get the CASC credential and keep up with it,” she says. “I want them to learn and stay ahead of the curve.”

Personally, says Geier, she first pursued the credential because she sees herself as a mentor and would not consider asking others to do something she was not willing to do herself. Now, she says, maintaining her CASC credential is valuable because it gives her

credibility and encourages her to read, study and stay up to date on all that’s happening in the industry.

For ASC administrators, earning the CASC credential could lead to higher pay. ASCA’s 2010 Employee Salary & Benefits Survey indicates that, nationally, CASC-certified administrators’ incomes are more than 17 percent higher than those of administrators who have not obtained the credential.

Bozorgi says ASC physicians, too, should obtain the CASC credential. “The CASC credential documents knowledge they’ve accrued over the years outside the realm of patient care and knowledge they’ve gained by studying for the exam. It familiarizes them with terminology and processes the folks who work in ASCs encounter and sets them apart from surgeons who haven’t immersed themselves in the ASC industry.”



Katz

“Most people I deal with have it,” says Stuart Katz, CASC, executive director of the Tucson Orthopaedic Surgery Center in Tucson, Arizona. “For people who want to continue as professionals in this industry, I think the CASC credential will become mandatory in the future, and this is a good thing. It will be one of the criteria that people are looking for when they’re hiring administrators to work at their centers.” **-ASC**



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