

Life Sciences Solutions

Winning in the ASC era

A playbook for life sciences leaders
navigating site-of-care migration



Inside this playbook

- Why national ASC growth stories can mislead strategy
- The five decisions life sciences leaders need to answer now
- The data signals that define market scale, economics, and ownership complexity
- How ownership, specialty mix, and market maturity change opportunity
- What commercial capabilities ASC markets reward
- How to translate provider-market complexity into actionable choices

The ambulatory surgery center (ASC) shift is no longer just a site-of-care trend. It's reshaping demand, economics, ownership dynamics, and commercial decision pathways.

For MedTech, diagnostics, and healthcare services organizations, the strategic challenge isn't whether ASCs matter. It is where to play, how to segment the opportunity, and what commercial changes are required to win.

This playbook is designed to help leadership teams move from broad ASC interest to sharper market choices.



Why this matters now

The migration from inpatient operating rooms to ASCs is already underway—and accelerating. As volume shifts, so do margin structures, buyer influence, purchasing pathways, and where future growth will emerge.

For life sciences organizations, this isn't just a channel story. It changes who buys, how decisions are made, what evidence matters, and where historical hospital-based assumptions begin to fail.

National growth statistics are useful, but they aren't enough. The winners in this transition will be organizations that can separate broad market noise from local, segment-specific opportunity and adapt before the shift is fully visible in historical sales.

The five strategic questions leaders need to answer and why it matters

Where are we truly exposed to ASC migration?

Procedure mix shifts don't affect every portfolio equally. Leaders need visibility into where volume is moving and what that means for demand.

Which ASC customer segments best fit our offer?

Physician-led centers, health system-affiliated ASCs, and corporate-owned operators don't evaluate products the same way.

What needs to change in our commercial model?

Winning may require different deployment, contracting, support, and account prioritization choices than a hospital-centered approach.

Which markets should we prioritize first?

Local variation, payer behavior, ownership mix, and policy context can make a market attractive, mature, or premature.

How should our value proposition change?

Hospital-centric clinical messaging is often insufficient in ASC settings where throughput, standardization and per-case economics are more visible.

ASC market snapshot: The data signals leadership teams should know

Decision	What the data says	Why it matters
Market scale	The U.S. ASC market was estimated at \$45.6B in 2024 and projected to reach \$55.3B by 2029 (+21%).	The channel is large enough to require explicit portfolio and commercial choices.
Footprint and geography	The U.S. had 12,227 ASCs in Q1 2025, including 6,467 Medicare-certified centers; 93% of ASCs were urban in 2023.	Reach is broad, but density and access still vary by market.
Procedure migration	In 2023, 20% of all surgeries were performed in ASCs.	Migration is already material, not a future-only scenario.
Ownership mix	In 2023, 52% of ASCs were physician-only, 22% hospital-physician and 13% corporate-physician.	Buyer pathway, governance, and contracting leverage vary materially.
Facility profile	In Q3 2024, 54% of Medicare-certified ASCs had one to two operating rooms (OR) and the average size was 2.91 ORs.	Small-footprint economics raise the importance of workflow fit and rep efficiency.
Site-of-care economics	In 2024, hospital outpatient procedure cost averaged about \$7,716 per case versus roughly \$3,157 in ASCs.	Lower-cost settings keep payer steerage and reimbursement pressure in place.
Buyer behavior	70% of ASC physicians are primary decision makers or direct influencers, versus 45% in hospitals; 60% would consider a similar device for a 15% discount.	Physician engagement, economic proof, and segmented pricing become more decisive.

Sources: Research and Markets. 2024; ASC Data. Q1 2025, Q3 2024; MedPAC analysis of the CMS Provider of Services file. 2024; ASCA Salary & Benefits Survey. 2023.

These anchor points matter, but they don't reveal which markets are poised to shift next, which ownership models matter most or where share is moving. Answering those questions requires a deeper look at service-line forecasts, local market conditions, provider segmentation and transaction activity to turn broad ASC trends into actionable strategy.

Sg2 turns these trends into market-specific answers



Service-line and procedure forecasts show where outpatient migration is accelerating—and in which markets



Provider-market segmentation distinguishes physician-owned, system-affiliated, and scaled-platform dynamics



Provider research identifies who drives purchasing decisions and what evidence carries the most weight



MarketPulse transaction analytics track where market share is moving as care shifts to the outpatient setting

Why hospital playbooks break in ASC environments

The ASC shift is fundamentally economic. Hospital outpatient procedures average about \$7,716 per case, compared with roughly \$3,157 in ASCs. That gap continues to reinforce payer steerage and leaves ASC operators managing lower reimbursement per case and tighter contribution margin.

The implication goes beyond price. ASC operating margins have historically averaged around 27%, compared with roughly 12% for hospitals, but those margins depend on tightly managed supply cost, staffing, throughput and case mix. In lower-reimbursement settings, even small differences in product cost, inventory burden and turnover efficiency become commercially meaningful.



What changes—and what it means commercially

What changes	Why it matters	Commercial implication
Lower-cost operating model	Efficiency and supply discipline are more visible when centers are built to deliver procedures at lower total cost.	The value story must hold up on economics, not only clinical features.
Lower reimbursement per case	Tighter reimbursement ceilings mean product cost and workflow burden absorb more of each case's economic value.	Commercial messages should show reimbursement-aware ROI and use pricing or contracting that protects ASC margin.
Different ownership structures	Decision authority varies by center and platform.	Engagement strategy must match the real buying pathway.
Lean staffing and faster throughput	Workflow friction becomes easier to see and harder to absorb.	Operational fit, training, and simplicity matter more.
Greater price sensitivity	Operators actively protect contribution margin in lower-reimbursement settings.	Pricing must be defensible, segmented, and easy for local decision makers to justify.

Why national ASC growth stories can mislead strategy

ASC growth doesn't unfold uniformly. In some hospital service areas, fewer than 10% of relevant procedures occur in ASCs; in others, more than 40% do. The pace of the shift also varies by specialty. Ophthalmology and gastroenterology are already well advanced in the move to ASCs, while orthopedics is gaining momentum as more procedures become viable in outpatient settings. Cardiovascular is shifting as well, but more slowly due to greater clinical and operational complexity.

Ownership matters, too. Physician-owned centers, system-affiliated ASCs, and investor-backed multisite operators create different purchasing pathways, standardization expectations, and contracting leverage. Treating all ASC demand as interchangeable can lead to poor targeting and diluted investment.

What most ASC analyses miss



Migration is local, not uniform.



Mature ASC markets and emerging ASC markets require different deployment choices.



Procedure curves differ by specialty and market conditions.



Ownership structure shapes how products are evaluated and bought.



Where to play: a framework for ASC opportunity

The most useful ASC strategy isn't broad enthusiasm. It's selective focus. Leaders should evaluate opportunity through three lenses and prioritize where those lenses align.

Lens	Key questions
Procedure exposure	Which parts of our portfolio are most exposed to outpatient migration? Where are we dependent on hospital-based reimbursement or workflows?
Customer fit	Which ownership environments match our strengths: decentralized physician decision-making, health system governance, or scaled platform relationships?
Market maturity	Are we entering a mature, high-competition ASC market, or an emerging market with a stronger forward trajectory and more whitespace?

A simple prioritization logic

Markets that merit the most attention typically combine three conditions: meaningful procedure migration, strong strategic fit with the portfolio, and customer segments whose decision pathways match the commercial model. Large markets without those conditions often consume resources without producing durable advantage.

70%

of ASC physicians are primary decision makers or direct purchasing influencers, versus 45% in hospitals.

60%

would consider switching to a similar device for a 15% discount.

How to win: the commercial capabilities ASC markets reward

Winning in ASC settings isn't simply about price. It's about proving economically defensible value in an environment where cost, workflow, and purchasing discipline are more visible.

Buying behavior also shifts—and not just in who decides, but in what they care about. In hospitals, physicians influence purchasing but rarely absorb the financial consequences. In ASCs, where physicians are often owners or ownership partners, that changes. The same physician who evaluated

a product on clinical merit now watches per-case cost and contribution margin too.

The data reflects this: 70% of ASC physicians are primary decision makers or direct purchasing influencers, versus 45% in hospitals, and 60% would consider switching to a similar device for a 15% discount. That combination raises the premium on physician engagement, reimbursement clarity, and defensible pricing.

Winning in that environment means getting three things right

Economic value	Operational fit	Channel alignment
Demonstrate per-case impact, support reimbursement clarity, and make the financial case easy for operators and physicians to understand.	Reduce workflow friction, simplify inventory and standardization, and support throughput in lean environments.	Match engagement, support, and contracting to the center's ownership model and real decision pathway.

Case in point: from broad ASC interest to focused strategy



Client challenge

A global surgical technology company understood that ASCs were becoming strategically important, but it lacked clarity on where its real opportunity existed and whether its hospital-based commercial model would translate.



What the client learned

The apparent endoscopy-related ASC market looked large, but less than 10% aligned with the client's portfolio at the time. The research also showed that physician preference remained a leading driver even where more centralized governance had been expected.



What Vizient did

Vizient combined primary and secondary research to size realistic opportunity, segment the market by ownership and buying dynamics, and test assumptions about how product decisions were made across ASC environments.



Strategic impact

The company shifted from broad ASC interest to a more focused plan: target the right segments, align to physician-led decision pathways, and prioritize solutions that fit ASC financial and operational realities.



Looking beyond today's highest-volume markets

A national trend may show that outpatient knee replacement is growing—or even that ASCs now account for roughly 20% of commercial knee replacement volume—but that alone doesn't tell a commercial team where to focus. Some markets are already highly penetrated and increasingly competitive. Others remain earlier in adoption but have conditions that signal the next wave of migration.

That's why market timing matters. The right target isn't always the market with the highest current ASC share. It may be the market with the strongest forward trajectory, the most favorable ownership mix, and the best fit for the portfolio and commercial model. This is where local market forecasts and market share data can reveal whether volume leadership and competitive momentum are aligned.

ASC readiness checklist for commercial and strategy leaders

Focus area	Questions to answer	What strong readiness looks like
Market focus	• Have we identified which markets are accelerating versus those that are already mature? • Do we understand where our portfolio has real fit?	Resource allocation reflects forward trajectory, not just historical revenue.
Value proposition	• Can we show measurable operational or economic value in ASC settings? • Does our message reflect workflow and reimbursement realities?	The offer is relevant to both physician priorities and operator economics.
Commercial model	• Are we aligned to real buyer pathways and ownership structures? • Do pricing, support, and deployment fit lower-cost settings?	Field teams can engage effectively across physician-led, system-affiliated, and platform environments.

What leaders should do next

ASC growth isn't an extension of hospital strategy. Economics, decision structures, market maturity, and competitive intensity differ—and the pace of change varies by market and specialty.

The organizations best positioned to win will map portfolio exposure, identify where migration is accelerating, segment opportunity by ownership and decision pathway, and align commercial models to the environments where care is moving.

Get in touch: lifesciences@vizientinc.com

**Ready to move from ASC trends to strategy?
Start with Vizient Life Sciences.**

Vizient helps life sciences organizations pinpoint where site-of-care migration creates the greatest opportunity—or risk—for their specific portfolio, and what that means for where to play and how to win.

Here's where we typically start:



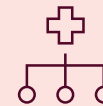
Portfolio exposure assessment

Understand which parts of your portfolio are most affected by outpatient migration and where the stakes are highest



Growth forecasts

See where ASC volume is accelerating by specialty and local market



Market prioritization and segmentation

Identify where opportunity is strongest across ownership models and align targeting to how decisions are made



Commercial readiness and competitive landscape

Assess where your go-to-market model needs to shift and how you stack up against competitors moving into ASC markets

About Vizient

Vizient, Inc. provides solutions and services that improve the delivery of high-value care by aligning cost, quality and market performance for more than half of the nation's healthcare providers. Vizient provides expertise, analytics, advisory services, and a contract portfolio representing more than \$130 billion in annual member purchasing volume, to improve patient outcomes and lower costs.

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