



Georgia Trauma Care
NETWORK COMMISSION

Georgia Trauma Center Funding
Readiness and Uncompensated Care
Past, Present, and Future

Dennis Ashley, MD Chairperson
Georgia Trauma Care Network Commission

16 December 2009

Senate Bill 60



- Passed in 2007
- Established the *Georgia Trauma Care Network Commission*



- Funds Appropriated in FY 2008
- Charged to:
 - Distribute the Fund fairly and effectively to EMS, trauma centers, and trauma physicians
 - Develop a statewide trauma system
 - Provide accountability for trauma system funding

For the first year, the Commission's overarching goal:
Stabilize and Strengthen existing infrastructure

Readiness Costs: Determination



- Medical staff payments for trauma call
- 24 hour OR staffing
- Higher staffing levels for lab/diagnostic services
- Ground or air transportation
- Support services
- Injury prevention
- Training of nurses and physicians
- Administrative infrastructure of trauma programs
- Physician extenders
- Verification process
- Trauma specific equipment
- Other trauma center costs

Uncompensated Care Costs Determination Methodology



A survey of Georgia Level I & II Trauma Centers was also conducted to determine the volume, severity and costs of treating uninsured patients who cannot pay their bills.

National Trauma Norms Used To Estimate Costs
To develop a fair and consistent approach to estimating costs, national trauma center patient treatment cost norms by injury severity were used, for both community and academic hospitals.

These norms were developed over the past decade by the National Foundation for Trauma Care and its predecessors and have been previously used for trauma care economic analysis in Texas, Arizona, New Mexico, South Carolina, Illinois and Oklahoma

An Example In **Red**
Trauma hospital B2's 90 ISS 0-8 self pay trauma registry patients are multiplied times the academic cost norm of \$6,373 to arrive at \$573,576. This is repeated for other ISS categories to arrive at the total of \$4,098,183. This is then divided by total volume of 242 to arrive at an average expected cost of treatment of \$16,935 for hospital B2's self pay trauma patients.

Patient Treatment Cost Norms		
ISS	Community	Academic
0-8	\$5,267	\$6,373
9-15	\$10,428	\$12,618
16-24	\$19,626	\$23,747
>24	\$33,945	\$41,073

ISS	B2 Vol	X Academic Norm Cost	= Total
0-8	90	\$6,373	\$573,576
9-15	45	\$12,618	\$567,805
16-24	83	\$23,747	\$1,971,039
>24	24	\$41,073	\$985,763
Totals	242	\$16,935	\$4,098,183

Total Trauma Fund Distribution FY 2008/2009



Trauma Center Allocation	Amount	% of Total
Trauma Center Readiness Costs	\$ 17,888,539	30.4%
Capital Grants for LI & LII Trauma Centers	\$ 4,148,602	7.0%
Level IV Trauma Center Costs (2)	\$ 200,000	0.3%
Uncompensated Care Costs	\$ 17,888,539	30.4%
Total Trauma Center Allocation	\$ 40,125,680	68.1%
Trauma Physician Allocation		
25% of Trauma Center Readiness Costs	\$ 5,962,846	10.1%
25% of Trauma Center Uncompensated care	\$ 5,962,846	10.1%
Total Physician Allocation	\$ 11,925,693	20.2%
EMS/Pre-Hospital Allocation		
EMS Competitive Grant Program	\$ 4,000,000	6.8%
EMS Uncompensated Care	\$ 1,479,945	2.5%
GPS & Automatic Vehicle Locator System	\$ 996,452	1.7%
Total EMS/Prehospital Allocation	\$ 6,476,397	11.0%
Oversight & System Development		
Trauma Commission/System Plan & Dev	\$ 375,000	0.6%
Total Oversight/Development Allocation	\$ 375,000	0.6%
TOTAL 2008-09 GEORGIA TRAUMA TRUST FUND	\$ 58,902,769	100.0%

FY 2010 Funding



- \$ 23,000,00 allocated by legislature for FY 2010
 - Less 5% due to Projected Revenue Short Falls
- \$ 21,850,00 Commission Budget for FY 2010
- Super Speeder Law



Level I/II Trauma Center Funding FY 2010



Georgia Trauma Care
NETWORK COMMISSION

Trauma Hospital	Readiness Payment	Potential Performance Based Payments	Total Readiness Payments	Uninsured Payment	Total to each Center	%
Archbold	\$ 427,443	\$ 48,535	\$ 475,978	\$ 89,395	\$ 565,373	4.0%
Atlanta	\$ 427,443	\$ 48,535	\$ 475,978	\$ 540,964	\$ 1,016,942	7.2%
Columbus	\$ 427,443	\$ 48,535	\$ 475,978	\$ 81,566	\$ 557,544	3.9%
Floyd	\$ 427,443	\$ 48,535	\$ 475,978	\$ 58,058	\$ 534,036	3.8%
Gwinnett	\$ 427,443	\$ 48,535	\$ 475,978	\$ 363,981	\$ 839,959	5.9%
Hamilton	\$ 427,443	\$ 48,535	\$ 475,978	\$ 26,472	\$ 502,450	3.5%
North Fulton	\$ 427,443	\$ 48,535	\$ 475,978	\$ 136,137	\$ 612,115	4.3%
Egleston	\$ 427,443	\$ 48,535	\$ 475,978	\$ 41,040	\$ 517,018	3.7%
Scottish Rite	\$ 427,443	\$ 48,535	\$ 475,978	\$ 39,836	\$ 515,814	3.6%
Level II Totals	\$ 3,846,989	\$ 436,814	\$ 4,283,803	\$ 1,377,477	\$ 5,661,249	40.0%
Grady	\$ 712,405	\$ 80,892	\$ 793,297	\$ 3,416,757	\$ 4,210,054	29.7%
MCCG	\$ 712,405	\$ 80,892	\$ 793,297	\$ 333,074	\$ 1,126,371	8.0%
MCG	\$ 712,405	\$ 80,892	\$ 793,297	\$ 580,031	\$ 1,373,328	9.7%
Memorial Health	\$ 712,405	\$ 80,892	\$ 793,297	\$ 989,301	\$ 1,728,598	12.6%
Level I Totals	\$ 2,849,621	\$ 323,566	\$ 3,173,187	\$ 5,319,163	\$ 8,492,351	60.0%
Total LI/LII	\$ 6,696,610	\$ 760,380	\$ 7,456,990	\$ 6,696,610	\$ 14,153,600	100 %

Trauma Physician Funding FY 2010



Hospital/Physician Fund Division	Hospital	Physician	Total
Trauma Center Readiness Costs %	75.0%	25.0%	100.0%
Amount	\$ 5,592,722	\$ 1,864,248	\$ 7,456,990
Uncompensated Care Costs %	75.0%	25.0%	100.0%
Amount	\$ 5,022,458	\$ 1,674,153	\$ 6,696,610
Total	\$ 10,615,200	\$ 3,538,400	\$ 14,153,600

Total Trauma Fund Distribution FY 2010



Georgia Trauma Care
NETWORK COMMISSION

Hospital Allocation	Amount	% of Total
Trauma Center Readiness Costs	\$ 7,456,990	34.1 %
Trauma Center Performance Based Payments	\$ 760,380	3.5 %
New Trauma Center Startup Grants	\$ 1,000,000	4.6 %
Level IV Trauma Center Costs (2)	\$ 54,000	0.2 %
Uncompensated Care Costs	\$ 6,696,610	30.6 %
Total Trauma Center Allocation	\$ 15,967,980	73.0 %
Trauma Physician Allocation		
25% of Trauma Center Readiness Costs	\$ 1,864,248	8.5 %
25% of Trauma Center Uncompensated care	\$ 1,674,153	7.6 %
Total Physician Allocation	\$ 3,538,401	16.1 %
EMS Allocation		
EMS Vehicle Replacement Grant Program	\$ 2,125,000	9.7 %
EMS Uncompensated Care	\$ 1,000,000	4.6 %
First Responder Training	\$ 338,450	1.5 %
Trauma Related Equipment	\$ 338,450	1.5 %
Total EMS Allocation	\$ 3,801,900	17.4%
State Infrastructure & Trauma System Development		
System Development and Operations	\$ 2,185,000	10.0 %
OEMS/T Allocation per SB 60	\$ 655,500	3.0 %
Total Infrastructure & System Development Allocation	\$ 2,840,500	13.0 %
FY 2010 Available Budget Less 5% Projected Revenue Shortfall	\$ 21,850,000	100.0%

Performance Based Payments Program



Developed to encourage: Trauma Center Performance Improvement

- First Year (2010) 5% of Readiness funding tied to Performance Based Payments Program (\$ 760,380)
- Two Criteria for first-year FY 2010:
 - Submission of required data and reports to OEMS & Trauma
 - Participation in Trauma Commission–sponsored Readiness Cost Determination Activities (webinar, face-to-face meeting, cost survey completion per timeline)
- In ensuing years, additional criteria with greater percentage of funding tied to Performance

New Trauma Center Startup Grants



- Application Process to begin January 2010
- Grant Awards to be determined by Trauma Commission
- Geographic location of hospital, level of designation sought will be considered in determining award amounts
- Award Amount Guidelines:
 - #2 \$300K “grants” to hospitals “COMMITTING” to designation as a Level II trauma center
 - #2 \$100K “grants” to hospitals “COMMITTING” to designation as a Level III trauma center
 - #4 \$50K “grants” to hospitals “COMMITTING” to designation as a Level IV trauma center

Commission Operations and System Development Projects



- Administrator and Commission Operations
- Georgia Trauma Communications Center
- Pilot Project for Trauma System Regionalization
- Web-based Trauma Registry Capabilities
- Trauma TeleHealth: Georgia Partnership for Telehealth
- Bishop+Associates Financial Consultants
- American Association of Trauma Centers
- Center for Health Organization Transformation (systems assessments and process improvement plans)
- Broselow Pediatric Dosing and Care System (internet based)

State Program Infrastructure



- Senate Bill 60: 3% allocation to OEMS/T
 - \$ 655.500
- Funding of key positions within OEMS/T
 - State EMS and Trauma Program Medical Director
 - Two EMS Region Program Directors
 - EMS Region 5 Trauma Nurse Coordinator



Georgia Trauma Care
NETWORK COMMISSION

Trauma Center Readiness Costs

READINESS COSTS



Non Patient Care Costs Required By A Hospital's Status As A Trauma Center.

The Hospital Would Not Have To Pay Them If It Were Not A Trauma Center

Costs Required By Trauma Regulations

FLORIDA EXPERIENCE



- **2002 – Costs of Trauma Center Readiness Study**
- **Costs Assessed:**
 - **Physician On-Call Coverage**
 - \$337,900 - \$4,208,051 Range
 - **Re-verification**
 - \$88,000 - \$456,258 Range
 - **Outreach and Prevention**
 - \$2,000 - \$215,766 Range
 - **Other Extraordinary, Non-Chargeable Costs**
 - No guidance, complete discretion
 - \$17,440 - \$3,925,448 Range
- **10 of 20 Florida Trauma Centers Participated and Provided At Least Partial Information**
- **Median Readiness Cost Per Center \$2.7 Million**

VIRGINIA EXPERIENCE



- **2004 –Use And Financing Of Trauma Centers In Virginia**
- **Costs Assessed:**
 - **Physician On-Call Coverage - \$9.1 Million**
 - **Administrative - \$3.9 Million**
 - **24 Hour OR Availability - \$2.9 Million**
 - **Higher Staffing Levels \$2.6 Million**
 - **Air Transportation - \$1.4 Million**
 - **Support Services - \$0.8 Million**
 - **Research - \$0.7 Million**
 - **All Other - \$0.6 Million**
- **Virginia Had 13 Trauma Centers In 2004**
- **Total Readiness Costs - \$23.4 Million**

GEORGIA EXPERIENCE



Georgia Trauma Care
NETWORK COMMISSION

2007 Readiness Costs	Level I TC	GA Avg.	Level II	GA Avg.	LI/II Total
Total Medical Staff	\$12,922,170	\$3,230,543	\$12,173,618	\$1,352,624	\$25,095,788
24 Hour OR Staffing	\$2,530,000	\$632,5000	\$3,279,800	\$364,422	\$5,809,800
Higher Staffing Levels	\$510,000	\$127,500	\$619,393	\$68,821	\$1,129,393
Transportation	\$1,756,000	\$439,000	\$250,000	\$27,778	\$2,006,000
Support Services	\$657,495	\$164,374	\$464,564	\$51,618	\$1,122,059
Injury Prevention	\$78,500	\$19,625	\$1,074,770	\$119,419	\$1,153,270
Training	\$220,000	\$55,000	\$488,456	\$54,273	\$708,456
Administration	\$2,400,000	\$600,000	\$3,627,949	\$403,105	\$6,027,949
Physician Extenders	\$737,000	\$184,250	\$121,744	\$13,527	\$858,744
Verification Process	\$3,8000	\$950	\$21,250	\$2,361	\$25,050
Trauma Equip	\$50,000	\$12,500	\$354,782	\$39,420	\$404,782
Other Costs*	Included Above		1,943,149\$	\$215,905	\$1,943,149
Total	\$21,864,965	\$5,466,242	\$24,419,475	\$2,713,275	\$46,284,440



Georgia Trauma Care
NETWORK COMMISSION

Trauma Center
Readiness Costs
Determination Criteria



Subcommittee



Members:

Dennis Ashley, MD, FACS

Kelli Vaughn, MSN, RN

Richard Bias, FACHE

Regina Medeiros, DNP, MHSA, RN

Debra Kitchens, RN

Renee Morgan, EMT-P

Jim Pettyjohn, Commission Administrator

Greg Bishop, Consultant / Facilitator

Definitions



Existing Trauma Center Readiness Cost

The cost incurred by Georgia licensed hospitals to maintain essential infrastructure, capacity and capabilities to provide the necessary and required services and program oversight at a specific designation level.

Trauma Center Start-up Cost

The cost incurred by Georgia licensed hospitals to prepare for and create the essential infrastructure, capacity and capabilities to provide the necessary and required services and program oversight at a specific designation level.

Goal



To provide a rigorous and transparent methodology to measure the financial requirements for starting and maintaining a state-designated trauma center

Subcommittee Approach



- PAST
 - Bishop + Associates Survey of Georgia trauma centers and National cost norms
- PRESENT
 - Webinar and summit
 - Consensus on readiness costs criteria and definitions
 - State of Georgia Survey Tool
- FUTURE
 - Continuous evaluation and improvement to best determine cost for trauma centers

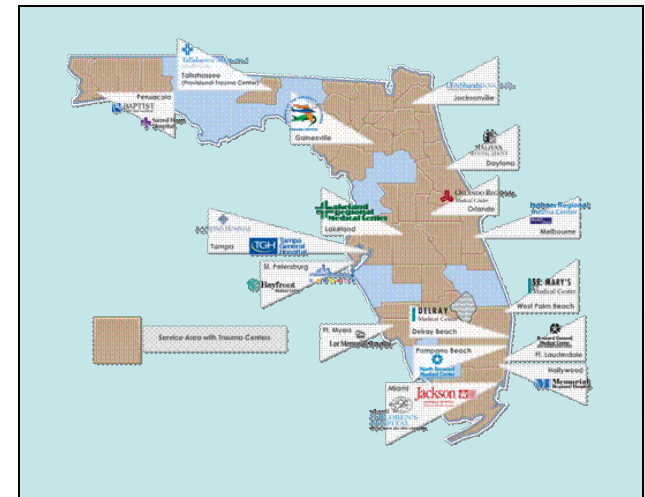


Subcommittee Approach



Georgia Trauma Care
NETWORK COMMISSION

- American College of Surgeons
 - Resource for Optimal Care of the Injured Patient (2006)
- The Cost of Trauma Center Readiness
 - Final Report to the Florida Department of Health
- Bishop + Associates



Subcommittee Approach



- First Time Effort
- Three Key Components
 - Administrative
 - Clinical
 - Education and Outreach
- Separated by Designation Level



Subcommittee Timeline



- Expectations
 - Provide working definition of readiness inclusion criteria
 - Evaluate criteria to determine feasibility of use
- Summit
 - Develop a mutually agreed upon framework to utilize in determining trauma center readiness cost.



Subcommittee Timeline



- Summit
 - Develop a final survey tool with agreed upon criteria

- Survey Tool
 - Distribute to centers
 - Timeline for response

- Bishop + Associates
 - Compile report within two weeks
 - Present preliminary finding at February commission meeting



Questions?



Georgia Trauma Care
NETWORK COMMISSION



Administrative Costs



- Senior Administrator
 - Specific to time spent on trauma
- Salaries
 - Trauma Program Manager
 - Clinical Nursing
 - Outreach Coordinator
 - Discharge Planning
 - Research and Performance Improvement
 - Trauma Registrar
 - Secretarial Staff



Administrative Costs



- Salaries
 - Trauma Medical Director
 - ED Medical Director – percentage of time
 - ICU Surgical Director – percentage of time
 - Orthopedic Liaison
 - Neurosurgical Liaison
- Registry Hardware and Software



Physician Compensation:

- Trauma
- Orthopedics
- Neurosurgery
- Anesthesia
- Hand
- Microvascular
- Cardiac
- OB/GYN
- Ophthalmic
- Oral/Maxillofacial
- ENT/Plastics
- Critical Care
Medicine
- Radiology
- Thoracic

Specialties accepted by the American College of Surgeons

Clinical Costs



Physician Compensation

- Call pay
- Stipends
- Employed Physicians



Clinical Costs



Surgical Resident Compensation

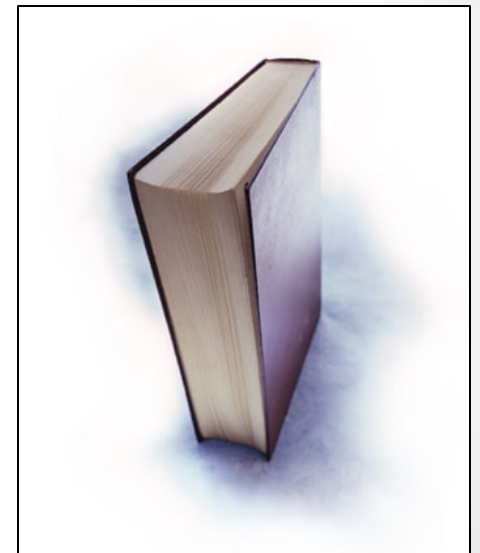
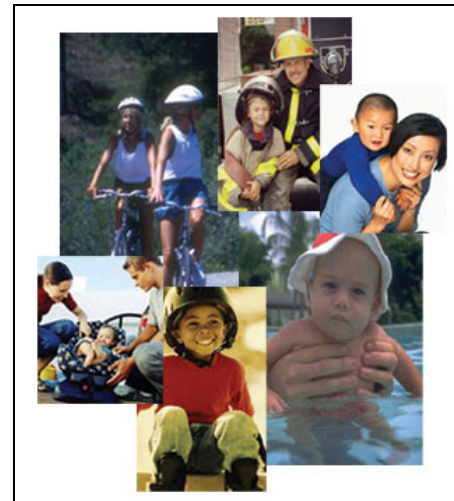
- Proportion of salary for residents based on time spent in trauma rotation



Education & Outreach



- Courses, training and supplies
 - Injury Prevention
 - Community Outreach
 - Professional Outreach
 - Outlying Hospital Education



Education & Outreach



- 16 hours of Trauma CME
 - Trauma Medical Director
 - Trauma Program Manager
 - ED Trauma Liaison
 - Neurosurgical Liaison
 - Orthopedic Liaison



Education & Outreach



- Hospital Staff Education
 - Emergency Department
 - Intensive Care Units
 - Surgery



Next Steps



- Expectation is to consider how you would best answer these for your facility
 - Bring answers to the summit
- Summit
 - Centers grouped by level, be prepared to negotiate these answers and determine a standardized definition for each criteria
- Bishop + Associates
 - Will compile the survey tool and results of the survey
- Final report – March Commission meeting

Questions ?

