

MINUTES
Georgia Trauma Care Network Commission

Tuesday, 09 June 2008

DCH Board Room, 5th Floor,
DHR Building, 2 Peachtree Street
Atlanta, Georgia

Members Present	Members Absent
Dr. Dennis Ashley, Linda Cole Dr. Leon Haley Ben Hinson Dr. Rhonda Meadows Bill Moore Kurt Stuenkel Kelli Vaughn Others documented as present: Dr. Pat O’Neal Renee Morgan Lynn Vellinga	Dr. Joe Sam Robinson

Chairman, Dr. Dennis Ashley, called the meeting to order at 1020.

Dr. Ashley asked the subcommittee chairs to give reports.

Dr. Joe Sam Robinson gave the readiness subcommittee report using PowerPoint presentation (attached). Points made:

- The Commission is the servant of the people and the legislature
- Goal for this year is to basically stabilize and preserve the existing trauma system
- Allocate money to trauma centers and physicians
- Funding targeted readiness and preparedness costs for Level I and II trauma centers
- Used national experts to determine “costs” and funding formulas and using data from 2006
- \$20 million for Level Is and \$23 million for Level IIs
- Recommended relationship of funding for readiness to uncompensated care be 50/50
- Level IV center to receive \$100K each
- Establish capital equipment grants for trauma centers

These meeting minutes were assembled by Jim Pettyjohn, 706.398.0842, jim@lacueva.com from transcriptions (26729 meeting 060908) submitted to Georgia Department of Human Resources by Deborah Longoria, CCR-B-1557, RPR.

Dr. Leon Haley gave the uncompensated care subcommittee report continuing to use same PowerPoint presentation (attached.) Points made:

- Subcommittee has met regularly
- Surveyed all state Level Is and Level IIs to assess each centers trauma volume, severity, and costs of treating the uninsured patients; those who actually cannot pay their bill.
- Used data for the National Foundation for Trauma Care data for national trauma center treatment cost norms by injury or severity from both community and academic physicians
- Factored in Injury Severity Scoring
- Looked at trauma registry of total number of self-pay patients
- Made the decision with legal counsel that patients who paid less than 10% of their bill were considered self-pay
- Hospital total uncompensated care \$35,777,078 and physician portion \$11,925,693
- Contract language with hospitals from DHR is currently being worked on
 - Trauma centers must administer physician funds at no cost to the Commission
 - 25% of funds must be allocated for readiness, which will be paid to eligible physicians providing trauma-related services to patients receiving services at a trauma center
 - Eligible physicians to participate in uncompensated care funding: emergency physicians, trauma surgeons, neurosurgeons, orthopedic and hand surgeons, plastics/maxillofacial surgeons, anesthesiologists and radiologists

Ben Hinson gave the EMS and prehospital report again using PowerPoint presentation (attached.) Points made:

- EMS uncompensated care- only time and EMS service can be paid for uncompensated care in the trauma fund program is for patients who are on a trauma registry, thus are transported to a trauma center.
 - Medical College of Georgia has agreed to handle the uncompensated care payments for all EMS services in Georgia at no cost
 - Used 2007 registry data
 - Determined \$1,479,945 to be available for EMS as uncompensated care reimbursement
- GPS and Automatic Vehicle Locator (AVL) system- \$996,452 for first phase of this system development and will go to Georgia Tech Research Institute (GTRI)
- EMS competitive grant program- funded at \$4 million
 - Replace some ambulances across the state and purchase trauma-related equipment
 - Competitive grant program to be managed by GEMA
- Total funding available to EMS is \$6,476,397

Dr. Ashley summed up the totals:

- Trauma center allocation: \$40,125,680
- Trauma physician allocation: \$11,925,693
- EMS/Prehospital allocation: \$6,476,397

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- Trauma Commission Administrative Budget: \$375,000

Dr. Medows made the following motion:

To approve the trauma funding formulas and methodology developed and presented today by the uncompensated care and readiness committees. The funding formulas and methodology direct the distribution of the fiscal year 2008 trauma funds as follows:

- No. 1: For trauma center hospitals, are acknowledged. For Level I and II trauma hospital funding is to be 17.8 million.
- No. 2: Level IV trauma hospital readiness is to be funded 200,000.
- No. 3: Uncompensated care funding for the trauma centers is to be 17.8 million to be divided amongst the trauma centers based on a formula using national trauma cost norms, the ISS scores, and the volume of trauma patients listed on the DHR trauma patient registry.
- No. 4: Capital expenditure competitive grants for Level I and Level II trauma centers with criteria to focus on need. The total trauma funding for trauma hospitals is \$40 million.

Next segment, for trauma physicians, i.e., eligible physician specialties as defined by the committee, trauma funding will be distributed via the DHR contract with the 15 trauma center hospitals. The amount of the trauma funds to be distributed to physicians are as follows:

- 25 percent of the readiness funds, which constitutes \$5.9 million; and 25 percent of the uncompensated care funds, which come to \$5.9 million. The total trauma funding allocation for trauma physicians is \$11.9 million.
- EMS funding is to include the following, which will be distributed to the EMS providers via a contract with MCG and DHR. This is to include a competitive grant for EMS providers of \$4 million; uncompensated care funding for \$1.49 million; and EMS GPS and vehicle locator technology for 911 ambulances statewide for a funding amount of \$996,000. Total trauma funding for EMS is \$6.47 million.
- And the last segment is the administrative budget as described by our Chair for the amount of \$375,000. This is to cover the cost of the administrative needs of this commission, any research needed to develop our statewide trauma system, and consulting fees.

Dr. Haley seconded the motion, and the motioned passed unanimously.

Mr. Stuenkel made the following motion:

“Effective June the 9th, 2008, by the resolution that's before you (documented here as exact text of motion), that the Georgia Trauma Care Network Commission authorizes the Commissioner of the Department of Human Resources as the Georgia Trauma Care Network Commission's duly appointed agent to take such action, including the execution of any necessary documents, for and on behalf of the Georgia Trauma Care Network Commission and to distribute pursuant to contracts, obligate or otherwise lawfully expend those funds appropriated to the Department of Human Resources in the Fiscal Year 2008 Supplemental Budget on behalf of the Georgia Trauma Care Network Commission for the purpose of engaging consultants to conduct an analysis of the need for additional surgical subspecialties and physician extenders in the trauma system, to also study the recruitment of additional trauma centers, and to design regional transfer center programs to ensure trauma

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coverage through the separate regions of the state.”

Dr. Haley made the following motion:

“I hereby move that effective June 9th, 2008, by the resolution before you, (documented here as exact text of motion) which you should have, that the Georgia Trauma Care Network Commission authorizes the Commissioner of the Department of Human Resources as the Georgia Trauma Care Network Commission's duly appointed agent to take such action, including the execution of necessary documents, for and on behalf of the Georgia Trauma Care Network Commission, to distribute pursuant to contracts, obligate, or otherwise lawfully expend those funds appropriated to the Department of Human Resources in the Fiscal Year 2008 Supplemental Budget on behalf of the Georgia Trauma Care Network Commission for the purposes of facilitating the allocation of such funds to the Georgia trauma centers that have provided uncompensated services or readiness services, this day, June 9th, 2008.”

Mr. Hinson made the following motion:

“Mr. Chairman, I move that effective June 9, 2008, by the resolution before you (documented here as exact text of motion), the Georgia Trauma Care Network Commission authorizes the Commissioner of the Department of Human Resources as the Georgia Trauma Care Network Commission's duly appointed agent to take such action, including the execution of any necessary documents, for and on behalf of the Georgia Trauma Care Network Commission, to distribute pursuant to contracts, obligate, or otherwise lawfully expend those funds appropriated to the Department of Human Resources in the Fiscal Year 2008 Supplemental Budget on behalf of the Georgia Trauma Care Network Commission for the purposes of engaging MCG Health Incorporated to assist in the distribution of funds to Emergency Medical Services providing uncompensated trauma services, this 9th day of June 2008.”

Dr. Robinson made the following motion:

“Mr. Chairman, I'd like to hereby move that effective June 9th, 2008, by the resolution before you (documented here as exact text of motion), the Georgia Trauma Care Network Commission authorizes the Commissioner of the Department of Human Resources as the Georgia Trauma Care Network Commission's duly appointed agent to take such action, including the execution of any necessary documents, for and on behalf of the Georgia Trauma Care Network Commission, to distribute pursuant to contracts, obligate, or otherwise lawfully expend these funds appropriated to the Department of Human Resources in the Fiscal Year 2008 Supplemental Budget on behalf of the Georgia Trauma Care Network Commission for the purposes of engaging the American College of Surgeons to undertake an assessment of the current statewide trauma care system.”

Motions seconded by Ms. Vaughn and Mr. Moore. Discussion ensued. All funds must be obligated by 30 June 2009. Motions passed unanimously.

Meeting concluded at 1115.

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