

PENNSYLVANIA TRAUMA SYSTEMS STABILIZATION ACT
Annual Report
Fiscal Year 2014-2015

PURPOSE AND DESCRIPTION

Act 15 of 2004, “The Pennsylvania Trauma Systems Stabilization Act” (Act 15), established an annual Disproportionate Share Hospital (DSH) payment to Pennsylvania hospitals accredited by the Pennsylvania Trauma Systems Foundation (PTSF) as Level I, Level II, or Level III Trauma Centers (Trauma Payment). Act 15 also established qualification criteria for Level III Trauma Centers and provided a funding distribution methodology for the Trauma Payment.

Act 84 of 2010, (Act 84), reestablished the Pennsylvania Trauma Systems Stabilization Act under the Human Services Code (formerly the Public Welfare Code). Act 84 revised the definition of “Trauma Center” to include certain out-of-state hospitals with trauma centers that provide services to Pennsylvania Medical Assistance (MA) beneficiaries, and to provide up to four years of funding to hospitals pursuing Level III accreditation. Prior to disbursement, Act 84 requires a commitment from qualified trauma centers to use the Trauma Payment funds on the development and provision of trauma services. Each Trauma Center receiving Trauma Payment funds is required to provide the Department of Human Services (DHS) with a report accounting for Trauma Payment funds expenditures and detailing how the Trauma Payment funds have improved access to trauma care for Pennsylvania residents. Act 84 did not change the distribution methodology set forth in Act 15.

BENEFIT TO THE COMMONWEALTH

The Trauma Payment benefits Pennsylvania citizens by improving access to readily available and coordinated trauma care. The direct beneficiaries are Pennsylvania hospitals that have received, or are seeking, accreditation as Level I, Level II, or Level III Trauma Centers.

Hospitals report that the Trauma Payment funding enables them to provide the specialized care required for traumatically injured patients. Trauma surgeons, neurosurgeons, orthopedic surgeons, oral/maxillofacial and plastic surgeons, and other physician specialists and emergency room personnel are essential to providing optimal outcomes for patients.

In Fiscal Year (FY) 2014-2015, hospitals identified the following areas where funding has improved access to, or enhanced the quality of, trauma care for injured patients:

- Establishing training programs for surgeons, nurses and residents, including courses in Advanced Surgical Skills for Exposure in Trauma and Fundamentals

of Critical Care Support, continuing education, participation in State/National Trauma committees, The American College of Surgeons Trauma Quality Improvement Program, monthly trauma symposiums, and annual trauma conferences; and

- Offering community education and outreach initiatives focused on reducing traumatic injuries, including Trauma Survivors Network, Anti-Bullying lectures, Experiential Teen Drivers, Matter of Balance, Safely Seated Car Seat program, Every 15 Minutes/Students Against Drunk Driving (SADD); sponsoring a seniors safe driving program; and programs targeting the most frequently identified injuries in youth, adult, and elderly populations; and
- Facility improvements, including a helipad, site development to separate ambulance, helicopter, and drive-up traffic, a snowmelt system, and additional Intensive Care Unit (ICU) equipment purchases, including Vigeleo® Monitors.

Pennsylvania citizens also benefit from access to quality trauma care. The Trauma Payment helps promote greater financial stability of qualified Trauma Centers.

TRAUMA CENTER PAYMENTS

In FY 2014-2015, the State Budget appropriated \$8,656,000.00 for Trauma Center funding. As required by Act 84, DHS submitted a State Plan Amendment to the Centers for Medicare and Medicaid Services (CMS). On February 2, 2015, Pennsylvania received notification of federal approval of the State Plan Amendment, effective October 12, 2014. The federal financial participation increased the total available funding to \$17,965,960.98.

In FY 2014-2015, DHS distributed \$17,544,641.69 of Trauma Payments to 33 hospitals, \$8,451,337.11 in state funds and \$9,093,304.58 in federal funds. In FY 2014-2015, 17 Level I Trauma Centers, 13 Level II Trauma Centers, and three Level III Trauma Centers qualified for payment. The difference of \$421,319.28 between the available funding and the expenditures is due to one hospital reaching its Upper Payment Limit (UPL), which is discussed below.

As required by the Human Services Code, DHS distributed 97 percent of the funding (\$16,945,655.03) to Level I and Level II Trauma Centers, with the remaining three percent of funding (\$598,986.66) distributed to Level III Trauma Centers.

As required by the Human Services Code, DHS distributed 50 percent of the total funding for Level I and Level II Trauma Centers (\$8,084,682.44) equally among Level I and Level II Trauma Centers. DHS distributed the remaining 50 percent of the total funding based on each Level I and Level II Trauma Center's percentage of MA and uninsured trauma cases and patient days compared to the statewide total number of MA and uninsured trauma cases and patient days for all Level I and Level II Trauma Centers.

As required by the Human Services Code, DHS distributed 50 percent of the total funding for Level III Trauma Centers (\$898,298.05) equally among all Level III Trauma

Centers. As required by Act 84, DHS distributed the remaining 50 percent of the total funding based on each Level III Trauma Center's percentage of MA and uninsured trauma cases and patient days compared to the statewide total number of MA and uninsured trauma cases and patient days for all Level III Trauma Centers.

As required by the approved State Plan Amendment and Title XIX of the Social Security Act, 42 U.S.C. §1396r-4, federal financial participation is not available for DSH payments that exceed hospital-specific DSH UPL. In FY 2014-2015, THS - St. Christopher's Hospital for Children did not receive a payment because the prospective payment calculation placed it above its DSH UPL. Geisinger Community Medical Center, Meadville Medical Center, and Robert Packer Hospital also had prospective payment calculations that projecting them to receive payment above their DSH UPL, but these hospitals provided updated hospital specific data that resolved the DSH UPL issues, allowing release of the FY 2014-2015 Trauma Payments in FY 2015-2016.

Level I and Level II Centers Data Sourcing¹

DHS utilized Calendar Year (CY) 2013 PTSF data to calculate each Level I and Level II Trauma Center's payment. The lone exception was Western Pennsylvania Hospital - Forbes Regional Campus, which DHS utilized CY 2013 Pennsylvania Health Care Cost Containment Council (PHC4) data to calculate.

Level III Centers Data Sourcing²

DHS utilized CY 2013 PTSF data to calculate Pocono Hospital's Level III payment and utilized CY 2013 PHC4 data to calculate Hazleton General Hospital and Meadville Medical Center's Level III payments.

Cap on Level III Payments

The Human Services Code requires that payment to each Level III Trauma Center may not be greater than 50 percent of the average statewide annual payment to a Level II Trauma Center. In FY 2014-2015, DHS capped payments for all hospitals accredited as Level III Trauma Centers at \$199,662.22.

¹ PTSF data is unavailable for a newly accredited Level I or Level II hospitals' first year of accreditation. Therefore, DHS used PHC4 data for Western Pennsylvania Hospital – Forbes Regional Campus due to new accreditation at the time of calculation.

² PTSF data is unavailable for hospitals "seeking accreditation" as Level III. DHS used PHC4 data for Hazleton General Hospital and Meadville Medical Center due to their "seeking accreditation" status at the time of calculation.

RECOMMENDATION

DHS requests that the legislature continue funding the trauma units at the current level. Continued funding provides stability for the program and offers continuity for services already in place and relied upon by the citizens of the c ommonwealth.

ATTACHMENT

FY 2014-2015 Trauma Annual Report Spreadsheet

Hospital	Level	Total Medical Assistance & Self Pay Trauma Visits**		State Share Payment	Federal Share Payment	Total Payment
		Total Trauma Visits**	(Included in in Total Trauma Visits)			
Albert Einstein Hospital	I	922	608	\$ 305,194.11	\$ 328,251.53	\$ 633,445.64
Children's Hospital of Philadelphia	I	913	436	\$ 212,251.14	\$ 228,286.71	\$ 440,537.85
Children's Hospital of Pittsburgh	I	1,030	579	\$ 231,703.21	\$ 249,208.40	\$ 480,911.61
Conemaugh Memorial	I	1,143	361	\$ 234,158.97	\$ 251,849.69	\$ 486,008.66
Geisinger Medical Center	I	1,807	525	\$ 282,452.80	\$ 303,792.12	\$ 586,244.92
Hospital of the University of Pennsylvania	I	1,321	743	\$ 486,895.01	\$ 523,679.94	\$ 1,010,574.95
Lehigh Valley Hospital	I	3,315	766	\$ 355,546.93	\$ 382,408.50	\$ 737,955.43
Milton S. Hershey Medical Center	I	1,619	534	\$ 302,402.13	\$ 325,248.61	\$ 627,650.74
St. Luke's Hospital	I	1,406	330	\$ 230,191.61	\$ 247,582.59	\$ 477,774.20
Temple University Hospital	I	1,508	1,048	\$ 513,148.46	\$ 551,916.83	\$ 1,065,065.29
Thomas Jefferson University Hospital	I	1,113	358	\$ 255,009.57	\$ 274,275.54	\$ 529,285.11
THS - St. Christopher's Hospital for Children	I	550	378	\$ -	\$ -	\$ -
THS - Hahnemann University Hospital	I	706	392	\$ 301,501.84	\$ 324,280.30	\$ 625,782.14
UPMC Mercy	I	1,794	654	\$ 345,864.67	\$ 371,994.75	\$ 717,859.42
UPMC Presbyterian	I	4,345	1,216	\$ 517,025.06	\$ 556,086.32	\$ 1,073,111.38
Western Pennsylvania Hospital - Allegheny General Hospital	I	2,342	646	\$ 374,526.57	\$ 402,822.07	\$ 777,348.64
West Virginia University Hospital	I	292	73	\$ 321,502.99	\$ 345,792.54	\$ 667,295.53
York Hospital	I	1,288	265	\$ 208,662.77	\$ 224,427.25	\$ 433,090.02
Abington Memorial Hospital	II	1,045	163	\$ 177,565.01	\$ 190,980.04	\$ 368,545.05
Aria Health Hospital - Frankford	II	1,231	468	\$ 269,996.78	\$ 290,395.04	\$ 560,391.82
Crozer-Chester Medical Center	II	1,468	563	\$ 287,144.83	\$ 308,838.63	\$ 595,983.46
Geisinger Community Medical Center	II	699	95	\$ 157,119.39	\$ 170,280.89	\$ 327,400.28
Geisinger Wyoming Valley Medical Center	II	835	215	\$ 195,532.22	\$ 210,304.68	\$ 405,836.90
Lancaster General Hospital	II	1,234	313	\$ 206,987.49	\$ 222,625.39	\$ 429,612.88
Paoli Memorial	II	986	177	\$ 175,534.43	\$ 188,796.07	\$ 364,330.50
Reading Hospital	II	1,298	250	\$ 206,469.32	\$ 222,068.08	\$ 428,537.40
Robert Packer	II	592	130	\$ 169,189.47	\$ 183,362.05	\$ 352,551.52
Saint Mary Medical Center	II	821	114	\$ 165,763.94	\$ 178,287.41	\$ 344,051.35
UPMC Altoona	II	1,012	300	\$ 196,821.99	\$ 211,691.90	\$ 408,513.89
UPMC Hamot	II	1,396	406	\$ 241,224.53	\$ 259,449.05	\$ 500,673.58
Western Pennsylvania Hospital - Forbes Regional Campus	II	205	48	\$ 235,737.45	\$ 253,547.42	\$ 489,284.87
Hazleton General Hospital	III	981	70	\$ 96,197.26	\$ 103,464.96	\$ 199,662.22
Meadville Medical Center	III	672	69	\$ 95,817.90	\$ 103,844.32	\$ 199,662.22
Pocono Hospital	III	708	170	\$ 96,197.26	\$ 103,464.96	\$ 199,662.22
		42,597	13,463	\$ 8,451,337.11	\$ 9,093,304.58	\$ 17,544,641.69

**Source of Data:

2013 Data from Pennsylvania Trauma Systems Foundation
2013 Data from Pennsylvania Health Care Cost Containment Council

The following hospitals qualified for payments, but were ineligible due to unresolved UPL issues:
THS - St. Christopher's Hospital for Children