

No. 2004-15

AN ACT

HB 100

Providing for the availability of and access to a comprehensive trauma care system; and imposing powers and duties upon the Department of Public Welfare.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1. Short title.

This act shall be known and may be cited as the Pennsylvania Trauma Systems Stabilization Act.

Section 2. Definitions.

The following words and phrases when used in this act shall have the meanings given to them in this section unless the context clearly indicates otherwise:

“Comprehensive emergency services.” The capacity of a hospital emergency department to maintain staff and provide immediate and advanced care for all patients who require trauma care treatment 24 hours per day and seven days per week based on the availability of the following services:

(1) At least two qualified physicians to staff the emergency department during periods of peak utilization.

(2) At least one registered nurse or technician with specialized training in advanced life support techniques.

(3) Anesthesia services at all times.

(4) Physician specialists who can immediately consult by telephone or radio and can report immediately to the hospital emergency department as needed.

(5) Ancillary services, such as laboratory, radiology, pharmacy and respiratory therapy, at all times, with appropriate personnel who can report immediately to the hospital emergency department as needed.

“Department.” The Department of Public Welfare of the Commonwealth.

“Foundation.” The Pennsylvania Trauma Systems Foundation as defined in section 3 of the act of July 3, 1985 (P.L.164, No.45), known as the Emergency Medical Services Act.

“Hospital.” An entity located in this Commonwealth that is licensed as a hospital under the act of July 19, 1979 (P.L.130, No.48), known as the Health Care Facilities Act.

“Secretary.” The Secretary of Public Welfare of the Commonwealth.

“Trauma care.” Medical services provided to an individual with a severe, life-threatening injury which is likely to produce mortality or permanent disability.

“Trauma center.” A hospital accredited as a Level I, Level II or Level III trauma center by the Pennsylvania Trauma System Foundation in accordance

with this act and section 6 of the act of July 3, 1985 (P.L.164, No.45), known as the Emergency Medical Services Act.

Section 3. Accreditation of Level III trauma centers.

(a) **Standards.**—The foundation shall accredit Level III trauma centers in accordance with established standards, which shall be based upon the current guidelines for trauma centers as defined by the American College of Surgeons for Level III trauma centers. The accreditation process shall be conducted in compliance with section 6 of the act of July 3, 1985 (P.L.164, No.45), known as the Emergency Medical Services Act.

(b) **Additional requirements.**—In addition to the Level III standards established by the foundation under subsection (a), a hospital must meet all of the following criteria to qualify for Level III accreditation:

(1) Provide comprehensive emergency services.

(2) Total on an annual basis at least 4,000 inpatient admissions from its emergency department.

(3) Be located in a county with no Level I or Level II trauma center.

(4) Be located more than 25 miles travel distance from a Level I or Level II trauma center.

(c) **Submission of application required.**—To be eligible for accreditation as a Level III trauma center and to qualify for funds under this act, an eligible hospital must submit an application to the foundation for the purpose of determining compliance with the standards under subsection (a) and the criteria under subsection (b). No later than 30 days after the effective date of this section, an application shall be developed by the foundation and made available to eligible hospital applicants.

(d) **Review of application.**—Within 120 days of the receipt of an application, the foundation shall complete its review of the application to determine compliance with the standards under subsection (a) and the criteria under subsection (b). No later than 120 days from the completion of that review, the foundation shall grant or deny a certificate of accreditation for those hospitals seeking to be qualified as Level III trauma centers.

(e) **Review of Level III trauma centers.**—No later than five years after the effective date of this section, the foundation shall reassess the impact of Level III trauma centers on patient outcomes and on the trauma system as a whole. The report with recommendations shall be forwarded to the Secretary of Health, the Public Health and Welfare Committee of the Senate and the Health and Human Services Committee of the House of Representatives.

(f) **Other trauma center references.**—A Level III trauma center accredited under this act shall not be considered an accredited trauma center for purposes of any other act.

Section 4. Submission of list.

(a) **Level I and Level II trauma centers.**—Within 30 days of the effective date of this section and annually thereafter, the foundation shall submit to the department its list of accredited Level I and Level II trauma centers with updates as necessary.

(b) Level III trauma centers.—Within 15 days of the initial approval of an accredited Level III trauma center under section 3(d), the foundation shall submit that information to the department. The foundation shall maintain a complete list of all accredited Level III trauma centers and provide the list to the department on an annual basis with updates as necessary.

Section 5. Funding.

(a) Distribution.—Effective for fiscal year 2003-2004 and each year thereafter, the department shall distribute annually from available funds appropriated for this purpose a disproportionate share payment to each accredited Level I, Level II or Level III trauma center for the purpose of improving access to readily available and coordinated trauma care for the citizens of this Commonwealth.

(b) Funding.—The department shall seek to maximize any Federal funds, including funds obtained pursuant to Title XIX of the Social Security Act (49 Stat. 620, 42 U.S.C. § 1396 et seq.) available for trauma care stabilization.

(c) Payment calculation.—

(1) Payment to qualified hospitals shall be allocated as follows:

(i) Ninety percent of available funds shall be allocated to hospitals accredited as Level I and Level II trauma centers.

(ii) The remaining 10% shall be allocated to hospitals accredited as Level III trauma centers.

(2) Payment to each qualifying hospital accredited as a Level I or Level II trauma center shall be calculated using data provided by the foundation as follows:

(i) Fifty percent of the total amount available for Level I and Level II trauma centers shall be allocated equally among Level I and Level II trauma centers.

(ii) Fifty percent of the total amount available for Level I and Level II trauma centers shall be allocated on the basis of each trauma center's percentage of medical assistance and uninsured trauma cases and patient days compared to the Statewide total number of medical assistance and uninsured trauma cases and patient days for all Level I and Level II trauma centers.

(3) Subject to paragraph (4), payment to each qualifying hospital accredited as a Level III trauma center shall be calculated using the information and data provided by the foundation as follows:

(i) Fifty percent of the total amount available for Level III trauma centers shall be allocated equally among all Level III trauma centers.

(ii) Fifty percent of the total amount available for Level III trauma centers shall be allocated on the basis of each trauma center's percentage of medical assistance and uninsured trauma cases and patient days compared to the Statewide total number of medical assistance and uninsured trauma cases and patient days for all Level III trauma centers.

(4) Payment to each qualifying hospital accredited as a Level III may not be greater than 50% of the average Statewide annual payment to a Level II trauma center as determined in the methodology described in paragraph (2).

Section 6. Notification of trauma center closure.

A hospital that receives funds pursuant to this act shall notify the department, the foundation and the Department of Health of its intent to cease operation of its trauma center no later than 60 days prior to closure of that trauma center.

Section 7. Reporting.

(a) General rule.—On March 1, 2005, and annually thereafter, the department shall report to the Public Health and Welfare Committee of the Senate and the Health and Human Services Committee of the House of Representatives on the trauma centers funded under this act.

(b) Contents of report.—The report shall do all of the following:

- (1) Identify the trauma centers receiving funds.
- (2) State the amount received and the number of individuals served.
- (3) Make any recommendations for improvements in this act which further promote the availability of trauma care services to the citizens of this Commonwealth.

Section 8. Transition provisions.

Pending the issuance of a certificate of accreditation to Level III trauma centers pursuant to section 3(d), the foundation shall verify and certify that a hospital providing trauma care meets the criteria set forth in section 3(b) for purposes of funding pursuant to section 5(c). This section shall expire December 31, 2004.

Section 9. Repeals.

All acts and parts of acts are repealed insofar as they are inconsistent with this act.

Section 30. Effective date.

This act shall take effect immediately.

APPROVED—The 24th day of March, A.D. 2004.

EDWARD G. RENDELL