

SENATE BILL REPORT

SB 6256

As Reported By Senate Committee On:
Health & Long-Term Care, January 31, 1996

Title: An act relating to funding severe trauma care services to individuals who are unable to pay.

Brief Description: Providing financial assistance to support the state-wide trauma care system.

Sponsors: Senators Franklin, Winsley, Wojahn, Kohl, Pelz, Owen, Bauer, Fairley, Rasmussen, Fraser, Thibaudeau, Prentice, Heavey and Quigley.

Brief History:

Committee Activity: Health & Long-Term Care: 1/19/96, 1/31/96 [DPS-WM].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6256 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Quigley, Chair; Wojahn, Vice Chair; Deccio, Fairley, Franklin, Moyer, Thibaudeau, Winsley and Wood.

Staff: Rhoda Jones (786-7198)

Background: In 1990 legislation was passed creating a statewide trauma care system designed to improve the efficiency and access of this care to all areas of the state. The legislation divided the state into regions and set up a process for hospitals to voluntarily become designated trauma care centers serving their region. The intent was to create a system that reduced duplication of these expensive services in the same areas, while increasing the state's overall ability to provide immediate care regardless of the severity of the injury or location of the accident.

Since 1990, a total of 60 trauma care services have been designated, ranging from level V which treats the least serious trauma, to level I treating the most complex. Currently, in most of the eight regions in the state, the required number of hospitals have been designated, with some exceptions.

It was recognized in the 1990 legislation that the viability of this voluntary system of designation would be at least partially based on equitable reimbursement to trauma hospitals who deliver this very costly care. A study completed in 1993 concluded that statewide, hospitals, physicians and pre-hospital trauma services stood to lose an estimated \$38 million over the 1993-95 biennium for non-reimbursed trauma care services.

Funding in the original legislation provided only for planning, training, and implementation of the statewide trauma care system.

Summary of Substitute Bill: A minimum of \$5 million annually is set aside from the state's general fund account to provide financial assistance to designated trauma care services for the complex trauma care they provide to patients without financial resources. Hospitals receive financial assistance only for those severely injured patients who qualify as medically indigent under the state's Medicaid program, or as charity care patients. Reimbursement is at a rate no higher than the present Medicaid rate for inpatient trauma care.

Further, in order to qualify for reimbursement, hospitals must participate in the quality assurance program outlined by the state's trauma care plan, and submit patient data to the department's trauma registry. Hospitals must also enroll medically indigent and charity care trauma patients in the state's Basic Health Plan.

The legislation also authorizes the Department of Health to study the costs, charges, expenses and levels of reimbursement associated with providers of trauma care services. A report including recommendations for reimbursement of undercompensated and uncompensated trauma care is due to the Legislature by July 1, 1997.

Substitute Bill Compared to Original Bill: The source of funding for trauma care changed from the health services account to the general fund.

Appropriation:

Fiscal Note: Requested on January 5, 1996.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: Support for trauma care is needed. Physicians should be compensated too.

Testimony Against: The word "reasonable" is not clear enough and the health services account is already over committed.

Testified: PRO: Bud Lucas, Tacoma Fire Dept.; William Powell, Madigan Army Medical Center; Eric Jensen, EMS Trauma Council; Juris Macs, Trauma Steering Committee; John Sinclair, WA State Assoc. of Fire Chiefs; Gary Hartloft, Pierce County Fire Commissioners; Howard Vietzke, firefighter; Jim Rudd, firefighter; Robb Menaul, WA State Hosp. Assn.; Bob Wachtal, Tacoma General; Rob Maier, Harborview Medical Center; Shelly Mullin, Tacoma General; Susie Tracy, WSMA, WAA; Nick Federici, WSNA; James Billingsley, Franciscan Health System; Tom Bedell, DSHS (con);