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### New Members

*Community Medical Center  
Fresno, CA*

*Kaweah Delta Medical Center  
Visalia, CA*

*Lebonheur Children's  
Memphis, TN*

*Morristown Memorial Hospital  
Morristown, NJ*

*Paoli Hospital  
Paoli, PA*

*Robert Wood Johnson  
New Brunswick, NJ*

*St. Anthony's Medical Center  
St. Louis, MO*

*St. James Healthcare  
Butte, MT*

*St. Joseph Hospital  
Bellingham, WA*

*Texas EMS Trauma & Acute Care Fdn.  
Austin, TX*

*Utah Valley Regional Med. Ctr.  
Provo, UT*



## TCAA Engages in Healthcare Reform for Trauma Centers

The TCAA Board, Advocacy Committee, and Washington Representatives Lisa Tofil, Partner at Holland & Knight are making every effort to highlight the importance of trauma care as Congress considers healthcare reform. These efforts are focused on including the National Trauma Center Stabilization Act (NTCSA) (H.R. 936 and S. 733) in health reform legislation. In addition, TCAA staff and Board members submitted position papers to Federal agencies this Spring to encourage them to modify their position on trauma center payments with some success, particularly with CMS. While the fate of healthcare reform this year is unknown, our efforts, which have been coordinated with all relevant professional organizations' lobbyists, have placed a spotlight on trauma centers and made the case for increased access to trauma care.

### Inclusion of S. 733 in Senate HELP Health Reform Bill

TCAA is very pleased to report that the National Trauma Center Stabilization Act, S. 733, sponsored by Senators Patty Murray (D-WA) and Johnny Isakson (R-GA) has been included by Chairman Ted Kennedy in the Senate HELP Committee proposed health reform legislation. In addition to securing inclusion of the text of S. 733 in the health reform bill, Senator Murray was also able to secure creation of a regional pilot program for emergency medical services/trauma systems. While inclusion at this early stage in the proposed health reform legislation is just the beginning of a long process toward enactment, it is a critical first step. We are very fortunate to have Senator Murray as a committed and capable champion. We also appreciate the strong bipartisan leadership of Senator Isakson and other supporters including Senators Lamar Alexander (R-TN) and Richard Burr (R-NC).

### Common Provisions in H.R. 936 and S. 733

TCAA is extremely grateful to Representatives Ed Towns (D-NY), Kathy Castor (D-FL), Michael Burgess (R-TX), Marsha Blackburn (R-TN) and Senators Patty Murray and Johnny Isakson for their sponsorship of the *National Trauma Center Stabilization Act of 2009* (H.R. 936 and S. 733.) H.R. 936 and S. 733 both include \$100M to directly support trauma centers' core missions, uncompensated care and emergency funding needs through three grant programs:

- **Uncompensated Care Grants** - to assist trauma centers with the highest levels of indigent care by helping to defray some of their uncompensated costs and prevent further closures or downgrades of trauma levels.
- **Core Mission Grants** - to support day-to-day operation of trauma centers including patient stabilization and transfer, education and outreach, and coordination with other trauma centers and the state trauma system.
- **Emergency Grants** - to provide emergency relief to trauma centers at risk of closing, located in a region where another trauma center has closed or downgraded levels, or in an area affected by a natural or terrorist disaster.

It is important to note that 25 percent of the core mission grant program is directed to Level III and IV trauma centers, emphasizing our recognition of rural issues and the barriers to care delivery in remote areas of the United States.



Sen. Murray reintroducing S. 733 at a news conference with TCAA Board of Directors and members

## Unique Provisions in H.R. 936 and S. 733

H.R. 936 includes an additional \$25M for *Information Technology Grants* to support the development of information technology including electronic health records, smart cards, and other infrastructure to improve the flow of information within trauma centers and between them and other health care providers.

S. 733 includes an additional \$100 million for a *Trauma Service Availability Grant Program*, which is designed to address trauma center physician shortages, 24/7 service availability and overcrowding, as well as increase access in underserved areas through regional coordination.

## Other Areas of TCAA/NFTC Efforts

- TCAA staff and Board members wrote a position paper on high acuity trauma patients, and the need to compensate for their care in the "Never Event" complication no-payment plans for CMS and other payors. In the latest iteration of the coding for "not present on admission" never events, CMS has added a modifier code of "W: Provider is unable to clinically determine whether condition was present on admission or not." (CMS 2009)
- TCAA staff and lobbyists reiterated to the Senate Finance Committee that rehabilitative care in healthcare reform for "all payors" will ensure that the entire continuum of trauma care should be covered.
- TCAA staff and lobbyists wrote a position paper encouraging policymakers to exclude trauma care from the bundling of Medicare payments for readmissions within 30 days. As a result, the Senate Finance Committee proposal excludes trauma care from bundling for planned, scheduled readmissions such as reparative or reconstructive care. This will also allow patients to be referred to other trauma centers for care without affecting payments.
- TCAA staff and lobbyists submitted a public comment letter to the Senate Finance Committee recommending that all payors be required to reimburse for trauma care Universal Billing (UB) codes 68X and 208.
- TCAA staff also wrote letters of support for the *Helicopter Medical Services Patient Safety, Protection and Coordination Act* (S. 848, HR 978) which clarifies the ability of states to regulate services provided by helicopter (rotor wing) air medical transport flights, while reaffirming the FAA's authority to govern aviation safety.
- TCAA staff suggested additions to the *Border Health Security Act*, which is to be reintroduced this summer, to include trauma care as a covered medical service for the first time. In the past, this bill covered mental health and oral care, but not trauma care.

## How You Can Help

TCAA members should log onto [www.traumafoundation.org](http://www.traumafoundation.org) and use the legislative software to send emails or facsimiles (faxes) to their legislators. The software uses the ZIP code for each area and has template letters to send, including thank you letters for those legislators that have signed on to assure their continued support! Members of other professional organizations such as the ACS should use their legislative software to make their statements as well. We also encourage you to attend any home district meetings during upcoming Congressional recesses to urge your members of Congress to support H.R. 936 and S. 733.

## FELLOWS PRODUCE "HOW TO" GUIDE TO TRAUMA BILLING

As a result of a recommendation from the TCAA's Reimbursement Committee and Chair of the BOD, the 2008 Fellows have provided a guidance manual to trauma center billing. The manual, subject to TCAA confidentiality and security procedures, spells out who is responsible for what functions, definitions, guidance on problems with coding or collections and other details of trauma center billing. The three areas addressed are:

FL 14, type 5 "Trauma Center" patient type  
 FL 42, 68x "Trauma Response Code"  
 FL 42, 208, "Trauma Critical Care"

Author: Alethea Martinez, RN, MS  
 Author: Scott Harrison, RN, BSN  
 Author: Tammy Jones, RN, MSN

The manual has all relevant source documents including NUBC minutes for the administrative personnel's use and knowledge. In addition, each chapter is meant to be used independently so the source documents are at the end of the chapter rather than at the end of the entire manual. 2009 TCAA Fellows will have their choice of a number of additional fiscal areas where advice and guidance is needed, therefore, this manual will become a living document which grows with our industry.



Connie with Scott Harrison, 2008 Fellow

Our 2009 Fellows are Jennifer Gratton (May 4-15<sup>th</sup>), Karen Macauley (July 20-31<sup>st</sup>), Sue Cox (October 12-23<sup>rd</sup>) and Dottie Howard (November 31-December 11<sup>th</sup>). Jennifer Gratton just completed her fellowship and is in the process of completing a chapter on using **UB 450 to charge for trauma activations without pre-arrival notification**. Below are potential topics where advice and guidance is needed for the future fellows to choose from.

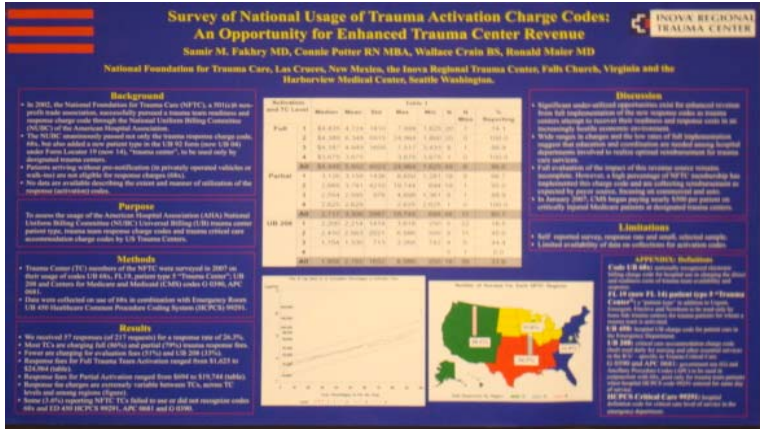
Trauma Trust Funds (State)  
 Collection methods including liens  
 Trauma Program Business Plan  
 Trauma Payment Sources  
 Physician Billing

SBI  
 Appeals  
 HMO (Carve Outs)  
 Annual Report Template

## TCAA SUBMITS MANUSCRIPT TO THE JOURNAL OF TRAUMA

TCAA continues to lead Trauma Centers in properly coding and billing trauma patients. A research project was conducted by the Reimbursement Committee of the TCAA to evaluate the use of the new trauma response charges. This was driven in large part by the interest of our membership in this subject given the introduction of the 68x methodology. Initially presented as a poster at the 2008 meeting of the American Association for the Surgery of Trauma (AAST) in September, 2008, a manuscript has now been completed. On the subject, Dr. Samir Fakhry, Medical University of South Carolina; Dr. Ronald Maier, Harborview Medical Center; TCAA's President, Connie Potter and Statistician, Wallace Crain submitted the manuscript **Survey of National Usage of Trauma Response Charge Codes: An Opportunity for Enhance Trauma Center Revenue to *The Journal of Trauma® Injury, Infection, and Critical Care.***

The findings of this study represent a rare opportunity for trauma centers to recover some of the uncompensated costs they occur while caring for the trauma patient. According to the results, Level I Trauma Centers reported lower charges even though they have higher costs to recover. TCAA will continue to guide its members in investigating the actual costs of trauma team readiness and activation to ensure that current reimbursement rates are appropriate.



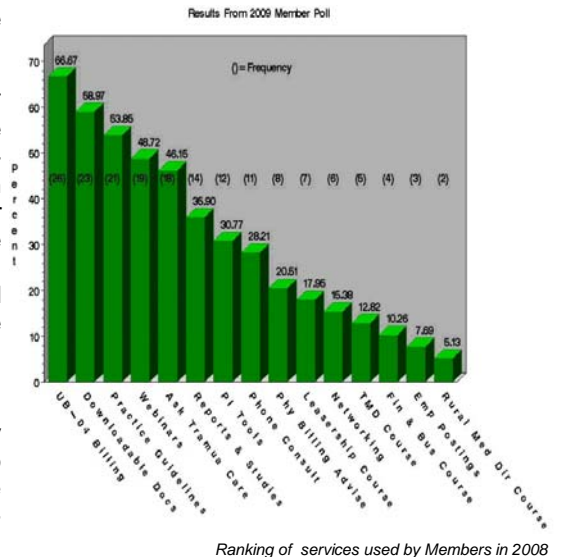
Poster presented at 2008 ASST Conference held in Maui HI

## TCAA LISTENS TO ITS MEMBERS

We appreciate all the members who took the time to complete and return the Member Poll conducted in March and April.

Overall, the poll showed an improvement in ratings compared with the 2007 results. The following TCAA's services showed a significant increase in usage by members: UB-04, Billing, Downloading Documents and Practice Guidelines. Another area that showed improvement was staff responsiveness with 97.44% of the scores being either good or above. The need to redesign our website was brought to our attention in our 2007 member poll, therefore the TCAA members were presented with a new website at the beginning of 2009. Even though it has only been a short period of time, our members have noted positive feedback in this year's poll. Some of the comments regarding the website are: Easier to navigate, relevant material, and is simple to use.

Trauma Center Association of America is a true member services association. We strive to evolve and improve by listening to our members. We are currently focusing efforts on archiving our Webinars or possibly downloading them to CD form, informing members of the availability of personalized conference calls on coding/billing updates, and updating the website to improve our resources, by adding and deleting the long standing and outdated documents.



## TCAA COLLABORATES WITH THE MINNESOTA DEPARTMENT OF HEALTH

Earlier this year, the Minnesota Department of Health Trauma System Manager, Tim Held contacted TCAA with a request for a proposal pertaining to Performance Improvement. A contract evolved to develop a Model Trauma System Performance Improvement Plan. TCAA Trauma System Advisor, Lisa Irwin RN, MPA: HA, former Oregon Trauma System Manager and System PI expert, undertook the project with support of TCAA staff.

The project consisted of an on-site initial assessment, confidentiality and protection of PI products, and a comprehensive PI process for each phase of care from EMS to rehabilitation. It also included the following components: Trauma system quality definitions, overview of the PI program, process, structure and outcome measures, problem solving mythology, and EMS system indicator.

Ms. Irwin presented a descriptive report at the Minnesota State Trauma stakeholders meeting on June 2. It was greeted with great enthusiasm. The report is comprehensive enough for care providers to use without specific instruction, and adaptable to local circumstances. Because of the over-whelming success of this project, TCAA has decided to offer our assistance in this area to other states

## TRAUMA CENTER ASSOCIATION OF AMERICA

650 Montana Ave., Suite A  
Las Cruces, NM 88001  
www.traumafoundation.org

### **TCAA Webinar Education Calendar**

#### **Mid-Level Practitioners: Filling & Funding the Gap**

July 14, 2009

*Presenters:*  
Frank Kennedy, MD, FACS  
Kathi Ayers RN, MSN, FNP

#### **Advocacy: Trauma Center Funding & Health Care Reform**

September 8, 2009

*Presenters*  
Russ Molloy ESQ. JD  
Lisa Tofil, ESQ

#### **Trauma Physician Compensation: Challenges & Compliance**

December 8, 2009

*Presenters*  
Connie Potter RN, MBA  
Diana Rick

### **New offerings for System Members**

#### **Rural Trauma Medical Director Course**

#### **Performance Improvement Workshop**

**Performance Improvement Plan:  
Written specifically to meet your  
system's needs.**

For more information on educational events and for the Annual Conference Registration, please contact Jennifer@traumafoundation.org or call (575) 525-9511.

# Register Now

## ANNUAL CONFERENCE

**November 12 to 15, 2009**

For more information on TCAA Annual Conference go to  
[www.traumafoundation.org](http://www.traumafoundation.org)

### TRAUMA FINANCE & BUSINESS PLANNING COURSE

*BUILDING YOUR PROFESSIONAL CREDIBILITY*

*Thursday, November 12, 2009*

This didactic and roundtable planning course, led by actual trauma center CEO's, will have two lecture tracks: basic and advanced, after which participants will analyze a number of cases for panel and participant review. TCAA supplies real trauma center data to help guide case studies so that participants from Trauma Program Managers, CEO/CFO's, to Trauma Medical Directors participate as a team to build a sustainable model for trauma centers in a variety of circumstances.

### TRAUMA CENTER LEADERSHIP CONFERENCE

*A NATIONAL PERSPECTIVE*

*Friday, November 13, 2009*

This course covers the national agenda for trauma centers and systems from finance, advocacy and regulatory perspectives. TCAA's approach is to have participants leave with a broad understanding of where healthcare reform, Federal trauma finance legislation and other fiscal challenges are heading. The afternoon sessions are divided into Tracks specific to the needs of Trauma Program and System Managers, Trauma Center Executives and Trauma Medical Directors and focus on operational and fiscal issues that can alter the course of trauma center survival.

### TRAUMA SYSTEM DEVELOPMENT

*AN INTEGRATIVE APPROACH*

*Saturday, November 14, 2009*

As pressures increase for inter-governmental reorganization and healthcare reform, trauma systems and regions may assume responsibility for all-hazards planning, pandemics and even heart/ stroke care regionalization or lose control over their own destiny. Innovations in healthcare planning can become either a boon or a burden to trauma systems, so plan to attend our sessions to gain the knowledge to maintain and even grow trauma care by adapting to the challenges facing healthcare.

### TRAUMA MEDICAL DIRECTOR COURSE

*A COMPREHENSIVE BUSINESS LEADERSHIP COURSE*

*(CME's will be available)*

*Friday - Sunday, November 13- 15, 2009*

This extremely popular course, modeled after the Harvard Business School case-based approach to learning, **is limited to 30 Trauma Surgeons** who are either acting as or aspiring to become Trauma Medical Directors. The course offers CME's, an interactive approach, and in an open forum discussing real problems in a confidential environment with exceptional Faculty.

#### **Hotel Information**

The TCAA's Annual Conference in San Diego, CA at the *Humphrey's Half Moon Inn and Suites* will offer a full array of career and trauma center building skill sets and information. **Room block is limited so call soon.**

For reservations call (800) 542-7400 or (619) 224-3411, or e-mail [res@halfmooninn.com](mailto:res@halfmooninn.com). Please identify yourself as part of **Trauma Center Association of America Conference** in order to be eligible for the special group rate of \$159.00 plus tax by October 12, 2009.

