PENNSYLVANIA TRAUMA SYSTEMS STABILIZATION ACT
Annual Report
Fiscal Year 2023-2024

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 (4) 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. Act 84 requires each Trauma Center receiving Trauma Payment funds 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 citizens. Act 84 did not change the distribution methodology set forth in Act 15.

Act 54 of 2019 (Act 54) established new qualification criteria for Level IV Trauma Centers located in rural counties as defined by the Center for Rural Pennsylvania and revised the maximum payment for Level II Trauma Centers as no greater than 50% of the average Statewide annual payment to a Level I or Level II trauma center.

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, Level III, or Level IV 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 patient optimal outcomes.

In Fiscal Year (FY) 2023-2024 hospitals identified the following areas where funding has improved access to, or enhanced the quality of, trauma care for injured patients:

- Ongoing educational opportunities for physicians, nurses, ancillary staff and EMS, including: Trauma Bay LiveCapture (video recordings for education and performance improvement), Traffic Safety, Medical Command to EMS, Advanced Trauma Life Support Course (ATLS), American College of Surgeons Rural Trauma Team Development Course (ACSRTTD), Advanced Practice Provider (APP), Trauma Care after Resuscitation (TCAR), Rural Trauma Team Development Course (RTTDC), Advanced Surgical Skills for Exposure in Trauma (ASSET), Rural Trauma Team Development Courses, Trauma and Neurology Summit, trauma nurse course (TNN) and trauma nurse core course (TNCC); Emergency nursing pediatric course (ENPC), advanced trauma care for nurses (ATCN), online learning, trauma outcomes and performance improvement course (TOPIC); staff training on PTSF software; internal and external conferences for trauma staff, lectures, symposiums, simulation courses including: Advanced Trauma Life Support Course, Advanced Cardiac Life Support Course, Trauma Nurse Course, and Surgical Skills Cadaver labs, and Trauma ICU lectures to nurses; and Participation on State /Regional/National Trauma Committees.
- Community education, outreach initiatives, awareness campaigns (seminars, webinars, social media, print), and community health fairs (with free health screenings consultations), to provide resources and support awareness, reduce traumatic injuries, and educate on ways to assist if a disaster occurs, with a focus on the highest mechanisms of injury patterns including: Stop the Bleed, Think First, Healthy Steps (fall prevention), Safely Seated (car seat program), Impact Teen Driving, gun violence prevention education; and partnering with community hospitals and pre-hospital services in the trauma care they provide.
- Provision of modernized clinical software for patient care including digital radiology systems, electronic medical record systems, and other advanced tools.
- Hiring staff to be able to provide quality of care and to have in-house surgical/specialties/Behavioral Health coverage 24/7/365.
- Assisting hospitals to continue to provide services while sustaining revenue losses for example: rendering services to insured and under-insured patients that made costs exceed revenue.
- Equipment improvements equipment to increase the quality of patient treatment, expedite treatment, decrease length of stays, and achieve optimal outcomes through:
    - Purchase of specialized and advanced equipment such as new ED/Trauma CT Scanner, computerized tomography, blood band, Trauma Bay with LiveCapture video recordings and Point of Care Ultrasound.
    - Expansion of operative services such as surgical Trauma ICU, OR supplies/trays, and increases to bed and medication availability.
    - Purchase of supplies like infusion catheters and fluids, bandages and wound care supplies.

    - Data collection research to identify quality improvement opportunities and to provide evidence-based care to patients.
    - Helicopter, EMS, LifeLion, JeffSTAT, and LifeFlight patient transport
    - Virtual ICU and Med/surg nursing system to augment to current nursing staff for efficiency on patient care.
    - Transfer communication center to ease the transfer of Trauma patients to a level 1 trauma center.
    - Pulse center which improves interfacility transfer capabilities that monitors the patient's conditions closely.
- Expansion of availability of services through newly accredited Trauma Centers. Expenses for newly accredited Trauma centers include: funding additionally supported payment of fees for trauma facilities to participate in accreditation programs such as TQIP, NTDB, and PTSF.
- Facility enhancement, such as improvements to the corridor and waiting rooms area, and new trauma clinics and office suites.
- Provision of modernized clinical software for patient care including digital radiology system, electronic medical record systems and advanced tools.

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

TRAUMA CENTER PAYMENTS

In FY 2023-2024, the Pennsylvania state budget appropriated $8.656 million for Trauma Center funding. As required by Act 84, DHS submitted a State Plan Amendment (SPA) to the Centers for Medicare and Medicaid Services (CMS). On January 23, 2023, Pennsylvania received notification that CMS approved SPA 4.19A p. 21c, effective March 4, 2024, which provided federal matching funds for Trauma Payments. The federal financial participation (FFP) increased the total available funding to approximately $18.867 million.

In FY 2023-2024, DHS distributed $18,866,608.54 in Trauma Payments to forty-nine (49) hospitals – $8,656,000.00 in state funds and $10,210,608.54 in federal funds. In FY 2023-2024, twenty-one (21) Level I Trauma Centers, sixteen (16) Level II Trauma Centers, one (1) Level III and eleven (11) Level IV Trauma Centers qualified for payment.

As required by Act 54, DHS initially distributed ninety- percent (90%) of funding ($16,979,947.69) to Level I and Level II Trauma Centers. DHS initially distributed the remaining ten percent (10%) of funding ($1,886,660.85) to Level III Trauma Centers.

As required by Act 54, DHS distributed fifty percent (50%) of the total funding for Level I and Level II Trauma Centers ($8,489,973.85) equally among Level I and Level II Trauma Centers. DHS distributed the remaining fifty percent (50%) 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 Act 54, DHS distributed fifty percent (50%) of the total funding for Level III Trauma Centers ($943,330.43) equally among all Level III Trauma Centers. As required by Act 54, DHS distributed the remaining fifty percent (50%) 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 Act 54, DHS distributed the remaining funding after paying Level III Trauma Centers, $1,676,582.06 to Level IV Trauma Centers. Per the State Plan, DHS distributed fifty percent (50%) of the total funding for Level IV Trauma Centers ($838,291.03) equally among all Level IV Trauma Centers. DHS distributed the remaining fifty percent (50%) of the total funding based on each Level IV Trauma Center's percentage of MA and uninsured trauma cases and patient days for all Level IV Trauma Centers.

Level I and Level II Centers Data Sourcing[1]

DHS utilized Calendar Year (CY) 2022 PTSF data to calculate each Level I and Level II Trauma Center payment, except for Penn Highlands Dubois. DHS utilized FY 2022 Pennsylvania Health Care Cost Containment Council (PHC4) data to calculate these payments.

Level III and Level IV Centers Data Sourcing[2]

DHS utilized Calendar Year CY 2022 PTSF data to calculate each Level III and Level IV Trauma Center payment, except for Lehigh Valley Schuylkill. DHS utilized FY 2022 Pennsylvania Health Care Cost Containment Council (PHC4) data to calculate these payments.

Cap on Level III Payments

Act 54 requires that payment to each Level III Trauma Center may not be greater than fifty percent (50%) of the average statewide annual payment to Level I & Level II Trauma Centers. In FY 2023-2024, DHS capped payments for Level III Trauma Centers at $229,200.35.

Cap on Level IV Payments

Per the approved State Plan, DHS capped payments to Level IV Trauma Centers, using the same cap formula as Level III, at $229,200.35, and distributed the remaining $61,633.85 in funding to Level I & II Trauma Centers using the same distribution formula as was used in the initial payment calculation for Level I & II Trauma Centers.

RECOMMENDATION

DHS requests continued funding for the Trauma Program at the current level. Continued funding provides stability for the program and offers continuity for services that Pennsylvania citizens rely upon.

ATTACHMENT

FY 2023-2024 Trauma Annual Report Spreadsheet

[1] PTSF data is unavailable for a newly accredited hospitals' first year of accreditation. Therefore, DHS uses PHC4 data for those hospitals due to new accreditation at the time of calculation.
[2] PTSF data is unavailable for a newly accredited hospitals' first year of accreditation. Therefore, DHS uses PHC4 data for those hospitals due to new accreditation at the time of calculation.

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Hospital	Level	Total Trauma Visits**	Total Medical Assistance & Self Pay Trauma Visits** (Included in Total Trauma Visits)	State Share Payment	Federal Share Payment	Total Payment
ABINGTON MEMORIAL HOSPITAL	II	1,559	287	$161,998.03	$191,092.70	$353,090.73
ALBERT EINSTEIN MEDICAL CENTER	I	1,027	533	$192,614.70	$227,208.09	$419,822.79
ARIA HEALTH HOSPITAL FRANKFORD	II	1,678	750	$272,789.56	$321,782.28	$594,571.84
CHILDRENS HOSPITAL OF PHILADELPHIA	I	1,064	499	$158,963.03	$187,512.63	$346,475.66
CONEMAUGH MEMORIAL MEDICAL CENTER	I	1,058	289	$152,085.80	$179,400.25	$331,486.05
CONEMAUGH MINERS MEDICAL CENTER	IV	70	18	$37,067.21	$43,724.45	$80,791.66
CROZER-CHESTER MEDICAL CENTER_PROSPECT CCMS	II	1,072	521	$219,934.84	$259,434.90	$479,369.74
FULTON COUNTY MEDICAL CENTER	IV	120	26	$45,083.64	$53,180.62	$98,264.26
GEISINGER COMMUNITY MEDICAL CENTER	II	1,270	367	$183,285.15	$216,202.97	$399,488.12
GEISINGER MEDICAL CENTER	I	2,603	812	$249,952.30	$294,843.47	$544,795.77
GEISINGER ST LUKES HOSPITAL	IV	275	42	$64,453.05	$76,028.75	$140,481.80
GEISINGER WYOMING VALLEY MEDICAL CENTER	I	1,295	422	$190,601.12	$224,832.89	$415,434.01
GEISINGER-LEWISTOWN HOSPITAL	IV	518	159	$105,157.12	$124,043.23	$229,200.35
GRAND VIEW HOSPITAL	II	774	60	$114,727.54	$135,332.48	$250,060.02
GROVE CITY MEDICAL CENTER HOSPITAL	IV	273	63	$56,061.52	$66,130.12	$122,191.64
LANCASTER GENERAL HOSPITAL	I	1,999	584	$228,336.10	$269,345.02	$497,681.12
LEHIGH VALLEY HOSPITAL	I	3,344	1,063	$357,423.67	$421,616.58	$779,040.25
Lehigh Valley Muhlenberg	II	1,237	254	$144,136.88	$170,023.71	$314,160.59
LEHIGH VALLEY SCHUYLKIL	IV	140	9	$39,840.28	$46,995.55	$86,835.83
MAIN LINE HOSPITAL LANKENAU	II	745	246	$145,722.75	$171,894.40	$317,617.15
PAOLI MEMORIAL HOSPITAL	II	1,165	266	$149,140.37	$175,925.82	$325,066.19
PENN HIGHLANDS DUBOIS	II	452	34	$104,250.93	$122,974.28	$227,225.21
PENN PRESBYTERIAN MEDICAL CENTER	I	1,848	966	$325,047.10	$383,425.21	$708,472.31
PENN STATE HEALTH HOLY SPIRIT MEDICAL CENTER	II	1,279	323	$166,583.16	$196,501.33	$363,084.49
POCONO MEDICAL CENTER	III	659	187	$105,157.12	$124,043.23	$229,200.35
READING HOSPITAL	I	2,268	615	$221,101.03	$260,810.55	$481,911.58
ROBERT PACKER HOSPITAL	I	1,049	225	$139,894.40	$165,019.28	$304,913.68
ST CHRISTOPHERS HOSPITAL FOR CHILDREN	I	571	481	$162,552.46	$191,746.71	$354,299.17
ST LUKES HOSP OF BETHLEHEM	I	1,866	502	$190,570.86	$224,797.19	$415,368.05
ST LUKES HOSPITAL ANDERSON CAMPUS	II	928	298	$151,481.40	$178,687.30	$330,168.70
ST LUKES HOSPITAL MONROE CAMPUS	IV	356	76	$100,769.96	$118,868.13	$219,638.09
ST LUKES HOSPITAL-LEHIGHTON CAMPUS	IV	299	59	$72,310.72	$85,297.66	$157,608.38
ST LUKES MINERS MEMORIAL HOSPITAL	IV	189	56	$63,361.12	$74,740.72	$138,101.84
ST MARY MEDICAL CENTER	II	997	183	$138,239.81	$163,067.54	$301,307.35
TEMPLE UNIVERSITY HOSPITAL INC	I	2,069	1,505	$481,177.65	$567,596.66	$1,048,774.31
THE MILTON S HERSHEY MEDICAL CENTER	I	2,048	663	$238,143.16	$280,913.42	$519,056.58
THOMAS JEFFERSON UNIVERSITY HOSPITAL	I	1,775	759	$312,653.30	$368,805.51	$681,458.81
TROY COMMUNITY HOSPITAL	IV	121	26	$39,852.40	$47,009.85	$86,862.25
UPMC ALTOONA	II	1,316	359	$165,418.69	$195,127.72	$360,546.41
UPMC CHILDRENS HOSPITAL OF PITTSBURGH	I	1,049	637	$164,716.44	$194,299.34	$359,015.78
UPMC HAMOT	II	1,781	493	$210,473.82	$248,274.69	$458,748.51
UPMC MERCY	I	2,385	756	$287,896.24	$339,602.11	$627,498.35
UPMC PRESBYTERIAN SHADYSIDE	I	3,446	1,179	$400,332.04	$472,231.25	$872,563.29
UPMC WILLIAMSPORT	II	1,054	258	$152,962.16	$180,434.00	$333,396.16
WAYNE MEMORIAL HOSPITAL	IV	204	38	$56,327.78	$66,444.19	$122,771.97
WEST PENN-ALLEGHENY GENERAL HOSPITAL	I	3,099	699	$240,384.90	$283,557.77	$523,942.67
WEST VIRGINIA UNIVERSITY HOSPITALS INC	I	4,252	1,182	$293,367.65	$346,056.17	$639,423.82
WESTERN PENN HOSP-FORBES REGIONAL CAMPUS	II	1,107	294	$163,580.93	$192,959.90	$356,540.83
YORK HOSPITAL	I	1,726	448	$188,048.23	$221,821.50	$409,869.73
	49	63,479	20,571	$8,606,030.12	$10,151,664.12	$18,757,694.24

** Source of Data:
2022 Data from Pennsylvania Trauma Systems Foundation
2022 Data from Pennsylvania Health Care Cost Containment Council