

Immediate Release

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Contact

Michelle Raczynski

Work: 817.607.7017

Cell: 817.372.3554

Email: mraczynski@ncttrac.org



Scrapping the Texas Driver Responsibility Program Would Order a “Code Red” for the North Central Texas Regional Trauma System

Metroplex and surrounding areas could lose more than \$17 million annually for trauma care

ARLINGTON, TEXAS – In 2003 the state of Texas faced a budget shortfall, the prospect of raising taxes was not likely, and the funding crisis in the trauma system needed to be addressed. In response, the Texas Legislature passed the Driver Responsibility Program, which Governor Rick Perry signed into law. Now, some local media are advocating for the elimination of this program.

“Lawmakers worked to create a plan that wouldn’t burden all the citizens of Texas, but rather to place the responsibility on those who violate important laws supporting public safety. Laws that, when broken, often may contribute significantly to auto related accidents and deaths.” explained Carrie Hecht, Chair of the North Central Texas Trauma Regional Advisory Council (NCTTRAC). “According to Texas Department of State Health Services data, approximately 25 percent of all trauma in our area is due to motor vehicle traffic.”

In the 19 counties comprising North Central Texas, there are 24 state-designated trauma centers; six of these are designated at the highest levels possible in the country. The remaining 18 trauma centers provide a regional system of advanced trauma care for patients throughout the area. Over the past three years, the area’s annual average cost of uncompensated trauma care is more than \$50 million.

“Much of the cost of trauma care that these facilities provide is not paid for, or uncompensated. The purpose of the Driver Responsibility Program was to offset the cost of uncompensated trauma care, which is why this funding is vital to the trauma system.” added Rick Antonisse, NCTTRAC’s Executive Director. “The real injustice would be to lose this targeted but crucial financial support at a time when the area has seen an increase in need.”

In 2009 only 36 percent of uncompensated trauma care was reimbursed by the state. The Driver Responsibility Program accounted for 83 percent of that funding, amounting to \$17.1 million. The potential loss of this funding would reduce trauma hospitals’ uncompensated care reimbursements to approximately six percent, further placing the cost burden on paying patients and the taxpayers.

“Bottom line, this program is a lifeline for the entire trauma system. This area has some of the best trauma care in the world and that is critical to the safety of our patients and to those who live, work and visit the North Central Texas area,” said Ms. Hecht. “NCTTRAC has been a pivotal resource in engaging, coordinating and improving EMS and hospital-based trauma care on behalf of the region for almost 20 years. We want to ensure that those in this area know that the health of our trauma system depends on maintaining this funding source for the trauma centers.”

The 128 participating hospitals and 59 EMS agencies of NCTTRAC support the largest of 22 Trauma Service Areas in the State of Texas. “We currently manage four significant Texas Department of State Health Services contracts and have provided a regional forum for healthcare provider and stakeholder involvement. The ‘RAC’, as it is called, has fostered participation and validated the distribution of incredibly important resources for day-to-day trauma and acute care services as well as disaster preparedness and response,” Antonisse added.

The North Central Texas Trauma Regional Advisory Council (NCTTRAC) is an organization designed to facilitate the development, implementation, and operation of a comprehensive trauma care system based on accepted standards of care to decrease morbidity and mortality. The Trauma Service Area for the NCTTRAC is comprised of the following counties: Collin, Cooke, Dallas, Denton, Ellis, Erath, Fannin, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, Tarrant, and Wise.

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Fact Sheet:

Name: North Central Texas Trauma Regional Advisory Council (NCTTRAC)

Organizational Type: Nonprofit Corporation, 501(c)(3)

Mission: To support and improve emergency healthcare through prevention, education, advocacy, preparedness and operational support.

Geographic Area/Population Served

- 19 counties in the North Central Texas Area: Collin, Cooke, Dallas, Denton, Ellis, Erath, Fannin, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, Tarrant, and Wise
- More than 27 percent of the Texas population
- Two percent of the total United States population

NCTTRAC Membership

- 59 Emergency Medical Services (EMS) with 410 ambulances
- Three (3) air ambulance providers with eleven (11) helicopters
- 47 acute care and specialty hospitals including the following designated trauma facilities:
 - o Trauma Level I: Baylor University Medical Center, Children's Medical Center Dallas, JPS Health Network, and Parkland Memorial Hospital
 - o Trauma Level II: Cook Children's Medical Center, * Methodist Dallas Medical Center, and Texas Health Harris Methodist Hospital Fort Worth
 - o Trauma Level III: Hunt Regional Medical Center Greenville, Medical Center of Plano, and Texoma Medical Center
 - o Trauma Level IV: Dallas Regional Medical Center, Denton Regional Medical Center*, Ennis Regional Medical Center, Glen Rose Medical Center, Lake Granbury Medical Center, Lake Pointe Medical Center*, Medical Center of Arlington, Muenster Memorial Hospital, Navarro Regional Hospital, North Texas Community Hospital*, Palo Pinto General Hospital, Texas Health Harris Methodist Hospital Azle, Texas Health Harris Methodist Hospital Stephenville, Texas Health Presbyterian Hospital Allen*, Texas Health Presbyterian Hospital Cleburne, Texas Health Presbyterian Hospital Kaufman, Weatherford Regional Medical Center, Wise Regional Health System and Red River Regional*

* In pursuit of designation.

Program and Texas Department State of Health Services (DSHS) Support Highlights

- Validated eligibility for \$20.6 million in uncompensated care payments during 2009 to 24 trauma designated, member hospitals
- Validated eligibility for \$130.1 million in Medicaid Disproportionate payments during State FY2008 to 18 trauma designated, member hospitals
- Administers \$5.6 million DSHS Hospital Preparedness Program in its eighth year that includes 128 participating, sub-recipient hospitals
 - Placed four 40-bed mobile medical units (MMU) with Collin, Hood, Navarro counties, and Texas Health Resources in Arlington
 - Manages one 20-bed MMU training assemblage and training instruction contract
 - Procured and manages three types of regional mutual aid medical equipment and supply caches
 - o Mobile caches: Five sets of containers with wheels designed to support the MMUs
 - o Hospital caches: Four sets of palletized caches for use by hospitals
 - o State pandemic cache: Palletized pandemic supplies, mostly Personal Protective Equipment (PPE)
 - o Each mobile and hospital cache supports 100 patients for three days in a triage, stabilization, and transport operation
 - Provides communication resources
 - o Two-way radio systems supporting hospital to jurisdiction communications
 - 66 radios purchased (37 800MHz, 7 UHF, 11 VHF and 11 HAM)
 - o Satellite phones (four available)
 - o Deployable communications kits (six available)
 - Kit includes, one mobile base station, 12 handheld radios
 - VHF with Texas interoperable channels programmed
 - o Web-based Emergency Operations Center (WebEOC) situation management software
 - 563 regional users, including hospitals, EMS, public health, and local government
 - 19 counties and 17 major cities currently registered to use WebEOC
 - Conducts regional exercises
 - o January 2010 - More than 80 hospitals and 20 local emergency management agencies participated throughout the region including our largest metro areas
 - o Monthly drills exercise communications between hospitals and local jurisdictional emergency managers
- Validated and managed reimbursement of \$332,502 to 46 EMS providers and volunteer first responders for equipment and supplies in 2009