

**TRAUMA CENTER ASSOCIATION OF AMERICA**



**COMPREHENSIVE FEDERAL LEGISLATIVE  
ADVOCACY REPORT**

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## INTRODUCTION

This memorandum outlines the Trauma Center Association of America's (TCAA) federal advocacy accomplishments and on-going legislative efforts in support of its partnership with the Eastern Association for the Surgery of Trauma (EAST) during the first quarter of 2013.

### Capitol Hill Overview

On April 10, the president released his long-awaited FY2014 budget. The budget assumes \$400 billion in health care savings, with more than \$371 billion coming from the Medicare program, specifically payments to providers. The budget also delays the Disproportionate Share Hospital (DSH) cuts included in the Affordable Care Act (ACA) until 2015 and requests additional funding for implementation of the ACA. In addition, the FDA sees a boost under the budget, with the NIH request holding steady at around \$31 billion.

In addition, as in previous budget plans, the President's FY 2014 budget proposal would repeal the sustainable growth rate (SGR) formula for setting Medicare pay rates. That formula will trigger a 24.4% cut in physician pay on January 1, 2014, unless Congress intervenes.

On May 8, the Ways and Means Health Subcommittee held a hearing where physician groups testified urging Congress to adopt a new Medicare physician payment system that includes a five-year transition from the current payment formula and provides positive payment updates during that time while financially rewarding physicians for providing high-quality care. Many of those criteria mirror those put forth by the House Energy and Commerce and Ways and Means committees in their second draft of a permanent physician payment fix plan. Lawmakers have said they hope to have legislation on the House floor by the August congressional recess.

The looming Medicare SGR cut is on top of the sequester cuts that were initiated on March 1, 2013, although the effects of sequestration did not become publically visible until April 1<sup>st</sup>, when furloughs and delays in government service came into real effect. Importantly, as a result of the sequester Medicare provider payments will be subject to cuts of up to 2 percent of total program costs. The cuts also affect meaningful use reimbursements from the EHR Incentive Program. Other potential cuts are still under consideration such as payment streams to hospitals for indirect medical education (IME), bad debt, and hospital outpatient services.

## PURSUING FUNDING FOR TRAUMA CARE

As stated earlier, the President released his FY 2014 Budget Proposal on April 10. Of interest to TCAA members, the Health Resources and Services Administration (HRSA) budget includes \$8.4 billion, an increase of \$228 million from FY 2012. However, the President's budget proposed to reduce the Hospital Preparedness Program governed by the Assistant Secretary for Preparedness and Response (ASPR) substantially. The president's budget proposal serves as a blueprint for larger budget discussions, has limited details and is nonbinding. Congress is

ultimately responsible for passing final budget legislation. We expect a lengthy budget debate this year and will continue to advocate on behalf of our members throughout the process.

The Senate and House both approved their fiscal 2014 budget resolutions. The Senate also approved provisions in the resolution for Fiscal year 2014 that would restore the \$85 billion cut from the Fiscal Year 2013 budget under sequestration. Now that both chambers have an approved budget, the theoretical next step is for the House and Senate to resolve the differences between their budget resolutions. Given the magnitude of these differences, it appears unlikely that they will find common ground. However, passage of competing budget resolutions will at least allow both chambers to begin working on actual spending bills for the fiscal year that begins Oct. 1.

The Senate and House have started to seek funding requests and priorities from Members of Congress for federal fiscal year 2014. Accordingly, TCAA has asked all their members to undertake grassroots advocacy to secure essential implementation funding for our trauma programs. While the total authorized level of funding for all of these programs is \$224 million, given the continuing and very challenging fiscal environment on Capitol Hill, we are requesting a \$28 million level of funding. Many Members of Congress have submitted our request to their colleagues on the appropriations committees.

TCAA also recently submitted testimony to the House Appropriations Subcommittee on Labor, Health and Human Services to advocate for federal appropriations for trauma & emergency medical services system programs in FY2014. TCAA urged the inclusion of \$28 million in the FY 2014 Labor-HHS-Education Appropriations bill, which would include funding for the following programs with a breakdown as follows:

- \$11 million for Trauma Care Center Grants
- \$11 million for Trauma Service Availability Grants
- \$3 million for Trauma Systems Planning Grant
- \$3 million for Regionalization of Emergency Care Pilots

The U.S. Congress heard from the TCAA members on April 16, as more than 20 members of TCAA traveled to Capitol Hill to visit with their members of Congress to discuss legislative initiatives around alleviating the challenges facing trauma centers. Importantly, TCAA members utilized the Hill day in an effort to secure essential implementation funding for our trauma programs.

As these budgetary debates go on, TCAA is focused on both solutions to ensure the future reliability and accessibility of trauma care for all Americans. TCAA will be continuing to press both the Congress and the Administration to provide seed funding for its trauma programs. Simultaneously, TCAA will continue its efforts to work on other opportunities to enhance revenue flow to trauma centers, as well as ensure the totality of reimbursement on trauma care (protecting and enhancing reimbursement opportunities). TCAA welcomes your participation in these efforts as we seek to highlight the important role that trauma centers, trauma teams and trauma systems play throughout our country.

## OTHER FEDERAL ACTIVITIES

### **Pandemic and All-Hazards Preparedness Act**

TCAA is pleased to report that the Senate and House have passed the Pandemic and All-Hazards Preparedness Act of 2013 (on February 28th and March 4th respectively). The final legislation reflects the priorities that TCAA and partner organizations have worked on in strengthening the National Health Security Strategy (NHSS). TCAA successfully added language to the bill's NHSS that explicitly states that the NHSS should seek to increase the preparedness, response capabilities and surge capacities of trauma centers, and ensure their availability, accessibility and coordination. TCAA is very appreciative of the House and Senate champions - Congressman Michael Burgess (R-TX), and Senators Patty Murray (D-WA) and Richard Burr (R-NC) - along with the bipartisan leadership of the House Energy and Commerce Committee and Senate HELP Committee, who together worked diligently to include language strengthening the NHSS in reauthorization efforts.

### **Field EMS Legislation**

Rep. Larry Bucshon (R-IN-08) has officially re-introduced the Field EMS Quality, Innovation, and Cost-Effectiveness Improvements Act (H.R. 809), to implement a cohesive strategy to strengthen the development of our nation's Field Emergency Medical Services (EMS) at the federal, state and local levels. The bill represents a comprehensive approach at addressing many of the challenges confronting field EMS in order to better fulfill public expectations that all who need trauma and emergency medical care in the pre-hospital setting can depend upon the highest quality of care. The Field EMS bill would establish HHS as the primary federal agency for trauma care and EMS, and create an Office of EMS and Trauma to provide a voice, home, and initial funding for EMS and trauma programs. As Congress and the Obama Administration continue to consider the appropriate federal role and options for a lead federal agency, TCAA and its colleague organizations are continuing to advocate for policies that ensure the right care is delivered to patients at the right time and in the right setting.

## CONCLUSION

TCAA will be continuing to press both the Congress and the Administration to provide seed funding for its trauma programs, as well as preserve existing Medicare and Medicaid funding streams. Simultaneously, TCAA will continue its efforts to work strategically with broader coalition partners on other opportunities to enhance revenue flow to trauma centers, as well as ensure the totality of reimbursement on trauma care (protecting and enhancing reimbursement opportunities). TCAA is pleased to be able to work with so many members and partners in support of a comprehensive agenda and welcomes your participation as we seek to highlight the important role that trauma centers and systems play throughout our country.