
HOUSE BILL 2879

State of Washington

54th Legislature

1996 Regular Session

By Representatives Conway, Dyer, Carrell, Regala, Scheuerman, Cody, R. Fisher, Hatfield and Mitchell

Read first time 01/23/96. Referred to Committee on Health Care.

1 AN ACT Relating to developing a comprehensive, uniform, and
2 responsive designated trauma care system; amending RCW 43.72.900;
3 adding a new section to chapter 70.168 RCW; and creating new sections.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** The legislature finds that a successful
6 state-wide trauma care system depends on the voluntary participation of
7 hospitals and health care facilities as designated trauma care centers
8 for the special purpose of providing lifesaving medical care to victims
9 of severe trauma. The legislature further finds that these services
10 are expensive, and that providing them may create a particular
11 financial burden on designated trauma care services when this care
12 serves patients who cannot pay for it themselves and for whom there is
13 no third party payer.

14 It is the intent of the legislature to support the state-wide
15 trauma care system and its designated trauma centers with a fair and
16 equitable funding system that provides reimbursement for uncompensated
17 care. The legislature intends to provide financial assistance for
18 designated trauma care services on behalf of trauma patients for whom
19 other financial resources are not available. The legislature further

1 intends to establish a successful state-wide trauma care system that
2 includes an appropriate number of level I and level II designated
3 trauma care centers.

4 NEW SECTION. **Sec. 2.** A new section is added to chapter 70.168 RCW
5 to read as follows:

6 (1) A designated trauma care service is eligible for reimbursement
7 from the health services account only for patients who:

8 (a) Enter the designated trauma care service after qualifying for
9 trauma services through the trauma triage procedure developed by the
10 department of health; and

11 (b) Have an injury severity score (ISS) of sixteen or greater.

12 (2) To be eligible for reimbursement, designated trauma care
13 services shall:

14 (a) Demonstrate all designation standards defined by the department
15 of health in rule;

16 (b) Provide complete trauma care data to the department's trauma
17 care registry according to requirements in WAC 246-976-430;

18 (c) Establish an internal quality assurance trauma program that
19 complies with WAC 246-976-880; and

20 (d) Enroll medically indigent trauma care patients in the state's
21 basic health plan.

22 **Sec. 3.** RCW 43.72.900 and 1993 c 492 s 469 are each amended to
23 read as follows:

24 (1) The health services account is created in the state treasury.
25 Moneys in the account may be spent only after appropriation. Moneys in
26 the account may be expended only for maintaining and expanding health
27 services access for low-income residents, maintaining and expanding the
28 public health system, maintaining and improving the capacity of the
29 health care system, containing health care costs, and the regulation,
30 planning, and administering of the health care system.

31 (2) At least five million dollars from the health services account
32 shall be dedicated annually to reimburse every hospital, facility, or
33 health care provider authorized by the state to provide levels I and II
34 designated trauma services. The department of social and health
35 services shall disburse this money exclusively to cover reasonable
36 costs of care for patients who meet charity care standards defined in
37 RCW 70.170.020 and to increase the state's payment for medically

1 indigent patients. Reimbursement shall be provided at a rate that
2 covers reasonable costs for treating patients, but the rate may not
3 exceed the state's medicaid rate.

4 NEW SECTION. **Sec. 4.** The department of health shall conduct or
5 cause to be conducted a study on all costs, charges, expenses, and
6 levels of reimbursement associated with providers of trauma care
7 services. The report must include recommendations for reimbursement of
8 undercompensated and uncompensated trauma care at designated trauma
9 care services state-wide, including special financial incentives for
10 hospitals who voluntarily choose to become level I or level II
11 designated trauma care centers. The study must also include
12 reimbursement options using Title 19 medicaid funds or any other
13 federal matching funds. This report must be submitted to the
14 appropriate committees of the legislature by July 1, 1997.

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