

LAST CHANCE TO SUBMIT YOUR BEST PRACTICE POSTERS!

The Trauma Center Association of America invites you to submit a "Best Practice" for presentation as a poster at the 18th Annual Trauma Conference in Louisville, Kentucky. Submissions are now being accepted by the Education Committee for review.

Definition: A Best Practice Poster is an ideal model or successful initiative worthy of imitation that is unique to your Trauma Center and highlights your program. It does not have to be a scientific abstract or be evidence-based, but if you have any supporting evidence, we encourage you to include it..

Requested Categories:

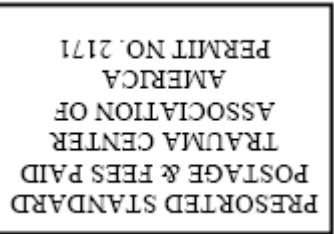
- Team Building:
  - TeamStepps® in Trauma Resuscitation
  - Safety Time Outs and Debriefings
- Domestic Violence
- TBI
  - Management and Guidelines
  - Hypothermia and TBI
  - Injury Prevention
  - Safety Time Outs and Debriefings
- Innovative Education for Healthcare Providers
- Mid-level Providers
  - ROI
  - Follow through from ER

Suggested Categories: (but not limited to) Finance, Operations, Injury Prevention, Performance Improvement, System Development, Education, Disaster Preparedness, Outreach

Instructions for Best Practice Poster Submissions: As always, it is important that all instructions be followed in order to qualify for review by the Education Committee. If you have difficulties submitting your information, you may email it to: Ann Bellows (TCAA) at Ann@TraumaCenters.org. For any other questions please call the TCAA office at 575-525-9511.

- TCAA Lobby Day Recap
- IOM Committee on Military Trauma Care
- Supreme Court Case and Affect on Trauma
- TCAA participates in Roundtable on Bystanders: Our Nation's Immediate Responders
- Trauma Prevention Coalition Symposium and Summit
- TCAA Annual Conference - Louisville, KY September 20-26, 2015
- Webinar: Washington Update
- ACS Verification—Congratulations!
- Call for Exemplars & Best Practice Posters

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TRAUMA CENTER ASSOCIATION OF AMERICA  
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Return Service Requested

Best Practice Poster Deadline: July 1, 2015



«Constituent\_ID»  
Attn: Trauma Program  
«Employer\_Address»  
«Employer\_City», «Employer\_Location» «Employer Postal Code»



TRAUMA CENTER  
Association of America  
ADVOCACY • FINANCE • OPERATIONS

THE NATIONAL VOICE FOR TRAUMA CENTERS May/June 2015

New Members  
In 2015-  
2nd Quarter

- Los Robles Regional Medical Center  
Thousand Oaks, CA
- Aventura Hospital  
Aventura, FL
- Memorial Hospital of Carbondale  
Carbondale, IL
- Pali Momi Medical Center  
Aiea, HI
- Hunt Regional Medical Center  
Greenville, TX
- Children's Hospital of the King's Daughters  
Norfolk, VA
- Georgia Regents Medical Center  
Augusta, GA
- St. Mary's Mercy  
Livonia, MI
- Christus Santa Rosa Hospital—New Braunfels  
San Antonio, TX
- Christus Santa Rosa Hospital—Westover Hills  
San Antonio, TX
- Christus Santa Rosa Medical Center  
San Antonio, TX
- Children's Hospital of San Antonio  
San Antonio, TX
- Vassar Brothers Medical Center  
Poughkeepsie, NY

Washington Wrap-Up

Trauma Lobby Day: Making A Difference

The TCAA Advocacy Institute and Lobby Day held on May 12-13, 2015 was a great success! Attendees had an opportunity to hear from David Marcozzi, MD, Senior Advisor for Emergency Preparedness and Acute Care at Centers for Medicare & Medicaid Services to discuss and explore how the existing trauma care system can build and sustain new programs to enhance value, reduce costs, and improve care delivery. Further, attendees were briefed on the most recent congressional developments and provided with an update designed to strengthen their understanding of the critical components of advocacy on behalf of the trauma community.



Following the briefing, over 35 leaders in the trauma community, met with over 140 Senate and House lawmakers and staff to discuss legislative initiatives around alleviating the challenges facing trauma centers. Importantly, the Hill day was utilized in an effort to secure reauthorization and essential funding for our trauma programs.



TCAA Lobby Day participants received a warm reception and a positive response from many of the Congressional offices they visited, providing the opportunity for ongoing and stronger relationships. Our staff will continue to regularly monitor these issues, stay in touch with the Hill, and keep you informed of continuing developments through our updates.



IOM Committee on Military Trauma Care's Learning Health System and its Translation to the Civilian Sector

The Joint Trauma System, organized and operated by the Department of Defense, has shown remarkable success in reducing mortality from battlefield injuries over the past decade. Through a continuous focus on performance improvement, a core component of every successful trauma system, combined with a robust research program, the JTS has advanced the delivery of evidence-based trauma care. Recognizing the potential to impact civilian trauma care, the Institute of Medicine, at the request of the DoD, Department of Homeland Security, and National Highway Traffic Safety Administration, has appointed an ad hoc committee to study the military trauma system, define its essential components, and how these elements can be translated into civilian trauma care. The TCAA, along with several other professional organizations, is sponsoring this important effort. The findings of the committee will be very useful in advancing the TCAA's mission of fostering a sustainable national system of trauma care, where every injured person has access to optimal trauma care, anywhere and anytime.

We Value Your Input

Which would you prefer: Hardcopy newsletter or e-newsletter?  
To submit your vote, go to [www.traumacenters.org](http://www.traumacenters.org) and click on the Survey Slideshow or go to: [http://www.traumacenters.org/surveys/?id=Newsletter\\_Survey](http://www.traumacenters.org/surveys/?id=Newsletter_Survey)



## The Supreme Court Case on ACA Health Insurance Tax Credits Could Affect Trauma Centers

The plaintiffs in the *King vs. Burwell* case are arguing that under a plain reading of the Affordable Care Act, Premium Tax Credits – the individual tax credits that are used to subsidize the cost of purchasing health insurance for those with incomes between 400 - 133% of the federal poverty line – may only be made available in the 14 states that have created their own health exchange. If they prevail, tax credits would no longer be available in the 36 states that have not created their own exchanges. However, Medicaid expansion would not be affected in states (such as Illinois) that have elected to expand their programs.

If the Supreme Court sides with Administration, then the case will be little remembered and the status quo will remain. However, if the Supreme Court sides with plaintiffs, there will be huge implications for hospitals and trauma centers. For example, the Urban Institute projected that the hospital industry would lose \$6.3 billion in revenue, as some insured patients would drop coverage, and bad debt and uncompensated care would rise. Other consequences to note:

- The employer mandate would no longer apply in any of the 36 states (because it is triggered in a manner that is connected to the premium tax credit);
- The individual mandate would still apply except that many would no longer find health insurance affordable without subsidies and thus a hardship exception could apply;
- It is possible the court would not only invalidate Premium Tax Credits in the federal exchange states, but would go further and also find that the new federal insurance regulations in those States could not be applied because they are impermissibly coercive;
- It is possible that the court could delay the effective date of a decision beyond 25 days, perhaps by remanding the case or otherwise delaying its effective date.

In the event of a decision for the plaintiffs, the Executive Branch would likely try to figure out some form of regulatory response to create an “on ramp” for States that want to establish an exchange. But the Administration has generally said that its policy tools for dealing with such a decision are limited and there is no federal grant funding left for states to use to build exchanges.

## TCAA participates in Roundtable on Bystanders: Our Nation's Immediate Responders

On April 29, 2015, Blaine Anderson, TCAA Chairman, and 50 senior leaders from 35 national organizations representing 9-1-1, allied health disciplines, emergency management, EMS, fire service, law enforcement, medicine, nursing and public health along with key federal personnel and National Security Council (NSC) staff participated in a Roundtable on a national initiative, Bystanders: Our Nation's Immediate Responders. This medical-preparedness initiative is a direct response to Presidential Policy Directive 8 (National Preparedness). The meeting was held at the Eisenhower Executive Office Building at the White House. The goal of the initiative is to build national resilience by better preparing the general public to save lives by raising awareness of techniques that can save lives by taking such basic actions as stopping life threatening bleeding. Our national preparedness is the shared responsibility of all levels of government, the private and nonprofit sectors, and individual citizens. As we have seen in such recent tragic incidents as the Boston Marathon bombings, anyone can contribute to safeguarding the Nation from harm. At the meeting, convened by the NSC staff, members of the federal interagency Bystander Workgroup reviewed progress on the initiative and received valuable input from participants. There was unanimous support for the Bystander initiative from the participants.



## Trauma Prevention Coalition Symposium and Summit Wednesday, September 9, 2015

The major trauma organizations have joined to present the 2015 Trauma Prevention Coalition Symposium and Summit in Las Vegas, NV. Take advantage of this unique opportunity to listen and share with your peers what you are the most passionate about, Injury Prevention. This year's Keynote Speaker will be Dr. Michael J. Sise, Medical Director, Division of Trauma, Scripps Hospital in San Diego, CA. Topics covered will include Injury Prevention and ACS, Injury Prevention program role and sustainability, evidence based practice projects and more!

### Trauma Center Members

#### Did You Know: You can add additional individuals at your facility to your member account?

Do you have additional individuals at your facility that would benefit from accessing the TCAA website. If you do, please add them as subaccount members. If you have any questions on how to add subaccount members, please contact the TCAA office or send an email to [Selinat@traumacenters.org](mailto:Selinat@traumacenters.org) or [Janet@traumacenters.org](mailto:Janet@traumacenters.org) and we will help you with the process.

[traumacenters.org](http://traumacenters.org)

## TCAA Annual Conference - Registration is now open!

### TCAA Annual Meeting September 22-23, 2015



### Preconference Courses

Injury Prevention Coordinator Course (ATS): *Sept. 20-21, 2015*

Trauma Registry Course (ATS):  
*Sept. 20-21, 2015*

TCAA Trauma Finance and Business Course : *Sept. 21, 2015*

### Post Conference Courses

Trauma Leadership Course:  
*Sept. 24-25, 2015*

Trauma Medical Director Course:  
*Sept. 24-25, 2015*

Trauma System Leadership Course  
*Sept. 23, 2015*

## TCAA Webinar

### Washington Update Including The Affordable Care Act after King v. Burwell

July 17, 2015

11am PT, 12pm MT, 1pm CT, 2pm ET

This webinar will provide updated information on the development and implementation of the Affordable Care Act, including the Supreme Court decision on the King v. Burwell case which is expected by the end of June. This seminal case could result in dramatic changes to the ACA. The webinar will also touch upon other matters of reimbursement policy and changes affecting trauma care. Further, it will provide an update on legislation to reauthorize and fund the trauma programs in the Public Health Service Act.

## ACS Verification—Congratulations!

The American College of Surgeons (ACS) verified Tuba City Regional Health Care Corporation as a level III Trauma Center. Dr. Ralph “Zane” Kelley and Shannon Johnson, RN, Director of Trauma Program Services, worked the last few years for the Level III designation with an initial consultation visit by ACS in 2013 and verification visit in 2014. Tuba City Regional Health Care Corporation is one of a limited number Arizona State designated and only the second Native American hospital to be ACS Verified.



### Trauma Center Members

#### Did You Know: TCAA is conducting two studies regarding compensation?

We are collecting data on Physician compensation and Trauma Center Staff compensation. We encourage all members to participate and share your data. Remember your individual data will be confidential. We will be aggregating the information for the reports. For more information or to participate, please contact the TCAA office at 575-525-9511.

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