## FY 2010 Georgia Trauma Commission: Individual Trauma Center Distributions

Trauma Center	Readiness Payment		Potential PBP Payments <sup>2</sup>	Total Readiness Payments	Uncompensated Care Payment		Total	%
Archbold	\$	427,443	\$48,535	\$475,978	\$	89,395	\$565,373	4.2%
Atlanta	\$	427,443	\$48,535	\$475,978	\$	540,964	\$1,016,942	7.5%
Columbus	\$	427,443	\$48,535	\$475,978	\$	81,566	\$557,544	4.1%
Floyd	\$	427,443	\$48,535	\$475,978	\$	58,058	\$534,036	4.0%
Gwinett	\$	427,443	\$48,535	\$475,978	\$	363,981	\$839,959	6.2%
Hamilton	\$	427,443	\$48,535	\$475,978	\$	26,472	\$502,450	3.7%
North Fulton	\$	427,443	\$48,535	\$475,978	\$	136,137	\$612,115	4.5%
Egleston	\$	427,443	\$48,535	\$475,978	\$	41,040	\$517,018	3.8%
Scottish Rite	\$	427,443	\$48,535	\$475,978	\$	39,836	\$515,814	3.8%
Level II Totals	\$	3,846,989	\$436,814	\$4,283,803	\$	1,377,447	5,661,249	41.9%
Averages	\$	427,443	\$48,535	\$475,978	\$	153,050	\$629,028	
Grady	\$	712,405	\$80,892	\$793,297	\$	2,763,553	\$3,556,850	26.3%
MCCG	\$	712,405	. ,	\$793,297		333,074	\$1,126,371	8.3%
MCG	\$	712,405	, ,	\$793,297		580,031	\$1,373,328	10.2%
Memorial	\$	712,405	, ,	\$793,297		989,301	\$1,782,598	13.2%
Level I Totals	\$	2,849,621	\$323,566	\$3,173,187	\$	4,665,959	7,839,147	58.1%
Averages	\$	712,405	\$80,892	\$793,297	\$	1,166,490	\$1,959,787	
Total		6,696,610	760,380	7,456,990		6,043,406	13,500,396	100.0%

Notes:

FY 2010 GTCNC Individual Trauma Center Distributions

A state-of-the-art performance based payment (PBP) program will be developed to encourage trauma centers perfomance improvement. First-year PBP criteria will be: submission of required data to OEMS&T; participation in the Georgia Trauma System Economic Assessment Survey; and, participation in a GTCNC-sponsored Trauma Center Readiness summit via webinar during early 2010. For the first-year (FY 2010), 5% of trauma center readiness funding will be subject to PBP process with this portion and PBP criteria expanding in future years. PBP funds paid will be from the trauma center readiness cost allocations.

Trauma Centers must agree to:

Administer physician funds at own cost.

Assure that at least 25% of funds allocated for readiness will be paid to eligible physicians providing trauma related services to patients receiving services at trauma center.

Assure they allocate 25% of their total uncompensated care funds to physicians. If excess funds are available, then these funds will be used for either trauma research or continuing medical education for physicians who serve that hospital's trauma service. Eligible physicians for participation in the uncompensated care fund are as follows: Emergency physicians, trauma surgeons, neurosurgeons, orthopedists/hand surgeons, plastics/maxillofacial surgeons, anesthesiologists, and radiologists.