



GEORGIA TRAUMA COMMISSION

Georgia Trauma Commission Budget Committee

October 16, 2023
Meeting Minutes

Meeting Documents Link
Zoom Meeting

| COMMITTEE MEMBERS PRESENT | COMMITTEE MEMBERS ABSENT |
|---|----------------------------------|
| Dr. Regina Medeiros, Chair, GTC Secretary/Treasurer | Courtney Terwilliger, GTC Member |
| Dr. Dennis Ashley, GTC Chair | |
| Dr. James Dunne, GTC Vice-Chair | |
| Pete Quinones, GTC Member | |
| Jesse Gibson, Northeast Georgia Medical Center | |
| Trauma Progam Director | |

| OTHERS PRESENT | REPRESENTING |
|-------------------|--|
| Elizabeth Atkins | Georgia Trauma Commission, Executive Director |
| Katie Hamilton | Georgia Trauma Commission, Finance Operations |
| Gabriela Saye | Georgia Trauma Commission, Executive Assistant |
| Brandi Fitzgerald | Phoebe Putney Memorial Hospital, TPM |
| Brian Church | Phoebe Putney Memorial Hospital, CFO |
| Jane Gray | Phoebe Putney Memorial Hospital, COO |

STANDING AGENDA ITEMS

CALL TO ORDER

A quorum was established at 3:00 PM on Monday, October 16, 2023, with five committee members present.

WELCOME NEW BUDGET COMMITTEE MEMBERS

Presented By Dr. Regina Medeiros

Dr. Medeiros welcomed Pete Quinones and Jesse Gibson as the new Budget Committee members. She expressed gratitude for their willingness to serve on the committee and work towards bringing stability and transparency to the budgeting process. After introductions, Dr. Medeiros moved to the approval of meeting minutes.

APPROVAL OF MEETING MINUTES

Presented By Dr. Regina Medeiros

Dr. Medeiros asked for a motion to approve the August meeting minutes.

MOTION GTCNC BUDGET COMMITTEE 2023-10-01:

Motion to approve August 28, 2023, meeting minutes as submitted.

MOTION BY: James Dunne **SECOND BY:** Dennis Ashley

VOTING: All members are in favor of the motion.

ACTION: The motion **PASSED** with no objections nor abstentions.

OPB DIRECTOR MEETING (3% ENHANCEMENT/1% REDUCTION)

Presented by Dr. Regina Medeiros

Dr. Mederios asked Dr. Ashley if he had the opportunity to contact the entities affected by the budget reduction. There was a concern about ensuring the affected entities heard about the budget cuts directly from the committee rather than discovering it from public sources. We need their support to demonstrate we don't have enough funds to support all initiatives, in addition to supporting the system stabilization and growth.

Dr. Medeiros provided a brief overview of the Office with the previous Office of Budget and Planning (OPB) change. OPB advised agencies to review programs that are underperforming or do not align with the mission and vision. Georgia Trauma Commission programs identified for proposed budget reductions were MAG MRC and GQIP Emory NSQIP due to not fully aligning with the Commission's mission and vision. Both programs will be reduced by \$35,281.50 each in the FY 2025 proposed budget. Dr. Ashley agreed to contact the entities affected by the Office of Business and Planning (OPB) budget changes.

The committee also discussed the need for grassroots education efforts to help legislators, especially in areas without trauma centers, understand the challenges and the need for financial support. Dr. Ashley raised a question regarding data related to previously unfunded trauma centers. He expressed the need for specific information regarding:

Part A

- The number of unfunded centers before FY 2024 and how long they went without funding.
- The amount allocated to fund these previously unfunded centers.
- How the budget cuts from other centers were adjusted to accommodate the funding for unfunded centers.
- The locations of the unfunded centers to determine their legislative representation.

The committee discussed the importance of having this data to support their advocacy efforts. Katie agreed to provide this data for further discussion. Dr. Medeiros stated it is important to note that the previously unfunded centers were also ACS-verified. Additional data recommendations included:

Part B

• Look into the number of designated centers in the pipeline and estimate the costs required to bring them into the system.

<u>Part C</u>

 Demonstrate the significant investment in our rural hospitals by increasing their readiness funding.

The conversation shifted to discussing start-up grants for centers and the need for a structured approach, focusing on funding sustainability and accountability for the funds. Some highlights included:

- The need for tighter structure in grant distribution and defining expectations under each grant.
- A workgroup of interested centers to gather input on challenges and how the grant funding could support them.

• There needs to be a commitment to sustainability after the grant funding is received to ensure centers can keep the resources they have to remain a verified center.

SUPER SPEEDER REVENUE SUMMARY

Presented by Katie Hamilton

Katie Hamilton reviewed **ATTACHMENT A**; Super Speeder revenue shows a positive trend with a 10% increase in cumulative variance compared to the previous year. It was noted the Super Speeder fines go into the trust fund, and the reinstatement fees, managed by the Department of Driver Services, go into the general fund. The reinstatement fees are subject to the Governor's budget and the legislative process. We also receive a portion of the fireworks excise tax, which arrives later in the year.

PROPOSED FY 2025 PERFORMANCE BASE PAYMENT CRITERIA

Presented by Elizabeth Atkins

Elizabeth Atkins reviewed **ATTACHMENT B** to note minor changes to the trauma/burn center FY 2025 performance-based pay criteria (PBP). PBP proposed changes included:

| All Centers | Rationale |
|--|--|
| 1. Added back maintenance of registry record closure rate of 80% within 60 days. | 1. Ensures contemporary data available for risk adjusted benchmarking |
| 2. GQIP data submission requirement timeframe | 2. Ensures contemporary data available for risk adjusted benchmarking |
| Level III Trauma Centers | Rationale |
| 1. ACS Verification requirement extended to FY 2026 | 1. ACS has extended timeframes for consultative visits due to backlog of visits from COVID and transition to new standards |
| Level IV Trauma Centers | Rationale |
| 1. NTDB data submissions changed to annual | Compliance with NTDB requirements and decrease burden of submissions |
| 2. Submission of PI Plan | 2. To ensure all level IV centers have a PI plan that addresses all required components to effectively identify and resolve patient care opportunities |

Elizabeth Atkins also briefly reviewed the criteria for contractors (**ATTACHMENT C**), noting no substantial changes from FY2024 requirements. Katie Hamilton advised the due dates are subject to change as meetings are scheduled. Elizabeth Atkins pointed out the proposed changes would need to be approved by the Budget Committee to bring forth to the full Commission in November to ensure contractors are aware of meeting requirements starting next calendar year. Other committees may have some feedback, but we will advise of any significant changes during the November meeting.

The committee also considered reviving the Contracts and Grants Workgroup to review the contracts with the trauma centers and vendors. A basecamp will be created to share contract documents for review and feedback.

Dr. Regina Medeiros reviewed the budget timeline (ATTACHMENT D), emphasizing the need to adhere to it for a smooth budget process. The goal is to minimize the need for additional changes.

MOTION GTCNC BUDGET COMMITTEE 2023-10-02:

Motion to the preliminary FY 2025 performance-based payment criteria

MOTION BY: Jesse Gibson **SECOND BY:** Pete Quinones

VOTING: All members are in favor of the motion.

ACTION: The motion **PASSED** with no objections nor abstentions.

SUMMARY OF ACTION ITEMS & ADJOURNMENT

Before adjourning, Elizabeth Atkins advised that the Trauma System Planner role has been pushed through Human Resources and will be open for applicants; there will be more updates during the November Commission.

Dr. Ashley expressed appreciation for Dr. Medeiros's committee organization. Dr. Medeiros recognized Katie Hamilton as an essential contributor to the success of the budget committee meetings.

- New budget committee members Jesse Gibson and Pete Quinones were welcomed.
- Dr. Ashley agreed to contact the two entities affected by the Office of Budget and Planning (OPB) budget changes.
- Katie agreed to provide Dr. Ashley with the discussed data points to support the funding advocacy efforts:

Part A

- The number of unfunded centers before FY 2024 and how long they went without funding.
- The amount allocated to fund these previously unfunded centers.
- How the budget cuts from other centers were adjusted to accommodate the funding for unfunded centers.
- The locations of the unfunded centers to determine their legislative representation.

Part B

• Look into the number of designated centers in the pipeline and estimate the costs required to bring them into the system.

Part C

- Demonstrate the significant investment in our rural hospitals by increasing their readiness funding.
- Super Speeder was reviewed and showed a positive trend with a 10% increase in cumulative variance compared to the previous year (ATTACHMENT A)
- The committee approved the preliminary FY 2025 performance-based pay criteria (ATTACHMENT B & C)
- A basecamp will be created to share contract documents for review and feedback.

MOTION GTCNC BUDGET COMMITTEE 2023-10-03:

Motion to adjourn

MOTION BY: James Dunne **SECOND BY:** Dennis Ashley

VOTING: All members are in favor of the motion

ACTION: The motion **PASSED** with no objections and no abstentions

The meeting adjourned at 4:30 PM

Minutes by G. Saye