



# Wisconsin Medical Society

Your Doctor. Your Health.

March 6, 2002

To: Members of the Senate Committee on Health, Utilities, Veterans and  
Military Affairs  
From: Alice O'Connor, Vice President for Advocacy and Policy  
R.J. Pirlot, Legislative Counsel  
Subject: **SUPPORT** for Assembly Bill 743, Statewide Trauma System

---

In light of the September 11, 2001, tragedy and its effect on Wisconsin and our country, trauma system preparedness is now seen as a higher priority than ever before. As such, we strongly support Assembly Bill 743. Moreover, Governor McCallum has included a similar provision in his proposed budget reform bill.

Fully funding the statewide trauma system will help allow for implementation of a coordinated plan for pre-hospital and hospital-based trauma care in Wisconsin. In light of the recent tragic events, it is clear that a statewide, coordinated system should be a top priority. Funding will be used to hire a trauma system coordinator and for the development and implementation of regional trauma advisory councils. Wisconsin's ability to respond to bio- or chemical terrorism is dependent on a coordinated, statewide trauma system. We believe being prepared and coordinated across the state is crucial to saving lives and reducing injuries, should tragic events occur.

The Wisconsin Medical Society respectfully requests you **support** concurrence in **Assembly Bill 743**.

Thank you for your consideration.



# Judith B. Robson

Wisconsin State Senator

*Testimony of Senator Judy Robson  
Assembly Bill 743  
Senate Committee on Health, March 6, 2002*

Senator Moen and Members of the Committee:

Thank you for the opportunity to testify on this bill.

Several sessions ago, a Legislative Council study committee on EMS issues recommended legislation regarding a statewide trauma system. This legislation was enacted and directed the Department of Health and Family Services to implement a statewide trauma system and created a trauma advisory council composed of emergency room directors, nurses and other trauma experts to give the department professional expertise in developing the trauma system.

The council and the department have completed planning for a statewide trauma system, but this plan has not yet been implemented because no money has been allocated for this purpose. In addition, without further action by the Legislature, the trauma advisory council will terminate on July 1, even though the trauma system has not been put in place.

This bill extends the termination date for the trauma advisory council for two years. In addition, the bill provides funding to implement the trauma system.

Why do we need a trauma system? A trauma system will improve our ability to prevent needless deaths and disabilities resulting from accidents. A trauma system will also organize the care of trauma victims on regional basis, ensuring the availability of appropriate care at the scene of an accident, in transport, at the hospital, and in rehabilitation. The effectiveness of the system will be monitored through a trauma registry.

Data from states that have already implemented trauma systems show an average reduction in trauma deaths of 15%; a 9% reduction in motor vehicle trauma deaths; and a 15% reduction in hospital costs.

Among other benefits, the trauma advisory council estimates that a system in Wisconsin would generate approximately \$4 million annually in State income taxes by preventing active wage earners from leaving their jobs.

The source of funding in this bill for the trauma system is federal grant money that is earmarked for making highways safer. Use of this money is appropriate for funding the trauma system since deaths in motor vehicle crashes make up 41% of all unintentional injury deaths and 61% of unintentional injury deaths for people aged 1 to 44. In 1996, motor vehicle crashes required 8731 hospitalizations in (second only to falls), with estimated hospital costs of \$120 million.

With a trauma system we could reduce these human and financial losses. Moreover, the events of September 11 have made us all realize the need to have a well organized medical system capable of handling large scale tragedies. A trauma system will help us achieve this goal.

Because this bill makes human and financial sense, the Assembly Committee on Health and the full Assembly gave their approval on unanimous votes. Please join me in supporting this legislation.

March 6, 2002

To: Members of the Senate Health Committee

From: Bill Bazan, Vice-President, Metro Milwaukee, WHA

Re: **SUPPORT FOR ASSEMBLY BILL (AB) 743 – FUNDING FOR REGIONAL TRAUMA ACTIVITY AND IMPLEMENTATION**

**THE WISCONSIN HEALTH AND HOSPITAL ASSOCIATION (WHA) FULLY SUPPORTS AB 743.**

Traumatic injuries are the leading cause of death and disability among the 1– 44 age group and are recognized as a major public health problem here in Wisconsin. To assist in addressing this problem of treating and caring for victims of trauma, Wisconsin is implementing an inclusive, comprehensive regional trauma care system that integrates all components of patient care, including prevention, out-of-hospital care, acute care and rehabilitation. The goal of this newly designed trauma system is to match each region's health care resources with the needs of the traumatically injured patient, ensuring optimal care and return to his/her community.

**In order for this optimal trauma system to be implemented, there is a need for the funding that AB 743 sets forth for your approval today.**

The State Trauma Advisory Council (STAC) has identified Regional Trauma Advisory Councils (RTACs) as the necessary and vital infrastructure of a Wisconsin trauma care system in which development, implementation, and evaluation of regional plans can be accomplished effectively. The purpose of the RTACs is to work in collaboration with STAC, the Department of Health & Family Services and its Bureau of Emergency Medical Services (EMS) and Injury Prevention and all other entities involved with and affected by injury. All parties will collaboratively design, implement and evaluate a flexible trauma system that is based on, and sensitive to, the needs of each regional area.

The funding and the removal of the sunset clause for STAC are important elements in the development of the RTACs in order to maintain continuity of care and to avoid a fragmented system of trauma care in Wisconsin. I offer you the following principles to assist you in your deliberations:

(over)



Wisconsin Health &  
Hospital Association, Inc.

5721 Odana Road  
Madison, WI  
53719-1289

608/274-1820

FAX: 608/274-8554

<http://www.wha.org>

- All citizens of Wisconsin are affected by injury; therefore, the implementation and evaluation of the trauma care system and RTACs in particular, will include collaborative efforts among all injury care providers, participants, entities and individuals that have an interest in improving the quality of life in Wisconsin.
- RTACs will serve as the unifying foundation to bring all local, regional, state and federal agencies together for the planning, education, training and prevention efforts needed to assure the exemplary care needed, pre and post injury, for everyone in Wisconsin. This will include exploring opportunities in emergency preparedness for mechanical, biological and chemical threats.
- The Bureau of EMS and Injury Prevention will serve as the coordinating agency and will be responsible for oversight and administrative support of the RTACs, the promulgation of administrative rules, the oversight of the hospital classification process, and the development and maintenance of a trauma registry.

Having served as a participant in the workings and deliberations of the State Trauma Advisory Council since its inception nearly 2 years ago, the Wisconsin Health and Hospital Association recognizes and deeply appreciates the dedication and commitment of the STAC members. Along with physicians, emergency and trauma nurses, firefighters, hospital trauma coordinators from rural and urban areas, air medical units, county emergency management, emergency medical service personnel, and other interested entities, we recognize the need for the development and implementation of a regionally based, trauma care system here in Wisconsin. It is with this in mind that WHA fully supports the passage of AB 743.

Thank you for your consideration.

## TRAUMA SYSTEM BILL TALKING POINTS (AB743)

- DOT supports the concept of a trauma system, but opposes the bill because of its requirement that the system be funded using federal grant moneys from the WisDOT.
- WisDOT receives funds that are Discretionary and Categorical in nature. These funds are earmarked for specific program areas and cannot be used for the purpose of funding a statewide trauma system. That would only leave the Section 402 funding received by the Bureau of Transportation Safety.
- Congressional purpose of Section 402 funding is to decrease highway transportation related crashes, deaths and injuries in the most effective and efficient manner. Section 402 funds may be used only to reduce highway transportation related trauma. This bill requires the 402 funds support the entire system.
- Over the past several years approximately 12% of all trauma hospitalizations in WI were transportation related. Section 402 funds must be pro-rated if they contribute to broader injury programs.
- Section 402 funds are heavily regulated and the federal government can intervene to discontinue Wisconsin's highway safety program if the funds are not used for the purposes and following the procedures in federal statute and regulation. Funds must be distributed through an annual highway safety plan that contains performance standards and criteria.
- The effective uses of Section 402 funds are problem identification, development and study of innovative programs and projects for the prevention of highway transportation related crashes, deaths and injuries.
- National research has demonstrated that prevention programs are much more cost effective. Wisconsin's annual highway safety plan supports prevention programs.
- The National Highway Traffic Safety Administration (NHTSA) has expressed concerns about using Section 402 funding for the statewide trauma system. (copy of a letter attached)
- WisDOT believes that funds from other sources specifically targeted for emergency response systems should be used to fund the statewide trauma system.



U.S. Department  
of Transportation

National Highway  
Traffic Safety  
Administration

Region V  
Illinois, Indiana, Michigan  
Minnesota, Ohio, Wisconsin

19900 Governors Drive, Suite 201  
Olympia Fields, IL 60461  
(708) 503-8822  
(708) 503-8991 FAX

January 24, 2002

Gene E. Kussart  
Secretary, Wisconsin Department of Transportation  
Governor's Representative for Highway Safety  
4802 Sheboygan Avenue  
Madison, WI 53707

Dear Secretary Kussart:

I have been made aware that a bill has been introduced in the Wisconsin Legislature establishing a Statewide Trauma Care System and transferring \$125,000 in state fiscal year 2001-2002 and \$500,000 in state fiscal year 2002-2003 from the Wisconsin Highway Safety Program to the Department of Health and Family Services. The bill directs that these funds be used to support two positions in the Department of Health and Family Services and to establish and support regional trauma advisory councils.

I am concerned about this legislation for a number of reasons. It ignores the state's highway safety planning process; it abrogates the Governor's responsibility to administer Wisconsin's 402 program through a single Highway Safety agency and it directs highway safety funds to be used for non highway safety-related purposes.

First, it ignores the state's highway safety planning process. Federal law is the controlling law on the use of 23 USC Section 402 State and Community Highway Safety Grant Program funds. While Wisconsin may obligate these Federal grant funds for any project eligible for assistance under Title 23, United States Codes, including certain EMS expenditures related to traffic safety, Section 402 requirements and procedures apply.

Section 402 requirements and procedures include the requirements that the funds be used for traffic safety purposes, that the Governor be responsible for administering the program through a suitably equipped State highway safety agency, that the program be federally approved and that the requirements and procedures appearing the 23 CFR Subchapters B and C are followed.

01/24/02

None of the requirements in the pending Trauma System bill is controlling, as the submission and approval procedures applicable under Section 402 must be followed by the Wisconsin Department of Transportation to obligate these funds.

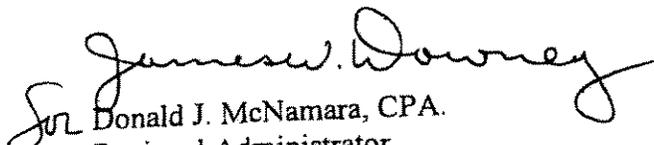
Second, the trauma system legislation presents inconsistencies with the applicable federal requirements. It appropriates monies directly from the Department of Transportation to the Department of Health and Family Services, abrogating the Governor's responsibility under Section 402 to administer the program through the Bureau of Transportation Safety, Wisconsin's highway safety agency.

While Federal funds may be used under the Section 402 program for EMS activities that have an impact on traffic safety, and the Wisconsin Department of Transportation may exercise the traditional role of the State highway safety agency by transferring 402 funds to the Department of Health and Family Services for any such EMS activities, provided they are properly described in the Wisconsin's Highway Safety Performance Plan and other relevant Section 402 procedures are followed, the Wisconsin Department of Transportation must continue to administer the funds and the application of State law provision may not result in the failure to follow Federal requirements.

23 USC 402 (j) and implementing regulations at 23 CFR Part 1205 establish a "problem identification" mechanism by which the state seeks approval in its Highway Safety Performance Plan for expenditures of all Section 402 funds, including EMS funds. The Wisconsin Legislation would skirt the federally-required problem identification process by earmarking a portion of the federal funds for EMS improvements. During the development of Wisconsin's federal 2002 Highway Safety Performance Plan, the question of supporting any part of system development was addressed, and was determined to be an ineffective use of these limited funds.

Finally, the trauma system legislation contemplates broad EMS and trauma care uses by state and regional system components. Only that portion of trauma system operation relating to highway traffic safety may be funded using 402 funds. As part of the required highway safety planning process, extensive problem identification and program justification is undertaken. Wisconsin has excellent data and uses them effectively in allocating its 402 funds to various programs, projects and activities affecting highway crashes, injuries and deaths. Their data indicate that only about 12 percent of trauma system use is related to highway transportation injury, and thus not more than that proportion of system costs may be funded using 402 funds.

Sincerely,

  
Donald J. McNamara, CPA.  
Regional Administrator

# Vote Record

## Senate - Committee on Health, Utilities, Veterans and Military Affairs

Date: 3/6/02  
Bill Number: AB 743  
Moved by: Robson Seconded by: Meyer  
Motion: Concurrence

<u>Committee Member</u>	<u>Aye</u>	<u>No</u>	<u>Absent</u>	<u>Not Voting</u>
Sen. Rodney Moen, Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Roger Breske	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Judith Robson	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Jon Erpenbach	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Mark Meyer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Peggy Rosenzweig	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Robert Cowles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Scott Fitzgerald	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Mary Lazich	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Totals: \_\_\_\_\_



# Wisconsin Medical Society

Your Doctor. Your Health.

March 8, 2002

To: Members of the Wisconsin Legislature

I realize the difficult decisions you have to make to balance the state budget. While physicians do not necessarily like every decision that has been made, the 9,000 members of the Wisconsin Medical Society do want to acknowledge the efforts on both sides of the aisle in the Joint Committee on Finance for their support on issues affecting physicians' patients.

## **Protecting the Poor, the Disabled and the Elderly**

I also sincerely appreciate the Joint Committee on Finance's bipartisan support of Governor Scott McCallum's decision to protect key programs that benefit the poor, disabled and elderly. We also commend the committee for exempting Wisconsin's new senior prescription drug assistance plan, medical assistance, BadgerCare, the "Birth-to-Three" program for disabled children, and the immunization registry from proposed reforms. Moreover, I am pleased the Governor and the Joint Committee on Finance allocated an additional \$75 million to Medical Assistance, recognizing the estimated increase in the Medical Assistance population. The Wisconsin Medical Society will work with you to help ensure these programs are protected as the Governor's proposed budget reform bill is debated in the Legislature.

## **Tobacco Settlement Dollars**

As you know, the Wisconsin Medical Society is greatly troubled by the proposed use of all tobacco settlement proceeds to balance the budget, rather than dedicating a significant amount to support tobacco prevention efforts. I applaud efforts by members of both the Assembly Republican Caucus and the Senate Democratic Caucus to restore significant dollars for the tobacco endowment funds. Benefits reaped for decades to come, by protecting future generations of children from tobacco related illnesses and premature death, is a worthy goal. The Wisconsin Medical Society will continue to work in a bipartisan fashion, as we always have, to protect tobacco prevention dollars.

## Statewide Trauma System

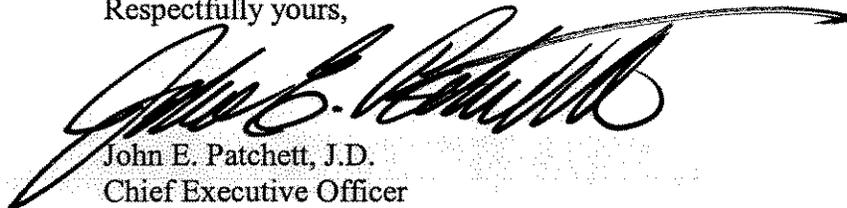
In addition, Governor McCallum proposed, and the Joint Committee on Finance approved, appropriating substantial funding to support the statewide trauma system. This will help allow for implementation of a coordinated plan for pre-hospital and hospital-based trauma care in Wisconsin. In light of the recent tragic events, it is clear that a statewide, coordinated system should be a top priority. Wisconsin's ability to respond to bio- or chemical terrorism is dependent on a coordinated, statewide trauma system. The Wisconsin Medical Society strongly supports this initiative.

I know bipartisan cooperation will be needed to resolve the current fiscal crisis. The 9,000 physicians of the Society want to continue caring for patients and your decisions facilitate or impede their efforts. I recognize that utilizing some of the tobacco settlement proceeds, as part of a comprehensive measure to balance the budget, is a reality. However, we should not lose a once-in-a-lifetime opportunity to make a real and lasting difference, which will save significant amounts of money in future public health costs.

Thank you for your leadership in these difficult times.

For more information, please contact either Alice O'Connor (608-442-3767) or R.J. Pirlot (608-442-3768) of the Wisconsin Medical Society.

Respectfully yours,



John E. Patchett, J.D.  
Chief Executive Officer