

TITLE 7 HEALTH
CHAPTER 27 EMERGENCY MEDICAL SERVICES
PART 9 TRAUMA SYSTEM FUND

7.27.9.1 ISSUING AGENCY: New Mexico Department of Health.
[7.27.9.1 NMAC - N, 02/29/2008]

7.27.9.2 SCOPE: The Trauma System Fund Authority shall apply to requests made for funds available pursuant to the Trauma System Fund Authority Act, Sections 24-10E-1, et seq, NMSA 1978.
[7.27.9.2 NMAC - N, 02/29/2008]

7.27.9.3 STATUTORY AUTHORITY: This rule is promulgated pursuant to the following statutory authorities 1) the Department of Health Act, Section 9-7-6E., NMSA 1978, which authorizes the secretary of the department of health to “make and adopt such reasonable and procedural rules and regulations as may be necessary to carry out the duties of the department and its divisions”, and 2) the Trauma System Fund Authority Act, Section 24-10E-7., NMSA 1978, which authorizes the department of health to adopt rules to carry out the provisions of the act.
[7.27.9.3 NMAC - N, 02/29/2008]

7.27.9.4 DURATION: Permanent.
[7.27.9.4 NMAC - N, 02/29/2008]

7.27.9.5 EFFECTIVE DATE: 02/29/2008, unless a later date is cited at the end of a section.
[7.27.9.5 NMAC - N, 02/29/2008]

7.27.9.6 OBJECTIVE: The objective of Part 9, Chapter 27 is to establish standards and procedures for funding programs under the Trauma System Fund Authority Act. These standards and procedures are designed for the purpose of making funds available to sustain existing trauma centers, support the development of new trauma centers, and develop a statewide trauma system. This rule will inform New Mexico hospitals and other trauma system stakeholders of the procedures to access funds. The department of health through the emergency medical systems bureau, will administer the fund pursuant to the Trauma System Fund Authority Act and this rule.
[7.27.9.6 NMAC - N, 02/29/2008]

7.27.9.7 DEFINITIONS:

- A. “Accumulation”** defined as the prior approved expenditure or disposition in the current fiscal year of funds distributed in the fiscal year.
- B. “Act”** defined as the Trauma System Fund Authority Act, Section 24-10E-1, et seq, NMSA 1978.
- C. “Authority”** defined as those individuals, representing specific agencies, organizations and individuals appointed by the governor to serve on the Trauma System Fund Authority pursuant to Section 24-10E-4, B., NMSA 1978.
- D. “Bureau”** defined as the emergency medical systems bureau of the epidemiology and response division, New Mexico department of health.
- E. “Chief”** defined as the chief of the emergency medical systems bureau.
- F. “Department”** defined as the New Mexico department of health.
- G. “Designated trauma centers”** defined as those hospitals or other healthcare facilities designated by the department as having met the requirements of the rule 7.27.7 NMAC, “Trauma Care System” as a level I, II, III, or IV trauma center.
- H. “Director”** defined as the director of the epidemiology and response division.
- I. “Division”** defined as the epidemiology and response division.
- J. “Emergency medical services (EMS)”** defined as the services rendered by emergency medical technicians, licensed emergency medical services first responders or emergency medical dispatchers in response to an individual’s need for immediate medical care to prevent loss of life or aggravation of physical or psychological illness or injury.
- K. “Fiscal year”** defined as the state fiscal year that runs from July 1 through June 30 each year.
- L. “Fund”** defined as the trauma system authority fund.

M. “Injury prevention program” defined as a planned activity with a defined purpose, stated objectives, implementation schedule and an evaluation component that seeks to prevent or reduce illness or injury. Examples include but not limited to bicycle helmet promotion, seat belt awareness campaign, child care seat distribution program, driving while intoxicated (DWI) prevention and first aid training.

N. “Secretary” defined as the secretary of the New Mexico department of health.

O. “Trauma registry” defined as a database that documents and integrates medical and system information related to the provision of trauma care by hospitals or healthcare facilities.

P. “Trauma advisory system stakeholders committee (TAC)” defined as the statewide committee on trauma comprised of pre-hospital, hospital, rehabilitation, injury prevention and system support staff involved in trauma care established pursuant to the EMS Act.

Q. “Uncompensated trauma care” defined as the difference between the costs incurred by a hospital in providing the service and the amount that the hospital has been paid for providing the service.
[7.27.9.7 NMAC - N, 02/29/2008]

7.27.9.8 DUTIES OF THE BUREAU: On behalf of the department, the bureau shall provide administrative and staff support to the authority, including the administration and distribution of the fund, pursuant to oversight by the authority in conformance with the act and this rule.
[7.27.9.8 NMAC - N, 02/29/2008]

7.27.9.9 DUTIES OF THE AUTHORITY: The authority shall:

A. develop criteria by which distribution of funds to existing trauma centers and potential new centers will occur;

B. receive applications and determine and monitor the actual distribution of money from the fund that will support the development of a statewide system of trauma care;

C. oversee the department’s administration of the fund and development of a trauma system;

D. report annually to the interim legislative health and human services committee and the legislative finance committee.

[7.27.9.9 NMAC - N, 02/29/2008]

7.27.9.10 ANNUAL REPORT: The authority shall prepare an annual written report that includes a summary of the current fiscal year distribution from the fund, including the number of approved applications and amount awarded to sustain existing trauma centers, support the development of new trauma centers, and develop a statewide trauma system. In addition, the report will include an assessment of progress and remaining challenges to achieve the purposes of the act. The report shall be made to the interim legislative committees and made available to public entities and the public on request.

[7.27.9.10 NMAC - N, 02/29/2008]

7.27.9.11 EXISTING TRAUMA CENTER FUNDING PROGRAM: The purpose of this program is to sustain existing New Mexico trauma centers to ensure optimal care for those who suffer traumatic injuries.

A. Eligibility: subject to the availability of the funds in the trauma system fund, facilities that are currently designated by the department as trauma centers may apply for financial support under this rule.

B. Application process: annually, prior to the start of each state fiscal year, eligible trauma centers may apply to participate in the existing trauma center funding program by submitting the application forms in a timely manner, as prescribed by the authority and distributed by the bureau. Such application forms will include, but not be limited to:

(1) identifying information;

(2) assurances from the trauma center’s governing authority;

(3) de-identified data regarding trauma patients served during a specified previous time period according to the case-inclusion criteria of the trauma registry;

(4) financial data associated with those trauma patients including charges, collections, and uncompensated trauma care;

(5) a plan of expenditure for the amount requested from the fund.

C. Funding amounts: Based upon the allocation decision by the authority in 7.27.9.12 NMAC, the following formula will be applied to determine the annual funding for each existing trauma center with an approved application:

(1) an allocation will be made to each trauma center based on their level of designation subject to the availability of funds;

(2) additionally, level I, II, and III trauma centers will receive their share of the remaining dollars in the existing trauma center funding program, based upon their relative share of uncompensated trauma care for these centers as determined by the authority.

D. Award of funds: The authority shall approve the applications and the funding amounts for each existing trauma center no later than July 31st. The department shall prepare a written agreement with each existing trauma center awarded funding under this rule that reflects the term and amount of the award, and the expectations and conditions for receiving the award, including fiscal accountability and reporting requirements.

E. Use of funds: Funds awarded under the existing trauma center funding program must be used to support, sustain, or enhance the trauma program including support for trauma-related clinical and administrative personnel on-call costs for trauma program as determined by the authority.

F. Accumulation: It is anticipated that the entire amount of the annual award to each existing trauma center will be spent during the fiscal year in which it is awarded. In the event that the entire amount cannot or will not be expended, the trauma center must return the unexpended balance to the department, unless it submits an accumulation and expenditure plan that is approved by the authority prior to the close of the fiscal year in which it was awarded. The authority may approve up to one additional fiscal year to expend the balance.

G. Change in trauma center designation status: If an existing trauma center fails to maintain its level of trauma center designation following an award under this rule, the authority shall review all the pertinent information and determine what amount, if any, the department shall recover from the trauma center.

[7.27.9.11 NMAC - N, 02/29/2008]

7.27.9.12 DEVELOPING TRAUMA CENTER FUNDING PROGRAM: The purpose of this program is to support the development of new trauma centers to enhance the overall statewide trauma system.

A. Eligibility: Any facility that has submitted a letter of intent to the bureau to become a designated trauma center under 7.27.9 NMAC prior to the issuance of the application for this developing trauma center funding program shall be deemed eligible to apply.

B. Application process: Annually prior to the start of each state fiscal year, hospitals or healthcare facilities that have submitted a timely letter of intent to become a designated trauma center and desired level of designation, may apply to participate in the developing trauma center funding program. Such hospitals/healthcare facilities shall submit the application forms in a timely manner, as prescribed by the authority and distributed by the bureau. Such application forms will include, but not be limited to:

(1) identifying information;

(2) assurances from the trauma center's governing authority;

(3) a detailed plan to become a designated trauma center with time frames, milestones, and an associated budget which specifically indicates how funding under the program will be utilized in the coming fiscal year.

C. Funding amounts: Based upon the allocation decision by the authority in 7.27.9.2 NMAC, the authority will annually establish an award for each developing trauma center. The authority will consider the merits of each application under the developing trauma center funding program and will determine the actual award for each applicant.

D. Award of funds: The authority shall approve the applications and the funding amounts for each developing trauma center no later than July 31st. The department shall prepare a written agreement with each developing trauma center awarded funding under this rule that reflects the term and amount of the award, and the expectations and conditions for receiving the award, including fiscal accountability and reporting requirements.

E. Use of funds: Funds awarded under the developing trauma center funding program must be used to support the developing trauma program as determined by the authority.

F. Accumulation: It is anticipated that the entire amount of the annual award to each developing trauma center will be spent during the fiscal year in which it is awarded. In the event that the entire amount cannot or will not be expended, the developing trauma center must return the unexpended balance to the department, unless it submits an accumulation and expenditure plan that is approved by the authority, prior to the end of the fiscal year in which it is awarded. The authority may approve up to one additional fiscal year to expend the balance.

G. Eligibility limit: Under the developing trauma center program there is a limit of two fiscal years during which designation as a trauma center must be achieved by a developing trauma center. If designation is not achieved during this time period, the authority shall review the circumstances and all pertinent information determining what amount if any, the department shall recover, from developing trauma center.

[7.27.9.12 NMAC - N, 02/29/2008]

7.27.9.13 TRAUMA SYSTEM DEVELOPMENT PROGRAM: The purpose of this program is to provide financial support to various statewide system development activities, initiatives, agencies, or programs, as prioritized annually by the authority. The amount of funds available in a given fiscal year will be based upon the allocation decision by the authority in 7.27.9.11 NMAC.

A. System development priorities: Prior to each fiscal year, the authority shall establish priorities for statewide system development activities and initiatives. These priorities shall be communicated to the (TAC) and to the bureau.

B. Proposals solicited and reviewed: Early each fiscal year, the bureau, with guidance from the TAC, will widely distribute a request for applications to meet the system development priorities as specified by the authority. All applications received in a timely manner on the forms specified by the bureau will be reviewed and considered by the TAC.

C. Recommendations to the authority: Based upon their review, the TAC will make written recommendations to the authority for which system development applications warrant funding and at what levels.

D. Funding decisions: The authority will review the system development applications and the recommendations from the TAC, in making their funding decisions under the trauma system development program.

E. Award of funds: The authority shall approve the trauma system development applications and the funding amounts no later than July 31st.

[7.27.9.13 NMAC - N, 02/29/2008]

7.27.9.14 GENERAL PROVISIONS:

A. Spending flexibility: If in any fiscal year, the authority decides not to spend the entire amount allocated under any of the three trauma system funding programs as initially decided in 7.27.9.12 NMAC, the authority, at their discretion, may re-allocate that amount to either or both of the remaining funding programs for expenditure in that fiscal year.

B. Procedures for reconsideration: Applications applying for and funding under this rule may request a reconsideration of their funding amount by notifying the bureau in writing within ten (10) working days after notification to the applicant of the authority's funding determination. The authority must review the reconsideration request within thirty (30) working days and issue a final written determination within ten (10) working days of their review.

C. Oversight, inspection, and audit: The authority, working with and through the department, is responsible for the oversight of expenditures from the fund and the development of the statewide trauma system. All recipients of trauma funds under the act shall be subject to reasonable oversight and as needed, visitation by authorized representatives of the bureau or the authority. Records of purchases, training programs, or personnel expenditures accomplished with awards from the fund shall be open for inspection. This oversight may include an objective audit if deemed necessary. Findings from all oversight activities will be shared with the fund recipient and as appropriate a written deficiency correction report may be requested.

D. Monitoring and accountability: The bureau will be responsible for monitoring the trauma system development program and for periodically, but no less than annually, reporting the progress or results to both the TAC, and the authority.

[7.27.9.14 NMAC - N, 02/29/2008]

HISTORY OF 7.27.9 NMAC: [RESERVED]