



MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (EMSTS)

DIVISION OF COMMUNITY HEALTH

TRAUMA SYSTEM ADVOCACY COMMITTEE

June 06, 2016 - 2:00 P.M.

MEMBERS PRESENT

Erin Breen, UNLV, Chairman
Kim Dokken, RN, St. Rose Siena
Senator Shirley Breeden

Gail Yedinak, UMC
Abby Hudema, UMC
Alma Angeles, RN, Sunrise

MEMBERS ABSENT

Dennis Nolan, Vice Chair
Kate Osti, Disability Advocacy & Law Center
Cindy Lubiarz, RN, Care Meridian

Senator Joyce Woodhouse
Carl Nelson

SNHD STAFF PRESENT

Christian Young, MD, EMSTS Medical Director
Michael Johnson, Ph.D, Director of Community Health
Heather Anderson-Fintak, Associate Attorney
Judy Tabat, Recording Secretary

John Hammond, EMSTS Manager
Joseph Iser, MD, Chief Health Officer
Edie Mattox, Administrative Secretary

PUBLIC ATTENDANCE

Stacy Johnson, RN, MountainView Hospital

Andrew Eisen, MD, VHS

CALL TO ORDER – NOTICE OF POSTING

The Trauma System Advocacy Committee convened in the Red Rock Trail Conference Room at the Southern Nevada Health District located at 280 S. Decatur Boulevard on Monday, June 06, 2016. Chairman Erin Breen called the meeting to order at 2:10 p.m., and the Affidavit of Posting was noted in accordance with the Nevada Open Meeting Law. Chairman Breen noted that a quorum was present.

- I. **PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the Agenda. Comments will be limited to five (5) minutes per speaker. Please step up to the speaker's podium, clearly state your name and address, and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chairman or the Board of majority vote.

Chairman Breen asked if anyone wished to address the Committee pertaining to items listed on the Agenda. Seeing no one, she closed the Public Comment portion of the meeting.

- II. **CONSENT AGENDA:** Items for action to be considered by the Southern Nevada District Board of Health which may be enacted by one motion. Any item may be discussed separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

Approve Minutes/Trauma System Advocacy Committee: April 25, 2016

Chairman Breen asked for approval of the minutes from the April 25, 2016 meeting. A motion was made

by Member Hudema, seconded by Member Angeles, and carried unanimously to approve the minutes as written.

III. REPORT/DISCUSSION/POSSIBLE ACTION

A. Workshop Report: Trauma System Advocacy Workshop

1. Review Minutes from 2015 Legislative Session
2. Ideas for Funding the Clark County Trauma System

Ms. Dokken informed the Committee that they reviewed the minutes from the 2015 legislative session and discussed alternative ideas for funding. They discussed marijuana funding but decided not to go that route because funding may dwindle after the first 18 months and decided to continue to pursue last sessions \$1 trauma user's fee on insurance company policies.

Chairman Breen felt they have their work cut out for them because it was their job to convince the insurance companies. She added that she sat on an advisory committee last week for the RTC and noted they had a very influential group of people attend. Amongst those was Guy Hobbs who has significant experience working with the State Legislature and local government. She felt he would be someone that they should ask his advice on how to get the bill passed. He's currently acting as a consultant for the RTC but we would want him to come in as an unpaid advisor. She advised that she will try and get his contact information and reach out to him.

Ms. Dokken remarked that she met with her CEO, lobbyist Chris Ferrari, and advocacy rep Katie Ryan and they suggested making a case to the Las Vegas Convention and Visitors Authority (LVCVA) for alternate funding.

Ms. Yedinak stated that the LVCVA gets all the revenue from the Las Vegas specialty license plate which is a considerable amount of money. She wasn't sure but felt that they have some leeway as to how they spend that money as long as it has a statewide purpose.

Dr. Iser stated that it would have a statewide purpose if it followed along the guidelines of Senator Woodhouse's bill but felt it wouldn't be enough because they were planning on this bill bringing in 2.7 million dollars statewide on an annual basis.

Chairman Breen felt that with all the city wide projects going on, that money is already earmarked for other projects.

Dr. Iser felt it would be a good alternate for one time funding and stated that they now have a not-for-profit that could accept those funds and use them in the way the trauma system would like them to be used but they would still need to seek some other form of permanent funding.

Ms. Angeles stated that the only way to find out if LVCVA has money available is to ask.

Chairman Breen added that there was also discussion with regard to there being an equitable population split on that money and to try and get oversight of that funding.

Dr. Iser agreed and stated that it would be a proportional split on population or insurance policies between the Health District and the Division. He added that he they hadn't considered where the oversight would come. He thought someone was going to check into whether the State Insurance Commissioner would have that oversight.

Chairman Breen stated that the best they can do is to have it be proportional to population and so they need to discuss how much they are going to charge us for that oversight. Dr. Iser asked if she wanted that oversight to be a direct pass through with no fees to be part of the motion. Chairman Breen questioned if that would hurt them. Dr. Iser stated that he didn't know and felt it would be up to Senator Woodhouse.

Chairman Breen stated that one issue that is going to come up is what if someone changes insurance companies, are they going to pay a \$1 fee again. Dr. Iser stated that was what the insurance industry was arguing against. They didn't want to have to prorate back a piece of a \$1. Chairman Breen felt that the \$1 fee would be for every new policy written regardless of whether you paid it already. They would like to take the difficulties out of it and say for every new policy written.

Chairman Breen asked for a motion to accept the recommendation of the TSAC Workshop to continue to pursue the \$1 trauma user's fee on every new policy written per homeowner and vehicle as a funding mechanism for the statewide EMS & Trauma System. The monies collected shall be proportional split between SNHD and the State creating a direct pass thru with no fees assessed. Motion made by Member Hudema, seconded by Member Angeles and carried unanimously.

Chairman Breen felt that the first order of business is that we need to immediately look at when we can schedule a meeting with insurance companies.

Dr. Iser stated that they presented this to the Interim Health Committee, and he was asked to write it up. He stated he is going to go forward with the basic outline of the fees that we are requesting so that Interim Health Committee can look at it. Chairman Breen questioned if he was going to give them the budget. Dr. Iser stated that he didn't feel they needed to do that since it was previously presented. Chairman Breen asked Dr. Iser if he received any feedback. Dr. Iser commented that it was non committal but they had heard it before. He is going to continue to emphasize the pieces that have been emphasized before so that they keep hearing it. It will go along with a variety of other things that we are recommending like reinstating BMI in the schools and a block grant funding to the local health jurisdictions for TB and STD's. So there are other asks that we have in there.

Ms. Hudema reported that she was able to submit data to the NTBD (National Trauma Data Base) but the data they received was all identified in error and deleted immediately. Ms. Dokken remarked that this was the first accept.

Mr. Hammond stated that currently the Health District has access to the data extract for 2015 non trauma centers. This is not the raw data, it is an extract. He added that he spoke with Dr. Freeman and as soon as the bugs are worked out for the trauma centers, the extract data will be available as well. He stated that he would like to work with the (3) trauma centers and see if they can submit data directly so we can attempt to decode in the version 5. This will provide access to the data and they can use the extract data from non trauma centers to get a gauge of what is happening. Compliance is still low for non trauma center data but it is better than what it was before.

Ms. Angeles noted that their challenges have been difficult especially with the communication between Digital Innovations (DI) and the State. It would be easier since a majority of the trauma centers are in Clark County and they have already built strong working relationships to have the trauma registry here.

Ms. Hudema suggested getting DI and the State on the phone at the same time in a conference call.

Dr. Young stated that with all the challenges happening at the different levels he suggested keeping a log or a timeline to show a clear and concise record of the problems.

Ms. Angeles reiterated that they need to log these issues and have a working document for the sake of clarifying what their situation and challenges have been.

Dr. Young answered in the affirmative adding that as long as they can create a parallel record or timeline to substantiate the fact you've done everything to trouble shoot the problem.

Ms. Angeles stated that the 3 of them can get together and work on that document.

Chairman Breen stated that going back to their prior discussion she suggested looking at the week of July 11th for the next meeting. Dr. Iser advised that they will try for July 11th at 2:00pm and will get back to you on when the room is available that week.

Chairman Breen stated that she will draft a letter that the Committee can use as a template and then make it your own for your insurance people.

Ms. Dokken stated that the other thing they discussed at the workshop was meeting with legislators as well as the State.

B. Discussion of Revisions to Trauma System Advocacy Bylaws

John Hammond referred to the draft TSAC bylaws in the member packets and stated that the TSAC bylaws were not written in the same format as the RTAB and its subcommittees with regard to

member composition. The membership for the other committees specifically states the type and number of representatives who may sit on the committee or board.

Heather Anderson-Fintak, associate attorney for SNHD, stated that Item #2 in Section 1 “One (1) administrator from a non-trauma center hospital” and questioned if that should read “representative”. After some discussion, the Committee agreed to change it to “representative”.

Ms. Anderson-Fintak noted that in Section 5 with regard to alternates, it states at the discretion of the manager and questioned if that was a suggestion by the Committee. Mr. Hammond stated that that he just needed prior notification.

Member Dokken make a motion to accept the draft Trauma System Advocacy Committee Bylaws with the discussed changes. Seconded by Member Yedinak and carried unanimously.

C. Nominations for Committee Members

1. One (1) representative from each trauma center program
2. One (1) administrator from a non-trauma center hospital
3. One (1) representative from Emergency Medical Services
4. One (1) representative from health education and prevention services
5. One (1) representative of the general public
6. One (1) representative of rehabilitation services
7. One (1) representative with knowledge of legislative issues and advocacy
8. One (1) representative with experience I public relations/media
9. One (1) representative with knowledge of finance/funding

Member Angeles make a motion to delay the vote on the nominations until next meeting. Seconded by Member Yedinak and carried unanimously.

III. INFORMATIONAL ITEMS/DISCUSSION ONLY

Ms. Yedinak suggested discussing the oversight to be a direct pass through with no fees.

Chairman Breen felt they should probably wait and talk to Senator Woodhouse and see how she feels about it. She added that the other thing we should start moving on is co-sponsors. Getting with legislatures and having them sign on. It would be nice to have both sides of the aisle and both house represented on this bill.

- IV. PUBLIC COMMENT:** A period devoted to comments by the general public, if any, and discussions of those comments, about matters relevant to the Committee’s jurisdiction will be held. No action may be taken upon a matter raised under this item of this Agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken pursuant to NRS 241.020. Comments will be limited to five (5) minutes per speaker. Please step up to the speaker’s podium, clearly state your name and address, and spell you last name for the record. If any member of the Committee wishes to extend the length of a presentation, this may be done by the Chairman or the Community by majority vote.

Chairman Breen asked if anyone wished to address the Committee.

Dr. Eisen reminded the Committee that early voting is going on right now and continues thru Friday, June 10th. He added that if you are not sure how your candidate feels about any of the issues that have to do with the charge of this group, call them and ask them because there are some out there who I think would be very helpful and running in some tight primaries.

Chairman Breen asked if anyone else wished to address the Committee. Seeing no one, she closed the Public Comment portion of the meeting.

V. ADJOURNMENT

As there was no further business on the agenda, Chairman Breen adjourned the meeting at 3:08 p.m.