

EDITORIAL: “No” to deregulation of trauma centers
OUR OPINION: More emergency rooms won’t mean better medical treatment

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As they consider deregulating the expansion of trauma care centers in Florida, lawmakers in Tallahassee should be guided by a principle that has worked well for physicians throughout the ages: First, do no harm.

House bill 817 and the companion proposal in the Senate, SB 966, would eliminate the state’s supervisory role and leave it up to hospitals themselves to decide when and where to open new trauma care units across the state, providing only that they meet a checklist of requirements by the American College of Surgeons.

At first glance, this might sound like a great idea. Some senior-citizens organizations support it. But a deeper look suggests this is bad public policy that endangers the public and hurts the existing statewide trauma care network.

Having more trauma centers doesn’t mean better care. On the contrary, it means diluting the quality of care for patients requiring emergency treatment because there are only so many trauma surgeons available. They keep their skills sharp by seeing a constant volume of cases. The more they see, the better they get — that’s why they call it the practice of medicine.

Opening more emergency centers alters this critical patient/physician balance. More trauma centers means lowering the volume of care. That’s where the harm comes in, along with the elimination of oversight by a statewide agency that establishes criteria for opening trauma centers and monitors and evaluates their performance.

Reducing the flow of patients seen in Level II trauma centers, which must be staffed around the clock, also changes the economics of trauma treatment and would lead to higher costs for patients, according to the Florida Committee on Trauma, which includes physicians and nurses.

The proposed changes are up for a floor vote in this closing week of the session, but they might never have gotten this far if the Legislature had bothered to put them through the usual legislative process. Instead, the language was amended during the final stop at the committee level without getting a full hearing using expert witnesses.

If they had given the proposals due consideration, legislators might have learned that the Department of Health has held public hearings across the state to come up with a new set of rules for when new trauma care centers would be approved. The rules are expected to be out in May, after the legislative session ends.

Why not wait? Having new guidelines with public input beats having a sudden proliferation of emergency medical centers, although it might benefit for-profit companies like HCA.

Meanwhile, Jackson Health System wants to add two more trauma centers in Miami-Dade County without approval from DOH or any other health agency. What gives?

Some lawmakers say the current regulatory model prevents rural areas from having trauma centers. Fine, they can push state regulators to tweak the rules to ensure access, but that must not mean the Legislature should eliminate the state's supervisory role altogether. That hurts everybody.

Lawmakers are already on the verge of making a terrible decision by refusing to accept federal dollars to expand the Medicaid program in Florida to help 1 million needy residents. They shouldn't compound this callous action on healthcare by changing the rules on trauma centers until they at least review the new Department of Health rules.

Remember: First, do no harm.