



Aligning Kentucky's Level IV Trauma Standards

Expanding Access to High Quality Care, Particularly in Rural Areas

The Importance of Trauma Designations

The **American College of Surgeons (ACS)** trauma designation ensures hospitals have the **resources, structure, and processes** needed to care for injured patients and participate in a coordinated trauma system. It is not a ranking, **it's a quality framework** that aligns people, equipment, and protocols so patients receive the right care, at the right time, in the right place.

Designation elevates the entire hospital—not just the emergency department—through credentialing, readiness, and continuous training. **Level IV trauma centers extend trauma care to rural and medically underserved communities**, often serving as the only local resource to provide **initial evaluation, stabilization, and transfer** when needed.

Current KY Level IV Trauma Standards

Kentucky's current Level IV regulation requires **24-hour physician-only emergency department coverage**, with onsite physician availability for trauma activations—an **unusually restrictive standard for rural hospitals**. These standards are often unattainable due to a limited number of emergency physicians, particularly in the rural areas of eastern Kentucky where Appalachian Regional Healthcare (ARH) operates. The **regulation has become a barrier to strengthening rural trauma care and is not aligned with national standards or those implemented by surrounding states**.

National Level IV Trauma Standards

The **ACS Level IV standards** allow 24/7 emergency department coverage by a **physician or an advanced practice provider (APP)**. The **American College of Emergency Physicians (ACEP)** national policy supports a physician-led team model that **includes APPs** with real-time physician supervision, including off-site (telehealth) supervision in designated **rural facility types** such as Critical Access Hospitals (CAHs) and Rural Emergency Hospitals (REHs). This flexibility is essential for Kentucky's rural hospitals to meet both access and quality goals.

Trauma Standards Utilized by Surrounding States

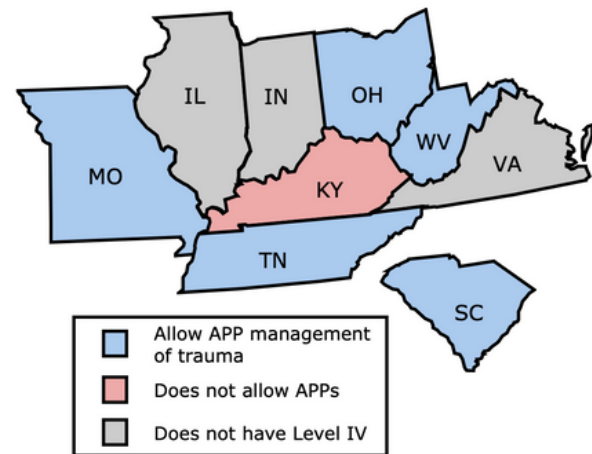
WV, TN, OH, SC, and MO allow advanced practice providers (APPs) to independently manage trauma cases within a physician-led framework. KY has around 20 Level IV trauma centers while WV has around 34 Level IV trauma centers despite having less than half of our population.

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“A Level IV facility must have 24-hour emergency coverage by a **physician or midlevel provider**”

American College of Surgeons (ACS)¹

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ACEP acknowledges that there are currently workforce limitations in specific CMS-designated facility types in which **supervision of a PA or NP by an emergency physician may be provided “offsite”** by Telehealth means as follows: **critical access hospitals (CAHs) and rural emergency hospitals (REHs)**

American College of Emergency Physicians (ACEP)²

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Aligning Kentucky's Level IV Trauma Standards with National Standards will Improve Access to Quality Healthcare, Particularly in Rural Areas

1. American College of Surgeons. Resources for Optimal Care of the Injured Patient: 2022 Standards (Revised July 2025). Chicago, IL: ACS; 2025.

2. American College of Emergency Physicians. Guidelines Regarding the Role of Physician Assistants and Nurse Practitioners in the Emergency Department. Dallas, TX: ACEP; June 2023.