



March 27, 2026

Tomislav Mihaljevic, MD  
Cleveland Clinic  
9500 Euclid Ave  
Cleveland, OH 44195

## **Questions and Concerns Regarding a Proposed New Level I Trauma Center**

Dear Dr. Mihaljevic:

We, the undersigned delegation members of Cuyahoga County, write to request vital information and express concerns regarding Cleveland Clinic's plans to pursue verification and open a new Level I trauma center.

We appreciate Cleveland Clinic's longstanding role in delivering high-quality care to our communities. Proposals to expand high-acuity, resource-intensive services require careful evaluation to ensure that they 1) meet demonstrated community need, and 2) do not unintentionally increase healthcare costs, intensify workforce shortages, or undermine access to essential services across the region. Moving forward without a thorough consideration of such impacts risks weakening the trauma system and safety-net institutions that our communities rely on.

Given the significant public impact of this proposal, including workforce implications, costs to patients, and impact on the existing trauma system, we need to be prepared to answer constituent questions and understand how this will impact state and regional healthcare access and policy. We respectfully request that Cleveland Clinic provide responses to the following questions:

### **Demonstrated Need & Coordination**

1. What formal needs assessment has Cleveland Clinic conducted to demonstrate that an additional Level I trauma center is necessary in this region and the assessed needs can't be better addressed by lower-cost alternatives (e.g., expanding Level II capacity, improved EMS routing, improved transfer coordination)?
2. What steps has Cleveland Clinic taken to consult with regional partners (e.g., existing trauma providers, EMS entities, community stakeholders) and state authorities (i.e., DPS, ODH, EMS) to assess community needs and regional impact?

### **Patient Volumes**

3. What analysis has been conducted on the mortality and complication risks associated with volume dilution, particularly for high-acuity trauma cases, those with an injury severity score greater than 15?
4. How will Cleveland Clinic ensure that opening this new center will not destabilize the existing trauma system by reducing minimum case complexity and clinician proficiency below national standards?

## Workforce Considerations

5. Given existing shortages of trauma surgeons, trauma nurses, anesthesiologists, and other specialized staff, what workforce plan is in place to staff this facility without destabilizing existing hospitals and the region's current trauma system?
6. How many recent trauma related hires came from the two existing level I trauma centers run by MetroHealth and University Hospitals?
7. What impact will this expansion have on existing collaborative residency and fellowship programs among the region's hospitals?

## Financial Impact & Public Funding

8. What is the estimated annual cost of operating the new Level I trauma center, and how will it be funded?
9. What safeguards will ensure taxpayer dollars—including Medicaid state directed payments, other Medicaid/supplemental funds—are not supporting duplicative services that do not address a demonstrated community need?
10. How will Cleveland Clinic ensure that increased costs associated with duplicative high-acuity services are not passed on to patients or insurers?

## Asks of Cleveland Clinic

11. What is Cleveland Clinic's current timeline for establishing the new level I trauma center? Please include specific dates including but not limited to ACS consultation visits, expected application for provisional status, when you will begin seeing patients under provisional status, and estimated full verification date.
12. Will Cleveland Clinic agree to pause further action until an independent, transparent, region-wide needs assessment is completed?
13. If such an assessment finds the additional Level I trauma center unnecessary, will Cleveland Clinic withdraw its application?

Ohio's trauma system serves our community best when resources are strategically distributed, coordinated across providers, and focused on patient needs. Additional and concrete information is needed to better understand if or how the Cleveland Clinic is meeting community-focused considerations in its decision to open an additional Level I trauma center at the main campus location. Our constituents deserve to know more.

We hope to hear from you soon with responses to these items and supportive documentation to facilitate that assessment and foster a more inclusive public dialog on these issues. We will follow up not later than April 10, 2026 and will be happy to meet with appropriate representatives to discuss this matter when the information is available. Thank you for your recognition of the importance of both transparency and evidence-based decision making in providing care to our region.

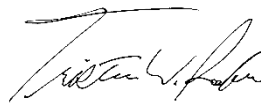
Sincerely,



**Nickie J. Antonio**  
Senate Minority Leader  
23rd Senate District



**Kent Smith**  
State Senator  
21st Senate District



**Tristan W. Rader**  
State Representative  
13th House District

*Sean P. Brennan*

**Sean P. Brennan**  
State Representative  
14th House District

*Chris Glassburn*

**Chris Glassburn**  
State Representative  
15th House District

*Bride Rose Sweeney*

**Bride Rose Sweeney**  
State Representative  
16th House District

*Juanita O. Brent*

**Juanita O. Brent**  
State Representative  
18th House District

*Philip M. Robinson, Jr.*

**Philip M. Robinson, Jr.**  
State Representative  
19th House District

*Terrance Upchurch*

**Terrance Upchurch**  
State Representative  
20th House District

*Eric Synenberg*

**Eric Synenberg**  
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*Darnell T. Brewer*

**Darnell T. Brewer**  
State Representative  
22nd House District

