



# Against the Odds: Healing Patients in an Ailing Economy

*Annual Report of the Georgia Alliance of Community Hospitals 2009 - 2010*

## List of Member Hospitals

Archbold Medical Center	Northside Hospital
Athens Regional Medical Center	Northside Cherokee
Brooks County Hospital	Northside Forsyth
Clinch Memorial Hospital	Phoebe Putney Health System
Colquitt Regional Medical Center	Phoebe Worth Medical Center
Columbus Regional	Piedmont Healthcare
Healthcare System, Inc.	Piedmont Mountainside Hospital
DeKalb Medical	Piedmont Newnan Hospital
Donalsonville Hospital, Inc.	Putnam General Hospital
Dodge County Hospital	Satilla Regional Medical Center
Early Memorial Hospital	South Georgia Medical Center
Emory Healthcare	Southeast Georgia Health System
Floyd Medical Center	Southeast Georgia
Grady General Hospital	Camden Campus
Grady Health System	Southern Regional Health System
Gwinnett Health System, Inc.	Southwest Georgia Regional
Gwinnett Medical Center –	Medical Center
Duluth	St. Joseph's/Candler
Hamilton Health Care System	St. Mary's Health Care System
Henry Medical Center	Stephens County Hospital
Houston Healthcare Complex	Sumter Regional Hospital
Perry Hospital	Tift Regional Medical Center
Jeff Davis Hospital	Union General Hospital
Louis Smith	University Hospital
Memorial Hospital	Warm Springs Medical Center
Meadows Regional	Wayne Memorial Hospital
Medical Center	WellStar Health System
MCG Health, Inc.	WellStar Cobb Hospital
Medical Center of Central Georgia	WellStar Douglas Hospital
Memorial Hospital & Manor	WellStar Kennestone Hospital
Mitchell County Hospital	WellStar Paulding Hospital
Monroe County Hospital	WellStar Windy Hill Hospital
Murray Medical Center	West Georgia Health System
Northeast Georgia	
Medical Center	



## About This Issue

It's hard to stay positive with all the bad economic news we've heard lately. This issue of our annual report focuses on some good news, namely the ability of community hospitals to survive and provide an economic basis even in hard times.

Things may be bad now, but think about how much worse they'd be in your community without your local not for profit hospital. Each of the Alliance's member hospitals creates large numbers of good paying hometown jobs, not only through direct employment but also through purchasing goods and services from local businesses large and small.

On top of that, a good hospital is an essential piece of the fabric of any community. Without a hospital, residents cannot get care close to their families and jobs. And, it is almost impossible to convince a major employer to locate in an area that does not have top notch medical facilities. In short, the fates of hospitals and communities are completely intertwined, and one cannot exceed without another.

This year's annual report spotlights some the general challenges facing hospitals in Georgia, and outlines some of the strategies local hospitals are using to address those issues. Now more than ever, it is critical to share best practices and understand that sound health care is truly a community effort with community-wide benefits.

## Alliance Staff List with Contact Info

General P.O. Box 1572, Tifton, GA 31793  
p (229) 386-8660 f (229) 386-8662

### President

Monty M. Veazey mveazey@gach.org

### Vice President

Julie Windom jwindom@gach.org

### Director of Financial Services

Robbie Pope rpope@gach.org

### Executive Assistant

Marcy Shiver mshiver@gach.org

### Consultant

Kim Chavez kchavez@gach.org

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# Letter from the President

Dear Members and Friends,

It has been 26 years since a small group of hospital CEOs sat down together and agreed to launch the Georgia Alliance of Community Hospitals. During that quarter century since, it's hard to remember a time when not for profit hospitals faced a tougher set of circumstances. However, at the same time, our member hospitals have never played a more critical role in the human health and economic survival of our home towns.



The ongoing economic downturn has dramatically limited the amount of funding available to virtually every program funded by our state government. With the Medicaid and PeachCare for Kids programs consuming a large share of the state budget every year, they were first on everyone's list of programs to cut in order to balance the budget.

In the 2009 legislative session, we initially faced a proposal to balance the budget by levying a new tax on the gross revenues of hospitals. Even worse, the proposal would not have even required those funds to be spent on health care, but would have siphoned them away to fund other government programs.

In response, the Alliance launched a hard hitting lobbying and public relations campaign. We then continued that campaign and won a major victory in fending off an effort to slash hospital reimbursement rates for treating Medicaid families and Peachcare kids by 10 percent.

Last year, we also faced a proposal that would have required all hospitals in Georgia to treat inmates in the correctional system at below cost rates. Given the fact that Georgia provides healthcare to nearly 60,000 inmates, the costs for hospitals could have been severe. Even worse, the initial proposal would have extended those costs only to not for profit hospitals, allowing for-profit hospitals to charge whatever prices they could negotiate. Through extensive negotiation and lobbying, we were able to achieve two important changes in this bill. First, we extended it to all hospitals in the state so that it did not discriminate against not for profit hospitals. Secondly, we limited its application to only emergent care conditions. These changes took a one-sided bill and made it a much more balanced negotiating structure for hospitals.

Additionally, we were able to avoid any erosion of the Certificate of Need laws in the past year. Preserving the ability of hospitals to provide services on a level playing field is a key goal, and will remain so going forward.

Unfortunately, the 2010 legislative session is starting to look like an even rockier ride. The budget situation in the State isn't getting any better as of today. This means we will need to fight harder than ever to make sure the state budget is not balanced on the backs of community hospitals. Further, virtually every office in the state is up for election next year. This means we will be working with many new leaders in the near future. Our state has not seen this much potential political change on the horizon in years, and navigating these uncertain waters will not be easy. And, finally, federal health reform continues to occupy center stage nationally, with huge impacts for every citizen in our state.

Despite these challenges, I am optimistic about our future. When you travel around Georgia as much as I do, you notice things that are always the same no matter where you go. And, without exception, from community to community, it is impossible not to notice the role community hospitals play in softening the impact of one of the worst economies we have ever seen. Thanks to community hospitals, hundreds of thousands of Georgians are still employed and families know their loved ones won't suffer without treatment whether they can afford to pay or not. Things may be bad, but they'd be a lot worse without not for profit hospitals, and we should all be proud to work in a sector that does so much good with such a comparatively small level of resources.

I am confident we will emerge from this downturn smarter, leaner and ready to grow again. In the meantime, we must work ceaselessly to ensure our state and federal policies are built around the reality of providing health care at the community level.

Sincerely,  
Monty Veazey  
President and CEO

## What Will Health Reform Mean for Georgia?

As health reform legislation dominates the debate in Washington and the states, no question weighs more heavily on the minds of individual citizens than “what will reform mean for me?” Of course, any number of outcomes could occur by the time this debate concludes, making it virtually impossible to say with precision how things will turn out. Furthermore, as with any major policy change, the way it actually “looks” when it is implemented will be shaped as much by agency regulations, state implementation and private sector response as it will by votes on the floor of Congress.

However, having said that, there are some common themes that have run throughout virtually every piece of reform legislation that has been proposed. And, these themes are constant regardless of whether bills are coming from Republicans or Democrats. Given their almost constant presence at any level of debate, one thing we can say for certain is that these issues will form a key component of health policy at the national level for the foreseeable future.

First, there is a recognition that large numbers of citizens fall into a gap between government run programs such as Medicaid, Medicare and Peachcare and private health insurance plans. Many of these people want to buy insurance, but make too much to qualify for government coverage and not enough to purchase a private health plan. So, the key goal with this population is to figure out a way to take the resources they have available, match those resources with dollars from the government and/or their employer, and use the combined total to enable them to purchase basic coverage. Numerous different approaches have been tried to achieve this goal, from expanding coverage under public programs such as Medicaid to providing subsidies to lower the cost of purchasing private plans.

Second, this debate has brought broad attention to American citizens who are “uninsurable.” Typically, these are people who have the financial resources to purchase health insurance, but cannot find a policy that will accept them due to preexisting conditions. There’s a fundamental recognition that this situation is fundamentally unfair, because it places a heavy burden on people who are already struggling to deal with a health problem and stay employed. Virtually any successful reform effort will find a way to guarantee coverage to these individuals, and pool the risk in a way that no insurer is disproportionately impacted. These twin challenges of covering the uninsured and the uninsurable will greatly impact Georgia hospitals due to our growing percentage of working individuals in one or both categories.

Third, policymakers on both sides of the aisle have been generally mindful of the hard reality that additional cuts to programs that



reimburse providers for treating indigent patients will do far more harm than good. The current funding levels for indigent or government sponsored care for patients treated by doctors and hospitals are already well below the costs of providing treatment. Further cuts would result in fewer doctors being willing to see indigent patients or treat families covered by Medicaid and Peachcare. For community hospitals -- who see all patients regardless of their ability to pay -- additional cuts would slash operating margins to the point that care would be put at risk. Most policymakers at the national level are aware of this reality, and understand that funding health care reform by endangering the healthcare safety net is not a viable strategy. Here in Georgia, the outcome of this debate is particularly important, because our already low Medicaid and Peachcare reimbursement rates have been either stagnant or reduced for most of the past decade. This leaves our state particularly vulnerable to policy changes that reduce funding for indigent care.

Finally, reliance on state governments for implementation of health care reform has been a hallmark of virtually every proposal. Health care provision is truly a federal-state partnership, and any success will depend on cooperation at both levels. Additionally, many of the most difficult decisions on implementing change will be made by state governments. This means that while the federal government will set many broad parameters, the specifics of new health policy will depend largely on the decisions of state policymakers, particularly Governors. For Georgia, this is highly relevant issue, because we will elect a new Governor in the middle of this debate, ensuring the issue will be widely discussed and debated on the campaign trail.





## Community Hospitals: The Bedrock of Georgia's Economy

Not for profit hospitals are far from immune to economic downturns. In recent months, all of our members have reduced spending and many have cut jobs. A handful of hospitals have faced problems serious enough to put their continued operation into question. However, after a year of extreme economic turbulence we are still standing and still serving, which isn't something many sectors of our economy can say today.

Why is that? Simply put, community hospitals are just that -- not for profit institutions created by the community for the sole purpose of serving local residents. This means everyone in the community -- from a business owner providing medical supplies to a parent in desperate need of care for a sick child -- has a stake in seeing their local hospital thrive.

In these times, we can never forget that the people we see at work, run into at the supermarket, sit beside at church, or see on the street are all part of the web that sustains hospitals and benefits from their presence. It's hard to find a citizen in our state who doesn't have a family member or close friend who is either directly employed by a hospital or works for a business that provides goods or services to one. With other sectors of our economy grinding to a halt and slowly restarting, it has been these stable, good paying jobs that have put food on the table, kept kids in school, and allowed families to stay in their homes.

Community hospitals were established to provide care to the sick and injured and that is still our primary focus. However, we must also always be aware of the role we play as the bedrock upon which our state's economy rests. Without a strong community hospital, economic success and job growth for any large city in our state is virtually impossible.

### By the Numbers: Hospitals and Jobs in Georgia

**Residents Served:** 9,467,000

**Residents Below Federal Poverty Level:**  
One in Five

**Statewide Unemployment Rate:** 10.1%

**Georgians with No Public or Private Insurance:** 17.8%

**Total Medicaid Enrollment:** 1.8 million

**Not for Profit Hospitals Total Bed Capacity:** Over 13,200

**Not for Profit Patient Admissions:** Over 586,000

**Emergency Room Visits to Not for Profit Hospitals:**  
Over 2 Million

**Total Hospital Contributions to Georgia's Economy:**  
\$33 Billion

**Total Jobs Created by Georgia Hospitals:** Over 270,000

Source: Kaiser Foundation and Georgia Hospital Association





**“We know that caring for the uninsured does not rest on any one organization—we have to work together to meet the need.”**

**— Christy Moore**



## Northeast Georgia Health System: Meeting the Uninsured Challenge

Perhaps the most challenging issue facing any hospital is coping with the large numbers of uninsured patients who present with a range of conditions every day.

The most difficult part of that challenge is moving from a reactive posture to a proactive one, by finding creative ways to provide care to those who have no practical means of paying for it.

This year’s winner of the large hospital of the year award has met that challenge with what can only be described as a comprehensive plan encompassing virtually every element of the community.

Christy Moore, NGHS Manager of Community Health Improvement says, “We know that caring for the uninsured does not rest on any one organization – we have to work together to meet the need.”

For starters, they raised nearly half a million dollars in charitable contributions to fund and house a Health Access Initiative to provide free inpatient and diagnostic services right in their facility. This program enrolls local residents who have low incomes, but are not eligible for any other assistance. This initiative provided over four thousand appointments and six million dollars in free care last year.

Moore also gives credit to the community for helping the hospital facilitate a group called Healthy Hall. “Healthy Hall is a group of community leaders and volunteers interested in improving health and quality of life in Hall County,” adds Moore.

Extending beyond its walls, the hospital has actively partnered with virtually every other charitable organization providing healthcare in the community. “There is actually a lot of power on the local level,” says Moore. “We have to work together to harness that power, focus it in the same direction to make it work for us in caring for this population.”

The consistent theme throughout the effort is close collaboration with hospitals, doctors, nurses, and pharmacists to work together to address the problem of uninsured patients.

The hospital’s involvement certainly doesn’t end there ... they have also reached over 44,000 children and family members with a safety initiative and provided over 5,000 safety devices to local kids. And, their foundation has raised over \$28 million in charitable gifts since its creation. According to Christy Moore, “Being able to help 1,492 patients last year, schedule 4,759 appointments, \$7.4 million total value of donated services” have all been some of the most significant achievements of collaborative partnerships to improve access to care.

Note: Northeast Georgia Medical Center was selected by a panel of judges as the “Large Hospital of the Year” for 2009.



## Southeast Georgia Camden Campus: Investing in the Community

Southeast Georgia Health System's Camden Campus has done some truly amazing things when it comes to providing health care services to a Georgia community in critical need.

Last year, they completed the largest healthcare facility in the history of the county, bringing over 90,000 square feet of new cutting edge capacity to their community.

At the same time, they have been actively growing programs the serve the community. The local area has a large military presence and numerous veterans have chosen to retire there. To help address these unique needs, they helped build a new Veterans Administration facility on their campus, allowing those who have sacrificed so much to get treatment close to home without a long drive.

"The Naval Submarine Base, Kings Bay in the area, is by far the largest employer in the County. Camden County is also the number one retirement area for naval personnel in the country. At the Camden Campus, in excess of 21% of the hospital's revenue comes from TriCare, the insurance for active duty and retired military personnel," says Camden Administrator Howard Sepp.

Sepp adds that the hospital has worked hard to respond to this challenge, building an "excellent working relationship with the various commands at the base and have a number of memorandums of understanding that define how care is given to their personnel. We also participated in drills in preparation for events such as exposure to hazardous materials. The Health System is a long time supporter of the local Navy League council

that consists of a number of retired military personnel."

For the broader community, the hospital has been instrumental in supporting the Coastal Medical Access Project, which provides free healthcare to 13 regional counties. This program has become a national model for collaborative community based care for uninsured and underinsured patients, giving them treatments and preventative services they would not otherwise receive.

Despite these successes, however, challenges remain.

Sepp notes that "Southeast Georgia Health System has seen a steady increase in the number of uninsured patients in our Emergency Care Center. At the Camden Campus, for the current fiscal year, the number of self-pay (uninsured) patients now is 13.2%. As job losses increase in the area, this number is expected to grow. In addition, the lagging economy is also affecting physician practices. Not only is the number of uninsured patients increasing but also those patients that do have insurance are postponing elective procedures, etc."

Regardless of what the future holds, this hospital has proven it has the drive and determination to continue serving the community regardless of circumstances.

Note: The Camden campus of Southeast Georgia Health System was selected by a panel of judges as the Alliance's "Small Hospital of the Year for 2009."



## Archbold Medical: Heartbeat of a Community

Archbold Medical can be accurately described as the economic and human services heartbeat of the South Georgia community where it is located.

Despite the worldwide economic crisis, they are building a 40,000 square foot oncology center that will dramatically expand the availability of lifesaving cancer treatments to the local community. Last year, the hospital provided over twelve million dollars in community benefit, including screenings, education, and free care for residents.

The hospital continues to make wise investments in technology to better serve patients in the region. Its investment strategy can best be described as one of stewardship, with a focus on sound purchases that provide exactly the right level of service for the community.

For example, Archbold recently installed an on-site PET scanner, which allowed it to replace the mobile PET service it had utilized for years.

As Radiologist Cary Newman, M.D explains, “We had outgrown the mobile service because of an increase in patient load,” said. “The in-house unit allows us to expand our hours of service and improves access and convenience for our patients. The scanner also provides a significant upgrade in image quality and technology.”

For a device that changes the course of therapy in more than one in four patients, the additional availability promises to make a real impact on the lives of patients and families.

Additionally, the hospital has invested in cutting-edge neurological equipment such as a Leksell Gamma Knife which allows surgeons to fight brain tumors with minimally invasive techniques.

Of course, the long history of service and stability Archbold has given the Thomasville region makes none of this sound management a huge surprise. By the way of illustration, the hospital—which has delivered over 40,000 “babies” since 1960—welcomed a mother who was born at Archbold in 1926 to the facility to welcome the arrival of her great-grandson, also an “Archbold baby.”

The economic impact of Archbold is also enormous on the local area. It directly employs over 2,500 people, including 200 highly trained specialists in numerous fields. It has a total economic



**“I’m proud of our physicians and employees—they’ve made Archbold a place where patients can expect high-quality care, advanced technology and excellent customer service.”**

**— J. Perry Mustian  
President/CEO**

benefit to the community of over \$330 million, making it one of the most critical economic bases for the entire region.

As any Thomasville resident will tell you, the stability and care delivered by Archbold has made an enormous impact on the lives of millions over the years.

Note: Archbold Medical Center was the runner-up in the competition for Large Hospital of the Year.





## Piedmont Newnan: Succeeding in Adverse Times

One would be hard-pressed to find a better story of how to succeed in the face of adversity than Piedmont Newnan Hospital.

This hospital is located in a suburban Atlanta community that has been in desperate need of a new hospital for years. The health system in this case stepped up to the plate in a major way with a strong plan to construct a new cutting edge facility that the entire community would be proud of.

Since beginning the process, the hospital has faced numerous challenges associated with the deteriorating economic environment. Yet, they have managed to keep the project moving forward, cut costs significantly, and still keep providing critical services through existing facilities.

Piedmont Newnan CEO G. Michael Bass cites a direct role in the construction process and an ability to be innovative as a key driver in the hospital's success, saying "We paused the major components of the project but kept the infrastructure work going. For example, we have continued work on water, electric, and other underground utility installations that will save us time in the future. We kept a scaled down level of our project management team in place and continued to do as much as we could excluding the hospital structure itself. We also used this time as an opportunity to re-bid the remaining components of the replacement facility project."

Bass also explains that the hospital turned the economic downturn to its advantage by using the opportunity to cut its construction costs dramatically, by pausing construction and "completely rebidding the remaining components of the project."

"More than \$10 million in cost savings have been realized, while maintaining the same scope of services in the original plan," added Bass.

Perhaps the most difficult challenge facing Piedmont Newnan has been staying flexible on the construction of its new facility while continuing to provide top notch care in an existing location.

"While we know we are planning for the future, we have not neglected taking care of our community's healthcare needs today. We have made significant capital investments and improvements in our current facilities, and we have also replaced or added state-of-the-art equipment (much of which will be moved to our new facility)," says Bass, adding that "we have focused on constantly improving our clinical quality and creating positive patient experiences, and we have also worked on expanding our community's knowledge and awareness of the array of services we currently provide, all of which have helped keep our volumes strong." This last issue is particularly critical at a hospital location near a large metro area where patients have numerous options for care within driving distance.

In short, Piedmont Newnan Hospital stands as a worthy example of planning for the future, turning adversity to advantage, and refusing to sacrifice today's care while developing tomorrow's new options.

Note: Piedmont Newnan was the runner-up in the "Small Hospital of the Year" category.

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## From the Desk of Julie Windom

### Vice President and General Counsel, GACH

## Hospital Advocacy is a Team Effort

Nothing happens in a hospital without effective teamwork. Everything about providing healthcare in a hospital setting hinges on having an effective team in place, consisting of people who bring the right specialized skills to the table and understand how to work with others.

It shouldn't surprise anyone that advocating for sound public policies that benefit community hospitals is no different.

The issues that impact hospitals are so broad and sweeping, that the only way to achieve success is to mobilize large coalitions of support. This is particularly true in bad economic times when massive budget shortfalls lead directly to major winners and losers in the budget process. This puts advocates of any particular program in a position where we are pitted against others who want to see "their" funding continue at all costs.

Of course, health care is fundamentally different from other programs because the human toll of cuts is so great. Very few things about health care are truly optional, and providing a basic level of care for all citizens represents a priority we cannot ignore. But, having said that, it's always the case that policymakers have lots of different ideas on how to save funds in healthcare -- some good and some bad. Our goal as advocates is to help them understand how to make wise choices, and remove roadblocks to good outcomes that benefit patients.

At the Alliance, we rely heavily on our member hospitals to educate policymakers because they are such trusted and respected institutions at the community level. Those efforts begin with the CEOs who lead the Alliance and often directly contact legislators on a regular basis. A bedrock of our advocacy team is our Legislative Task Force, which consists of the top advocates from inside member hospitals. Collectively, this group comprises some of the most effective government relations professionals at the capitol, and helps us mobilize a large number of "boots on the ground" when fast-moving issues hit us.

Additionally, we count on many of the people who work at hospitals, volunteer to serve them and do business with them to help raise public concern over top issues. The coalition we have helped build to support trauma funding is a prime example of the way hospital leaders, doctors, business executives and community leaders can work together on an issue that impacts all of us.

The most important thing to remember is that our advocacy efforts are only as effective as the number of voices we can bring to the table to support our work. For this reason, I hope the entire hospital "family" -- immediate and extended -- will pay special attention to alerts and phone calls this year. It's going to be a very rough ride, and we need each and every one of you engaged and active to ensure success.

Thank you for your support!

Sincerely,

Julie Windom  
Vice President and General Counsel

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## Join the Georgia Alliance of Community Hospitals for THE 12TH ANNUAL HEALTHLINKS CLASSIC Golf Tournament

The 12th Annual HealthLinks Classic Golf Tournament benefits the Georgia Alliance of Community Hospitals' AllPAC. This year's event will be held **Wednesday, May 19** at the luxurious Barnsley Gardens in Adairsville, Georgia. Come challenge yourself on their par 72, Jim Fazio designed course, *The General*.

### About AllPAC

The Alliance Political Action Committee is Georgia's only organization committed to representing not-for-profit hospital interests at the General Assembly. AllPAC works with and through legislators and candidates to make sure our voices are heard. Our hard work has paid off in the passing of bills that aid our hospitals and the defeat of legislation that threatens the quality of Georgia's health care. AllPAC protects 50+ community hospitals, 100,000+ health care jobs in urban and rural areas, and millions of patients across Georgia.



**For more information**, or to register go online to [www.gach.org](http://www.gach.org).

**For sponsorship information**, go online to [www.gach.org](http://www.gach.org)  
or call (229) 386-8660.

## Alliance Leaders Elected by Members

A this year's annual meeting, the Alliance selected the leaders who will guide its activities over the next year.

The new Chair of the Alliance Board of Directors will be Jim Peak of Memorial Hospital and Manor in Bainbridge.

Serving as Vice-Chair is Dr. Greg Simone of Wellstar Health System, and serving as Secretary/Treasurer is Bob Quattrocchi of Northside Hospital.

Three new hospital CEOs were elected to the Alliance Board of Directors: Joe Ierardi of Wayne Memorial Hospital, and Don McKenna of St. Marys Hospital and Health System.

## High Achievement Recognized with Annual Awards

The Alliance also recognized several high achievers in the health care field with this year's awards. Following are this year's award winners. Profile articles published in this report describe a small sample of the activities that earned each hospital this distinction:

Large Hospital of the Year: Northeast Georgia Medical Center (CEO Jim Gardner Accepts Award from Georgia360)

Small Hospital of the Year: Camden Campus of Southeast Georgia Health System (CEO Gary Colberg Accepts Award from Georgia360)

Large Hospital of the Year (Runner Up): Archbold Memorial Hospital (CEO Perry Mustian Accepts Award from Georgia360)

Small Hospital of the Year (Runner Up): Piedmont Newnan Hospital (CEO Michael Bass Accepts Award from Georgia360)

CEO of the Year: John Bowling of Hamilton Health Care System (Bowling Accepts Award from Alliance CEO Monty Veazey)

Legislator of the Year: Senator Greg Goggans (Goggans Accepts Award from Alliance CEO Monty Veazey)





# 2010 Legislative Agenda

## FEDERAL HEALTHCARE REFORM

Preserve and improve reimbursement levels to providers of all medical services

Protect supplemental payments to hospitals for uncompensated care provided to the uninsured and Medicaid populations

Make it easier for physicians and hospitals to work in collaborative and innovative arrangements designed by the participating providers for the benefit of their community

## NOT-FOR-PROFIT ISSUES

Work to preserve and improve the fiscal soundness of not-for-profit hospitals

Refocus the discussion surrounding not-for-profit hospitals on the benefits of having community-based organizations that re-invest in the community to keep resources, jobs and quality healthcare in Georgia communities

Protect against laws and regulations that discriminate against not-for-profit hospitals by imposing stricter requirements than those imposed on other providers

## HEALTHCARE FINANCING

Support financing mechanisms that incentivize the delivery of quality healthcare for all Georgians regardless of the patient's ability to pay

Support adequate funding and full reimbursement to providers of medical services to all populations without imposing undue burdens on those providers thru fees and taxes

Support payment systems that devote the greatest percentage of state and federal healthcare dollars to the direct reimbursement of providers of medical care

## TRAUMA

Support financing mechanisms that incentivize the delivery of quality healthcare for all Georgians regardless of the patient's ability to pay

Support adequate funding and full reimbursement to providers of medical services to all populations

Support payment systems that devote the greatest percentage of state and federal healthcare dollars to the direct reimbursement of providers of medical care



## GOVERNANCE

Support legislation and regulations that protect patients and highlight the quality care provided by Georgia's not-for-profit hospitals while ensuring those providers are not unduly burdened by unnecessary rules and laws

Advocate for legislation and regulations that lessen the regulatory burdens or further clarify the regulatory requirements imposed on hospitals

## WORKFORCE

Support legislation and regulations that increase the supply of qualified healthcare providers practicing in the state of Georgia

Advocate for increased funding for medical school and other provider education programs, including funding for graduate medical education slots

Support training and accreditation requirements that ensure the quality and availability of all types of healthcare workers in the state

## CIVIL JUSTICE REFORM

Protect common sense civil justice reforms that prevent frivolous lawsuits and exorbitant verdicts against providers and businesses

## CERTIFICATE OF NEED

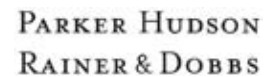
Support legislation and regulations that protect the Certificate of Need program and the valuable role it plays in ensuring access to quality healthcare preventing the unnecessary duplication of services, and containing costs

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## Hospital of the Year Award



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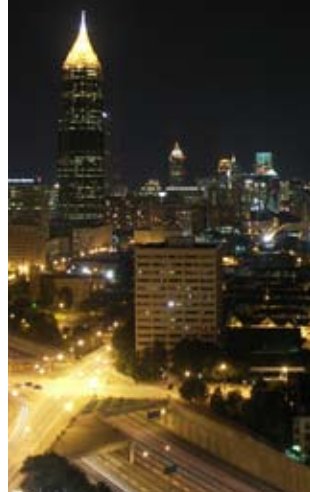


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## Community Benefit: From the Mountains to the Coast

The full list of benefits provided by community hospitals to the communities they serve would take up more space than we have available in this entire report. However, we wanted to mention some of the unique programs that community hospitals in Georgia have undertaken this year to extend community benefit far beyond the millions in free care they deliver to uninsured and underinsured patients each year. Following are some of the programs launched by our member hospitals this year:

**Athens Regional Medical Center:** Was recognized by the American Diabetes Association for its outreach on preventing and managing diabetes.

**Columbus Regional:** Began pursuing a major expansion and updating of its emergency room facilities and generated over \$845 million in local economic activity.

**Floyd Medical Center:** Launched an innovative community campaign to support breast cancer survivors, offered free mental health screenings, held a pain management seminar through its hospice program, and began offering angioplasty services to the community.

**Gwinnett Medical Center:** Began offering the community self-healing sports wound treatments, partnered with a local TV station to help raise breast cancer awareness, and became the first hospital in Georgia to offer a new treatment for infants with oxygen deprivation.

**Henry Medical Center:** Offered a free breast health education program to area women, received a national award for patient care at its Laurel Park facility, made free prostate screenings available to help fight cancer, and over 5000 area residents attended a 5k sponsored by the hospital.

**Medical Center of Central Georgia:** Worked with Mattel to deliver free toys to hospitalized children, supported the

Community HealthWorks education program, and launched a regionally networked tele-trauma system to help save lives.

**Northeast Georgia Health System:** Unveiled a new heart failure unit offering cutting edge services to area residents, held a free bereavement seminar for citizens coping with loss, raised over \$200,000 for the Boys and Girls Club, and develop a free grief support group.

**Northside Hospital:** Hosted a walk to remember for families who have suffered a loss in infancy or pregnancy and won national recognition for its patient care, maternity services, and treatment for ovarian cancer. Also became the first hospital in Georgia to perform a new treatment for glaucoma.

**Piedmont Healthcare:** Dramatically expanded the number of professionals offering heart health services to the community and won recognition for being the “most wired” hospital in America.

**Phoebe Putney Health System:** Hosted a breast cancer awareness walk for over 300 people at its Sumter facility, held a men’s health fair attended by over 500, and held its 8th annual Men’s Health Conference.

**Southeast Georgia Health System:** Implemented a “hospitalist” system that gives patients a personal internal medicine doctor responsible for their health throughout their stay, and cut the ribbon on a major new facility in Camden County.

**Tift Regional:** Held a “girls night out” to give working parents an opportunity to get critical screenings outside of regular hours and was selected to begin offering a cutting-edge new lifesaving heart procedure.

**University Hospital:** Implanted the first wireless pacemaker given to a patient in its service region.



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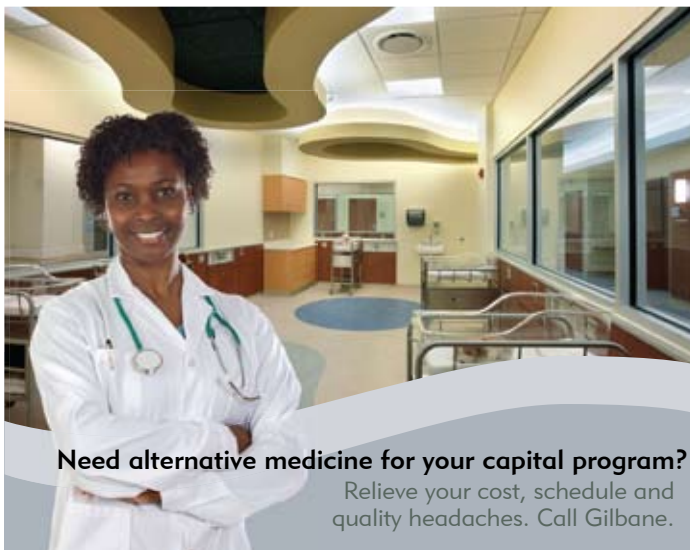


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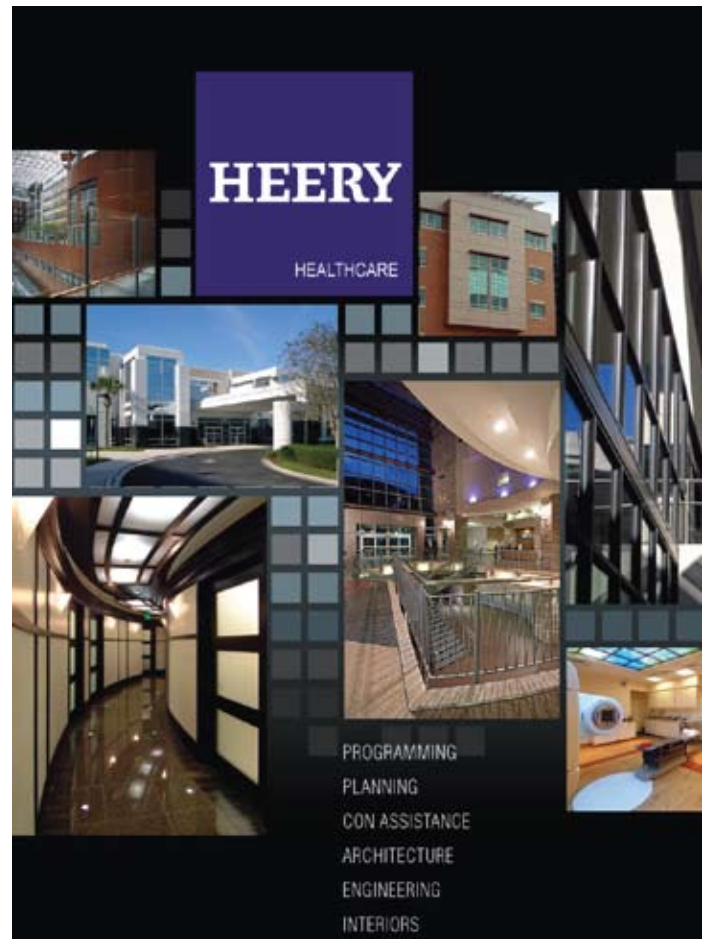
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[JKKeen@bellsouth.net](mailto:JKKeen@bellsouth.net)  
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# Congratulations to the Annual Conference Winners!




Michael Bass, president and CEO of Piedmont Newnan Hospital receiving runner-up in the "Small Hospital of the Year" category 2009 for Piedmont Newnan (also pictured Monty Veazey left and Brad Alexander on the right).



Perry Mustian receiving runner-up in the "Large Hospital of the Year" category 2009 for Archbold Medical (Monty Veazey pictured on the left and Brad Alexander on the right).




Gary R. Colberg, FACHE, President & CEO of Southeast Georgia Health System, Rose Andrews, Camden Advisory Board Member and Howard W. Sepp, Jr., FACHE, Vice President & Administrator, Camden Campus of Southeast Georgia Health System receiving "Small Hospital of the Year" category 2009 for Southeast Georgia Camden Campus.




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Jim Gardner receiving "Large Hospital of the Year" 2009 for Northeast Georgia Health System (also in the picture Brad Alexander).



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