# DCH QUICK GUIDE 2010 - 2011



Georgia Department of Community Health



The Georgia Department of Community Health (DCH) was created in 1999 to serve as the lead agency for health care planning and purchasing issues in Georgia. The General Assembly created DCH by consolidating four agencies involved in purchasing, planning and regulating health care. The department is designated as the single state agency for Medicaid. In 2009, Healthcare Facility Regulation was created at DCH from sections transferred from the former Department of Human Resources Office of Regulatory Services. At that same time, the Divisions of Public Health and Emergency Preparedness & Response transitioned to the department.

DCH is comprised of five Program Divisions, including; Emergency Preparedness & Response, Healthcare Facility Regulation, Medicaid, Public Health, and State Health Benefit Plan, and eight Enterprise Support Functions, including; Communications, Financial Management, General Counsel, Health Information Technology & Transparency, Information Technology, Inspector General, Legislative & External Affairs, and Operations.



Georgia Department of Community Health The Program Divisions include the programs, offices and initiatives that provide Georgians access to health care services, and educate Georgians about health promotion and disease prevention. Collectively, these Program Divisions directly impact the lives of every Georgian. The Enterprise Support Functions serve the business needs of the Program Divisions, allowing the Program Divisions to focus on program management and implementation. DCH also has five attached agencies, including; Georgia Composite Medical Board, Georgia Board for Physician Workforce, State Medical Education Board, Brain & Spinal Injury Trust Fund Commission and Georgia Trauma Care Network Commission.

#### **Mission Statement**

ACCESS to affordable, quality health care in our communities RESPONSIBLE health planning and use of health care resources HEALTHY behaviors and improved health outcomes

#### **DCH Health Policy Priorities 2011**

- Continuity of Operations Preparedness
- Customer Service
- Emergency Preparedness
- Financial & Program Integrity
- Health Care Consumerism
- Health Improvement
- Health Care Transformation
- Public Health

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Workforce Development

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**Emergency Preparedness** 



Healthcare Facility Requlation



Georgia Medicaid



Public Health



SHBP | State Health Benefit Plan





#### **Emergency Preparedness and Response**

Emergency Preparedness & Response Division works to ensure a safe and healthy environment for all Georgians. Emergency Preparedness & Response manages both the Centers for Disease Control and Prevention's (CDC) Public Health Emergency Preparedness Cooperative agreement and the Health and Human Services (HHS) Assistant Secretary for Preparedness and Response Hospital Preparedness Program Cooperative Agreement. Activities have included support of pandemic influenza planning throughout the state, preparation for distribution of critical medication to counter a disease outbreak or terrorist event, and coordination of public health disaster response for wildfires, tornadoes, floods, and other natural and manmade emergencies.

Emergency Preparedness & Response also focuses on Emergency Medical Services, Trauma Systems, Training and Injury Prevention.

To learn more about Emergency Preparedness & Response visit: health.state.ga.us/programs/emerprep/index.asp

#### **Healthcare Facility Regulation**

The mission of the Healthcare Facility Regulation Division (HFR) is to protect the residents of Georgia by ensuring the highest quality of health care and safety through professional standards regulation. To achieve its mission, HFR inspects, monitors, licenses, registers and certifies a variety of health and long-term care facilities. It works to ensure that facilities operate at levels mandated by state statues and by rules/regulations adopted by the Board of DCH. HFR also receives complaints against licensed facilities, investigates unlicensed facilities, and follows up on quality-of-care issues. The division certifies various health care facilities to receive Medicaid and Medicare funds through contracts and agreements with other state and federal agencies.

In the 2008 Legislative Session SB433 was passed mandating that several of the facility licensure functions that were part of the Department of Human Resources (DHR) Office of Regulatory Services (ORS) move to DCH on July 1, 2009. Additionally, in the 2009 Legislative Session, HB228 moved additional functions related to health care facilities from DHR to DCH. On July 1, 2009, DCH created the Healthcare Facility Regulation Division as a program within the department.

To learn more about HFR visit: dch.georgia.gov/hfr



#### Medicaid

The Division of Medicaid is the largest division within DCH. It provides health care for children, pregnant women, and people who are aging, blind and disabled.

The objectives of the Medicaid program are to:

- Provide broad health care coverage to certain lower income populations
- Offer special community-based coverage for certain disabled and elder populations
- Extend supplemental coverage to lower income Medicare beneficiaries
- Offset the high costs of institutional care for lower and moderate income Georgians

## **Medicaid Initiatives**

#### PeachCare For Kids™

PeachCare for Kids<sup>™</sup> is a comprehensive health care program for uninsured children living in Georgia. The health benefits include primary, preventive, specialist, dental care and vision care.

#### Georgia Families

Georgia Families is a program that delivers health care services to children enrolled in PeachCare for Kids<sup>™</sup> and certain low income men, children, pregnant women and women with breast or cervical cancer covered by Medicaid. The program is a partnership between DCH and private care management organizations (CMO). By providing a choice of health plans, Georgia Families allows members to select a health care plan that fits their needs. The reminder of Georgia's Medicaid population includes lower income aged, blind and disabled citizens. These individuals are not included in the Georgia Families program.

#### Indigent Care Trust Fund

The Indigent Care Trust Fund supports programs and facilities serving medically indigent patients in Georgia.

#### Medicaid Long-Term Care

Medicaid Long-Term Care programs enable eligible Georgians to live in the setting that is most appropriate for their needs, including nursing facilities, their own or a caregiver's home. To be eligible for long-term care assistance, applicants must meet both income and resource limits, which may be higher than the limits for other Medicaid programs. The following are Medicaid long-term care programs:

#### Community Care Services Program (CCSP)

The CCSP waiver provides home and community-based services to elderly and/or functionally-impaired or disabled people. The program includes care management, adult day health care, alternative living services, personal care, home delivered meals, extended home health, respite care and emergency response systems.



#### Independent Care Waiver Program (ICWP)

ICWP offers services to a limited number of adult Medicaid members with physical disabilities, including persons with traumatic brain injuries (TBI). This program is for eligible Medicaid members between the ages of 21 and 64 who are severely physically disabled when they apply. ICWP services include personal support, home health, emergency response systems, specialized medical equipment and supplies, counseling and home modifications.

New Options Waiver Program/Comprehensive Supports Waiver Program (NOW/COMP)

NOW and COMP offer home or community-based service for people with mental retardation or developmental disabilities. The programs cover day rehabilitation and supported employment, residential training and supervision, personal care and respite services, specialized medical equipment and supplies, vehicle adaptations, home modifications and behavioral support services.

#### Nursing Facility

Nursing Facility services include skilled nursing care, rehabilitation services and health-related care in an institutional setting. Persons in nursing facilities need around-the-clock nursing oversight. These services also include Intermediate Care Facility/Mental Retardation and swing bed services.

Service Options Using Resources in a Community Environment (SOURCE) SOURCE serves frail elderly and disabled Georgians who are eligible for Supplemental Security Income/Medicaid. The SOURCE program is based on a case management model that uses primary care physicians on the case management team. In addition to core services of monitoring and assistance with functional tasks, SOURCE individuals can have Assisted Living Services, extended home health, personal care, home delivered meals, adult day health care, emergency response services, and 24-hour medical access to a case manager and primary care physician.

#### Home Health Services

Home Health Services include skilled nursing, home health aide, and physical, speech and occupational therapy services. Services are provided in the member's home and require physician orders. Because they are meant to be short term in nature, there is an annual limit on the number of home health visits that can be reimbursed.

#### Hospice

Hospice includes palliative medical care and services for persons who are terminally ill and their families. Hospice offers nursing care, medical social services, counseling, medications, medical appliances and supplies and hospice aide. Care may be provided in the member's home or in an in-patient facility, including nursing facilities.

#### Community Mental Health Services

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Community Mental Health Services are provided to persons of all ages who have mental illness or issues with substance abuse. Services are provided in the community, in out-patient facilities, clinics or short-term in-patient facilities.

To learn more about Medicaid visit: http://dch.georgia.gov/medicaid



#### **Public Health**

The Division of Public Health (DPH) is the lead agency entrusted by the people of the state of Georgia with the ultimate responsibility for the health of communities and the entire population. At the state level, DPH is divided into numerous branches, sections, programs and offices, and at the local level, DPH functions via 18 health districts and 159 county health departments. Public Health's essential services include:

- Assess the health status of the population;
- Establish and implement sound public health policy;
- Inform and educate people so they have the resources and skills necessary to live healthy;
- Investigate, identify and prevent environmental conditions that adversely impact health;
- Link people to needed health services such as family planning or immunization; and
- Conduct surveillance and research on influenza, food borne pathogens and many other harmful conditions.

Public Health is comprised of seven main program areas; Health Promotion & Disease Prevention, Maternal & Child Health, Infectious Disease & Immunization, Environmental Health, Epidemiology, Vital Records and the State Public Health Laboratory.

#### **Health Promotion & Disease Prevention**

Health Promotion & Disease Prevention programs implement populationbased programs and services aimed at reducing disease risks, promoting healthy youth development, targeting unhealthy behaviors, providing access to early detection and treatment services and improving management of chronic diseases. Health Promotion and Disease Prevention programs and initiatives include but are not limited to:

#### Adolescent Health and Youth Development

The Adolescent Health and Youth Development (AHYD) unit was established as a result of the teenage pregnancy prevention initiative funded by the Georgia General Assembly beginning in FY1998. Together with Workfirst, the aim of the teenage pregnancy prevention initiative is to prevent welfare dependency and improve economic opportunity and responsible parenting.

Funds are provided to support the planning, development, implementation and evaluation of successful programs that address the broad range of social and economic factors that affect teen behavior, including substance abuse, violence, tobacco use, obesity, and teen sexual activity before marriage.

#### Georgia Tobacco Use Prevention Program

The mission of the Georgia Tobacco Use Prevention Program (GTUPP) is to reduce the use of tobacco and the burden it causes from related illness and disease in Georgia by coordinating strategies in tobacco use prevention and control, provide technical assistance and training on policy development, program interventions, communications strategies and serve as a resource center for tobacco issues.



#### Stroke and Heart Attack Prevention Program

The Stroke and Heart Attack Prevention Program (SHAPP) is an education and direct service program targeted to low-income, uninsured Georgians with diagnosed hypertension. Services include blood pressure screening, referral to physicians, diagnosis, case management and treatment. SHAPP also provides counseling on lifestyle modifications including better eating habits, increased physical activity, smoking cessation, weight management and medication adherence.

## Breast and Cervical Cancer Program

This program provides access to timely breast and cervical cancer screening and diagnostic services for low-income, uninsured, and underserved women who are between the ages of 40-64 for breast cancer and 21-64 for cervical cancer.

# To receive a full list of programs within the Health Promotion and Disease Prevention section go to page 23.

## Maternal & Child Health

The Maternal & Child Health (MCH) programs work to promote and improve the health and well-being of women, children and families by building MCH epidemiology and data capacity at the state and local levels to effectively use information or public health actions. MCH programs include but are not limited to:

## MCH Title V Block Grant

The purpose of the MCH Block Grants to the states is the creation of Federal-State partnerships to develop service systems in communities that can meet the critical challenges facing maternal and child health. For every \$4 of federal funds, at least \$3 must be matched by state and local funds.

Each year in mid-July, the Family Health Branch submits its grant application for Federal Maternal and Child Health funding to the Health Resources Services Administration (HRSA). MCH block grants are utilized to address the following priorities:

- Significantly reducing infant mortality;
- Providing comprehensive care for women before, during, and after pregnancy and childbirth;
- Providing preventive and primary care services for children and adolescents;
- Providing comprehensive care for children and adolescents with special health care needs;
- Immunizing all children;

- Reducing adolescent pregnancy;
- Preventing injury and violence;
- Putting into community practice national standards and guidelines (e.g., prenatal care; healthy and safe child care; and health supervision of infants, children, and adolescents);
- Ensuring access to care for all mothers and children; and
- Meeting the nutritional and developmental needs of mothers, children, and families.



## Children's Medical Services

The mission of the Children's Medical Services program is to provide a comprehensive system of health care for children and youth with eligible chronic medical conditions from birth to 21 years of age. Children's Medical Services is intended to ensure specialty health care services to these children of Georgia who live in low income households. These services are administered by Children's Medical Services in a family-focused, coordinated, and culturally-caring approach.

Children's Medical Services is the state and federally funded Title V Children with Special Health Care Needs Program. Eligibility for the program includes medical and financial requirements. The financial requirements are updated yearly.

#### Babies Can't Wait

Babies Can't Wait (BCW) is Georgia's statewide interagency service delivery system for infants and toddlers with developmental delays or disabilities and their families. BCW is established by Part C of the Individuals with Disabilities Education Act (IDEA) which guarantees all eligible children, regardless of their disability, access to services that will enhance their development.

## WIC

Georgia's Special Supplemental Nutrition Program for Women, Infants & Children (WIC) program is a special nutrition program for low income pregnant, postpartum and breastfeeding women and children up to the age of 5 years. The program provides nutrition education, nutritious foods, breastfeeding promotion and support, and referrals to other health

services. The Georgia WIC program is 100 percent federally funded and serves families with incomes up to 185 percent of the federal poverty level.

Program participants receive vouchers to redeem at authorized grocery stores and pharmacies for special foods rich in protein, iron, calcium, and vitamins A and C. These foods include eggs, cheese, milk, cereal, fruit juices, dried peas and beans, peanut butter and infant formula. Participants breastfeeding their babies receive carrots and tuna in addition to the standard food package.

In October 2009, WIC announced the availability of new WIC food packages. WIC food packages across the nation were recently changed to better meet the nutritional needs of WIC participants and encourage healthier eating habits. The allowance of foods such as tortillas, brown rice, soy-based beverage and fresh fruits and vegetables provide increased flexibility in prescribing culturally appropriate food packages.

# To receive a full list of programs within the Maternal and Child Health section go to page 23.

### Infectious Disease & Immunization

Through collaboration with public and private providers, advocacy groups, and other stakeholders, the Infectious Disease & Immunization program works to increase immunization rates for all Georgians and decrease the incidence of vaccine-preventable diseases. Infectious Disease and Immunization programs include:



#### HIV Unit

The mission of the HIV unit is to reduce HIV transmission and provide excellence in Georgia's HIV/AIDS services through innovation and community partnership. The HIV Unit is dedicated to the provision of education, information, and health care services that promote and protect the health of all Georgians. To achieve this mission the HIV Unit coordinates services through our HIV Care (Ryan White Part B) program and the HIV Prevention program.

#### Sexually Transmitted Disease (STD)

The STD program provides technical assistance to the Public Health Districts to prevent STD infection ensuring the availability of quality prevention and treatment by improving quality assurance guidelines and methods by appropriate training.

The STD section works to reduce morbidity associated with sexually transmitted disease in Georgia by preventing STDs and their complications in both the public and private sectors.

## Tuberculosis (TB)

The mission of the TB program is to control transmission, prevent illness and ensure treatment of disease due to tuberculosis. This is accomplished by the following:

- Identifying and treating persons who have active TB disease
- Finding, screening and treating contacts
- Screening high-risk populations

The TB Program has the legal responsibility for all TB clients in Georgia regardless of who provides the direct services. TB services are available to all who fall within the service criteria without regard to the client's ability to pay.

#### Refugee Health

The purpose of the Refugee Health program is to promote the physical, mental and social well-being of all newly arriving refugees in the state of Georgia.

The program ensures that refugees receive adequate healthcare, which is not provided in their native country. Screening refugees within 90 days of their arrival aids in the reduction of contracting contagious diseases and/or spreading any diseases to the indigenous community in which the refugee resides. In correlation, outreach services provide health education to the refugee community, further ensuring prevention of infirmity.

#### **Environmental Health**

Provide primary prevention through a combination of surveillance, education, enforcement and assessment programs designed to identify, prevent and abate the environmental conditions that adversely impact human health. Environmental Health programs include but are not limited to:

#### Food Service Program

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Minimize food-borne related illnesses through regulation and routine inspection of food service establishments, investigation of food-borne related complaints and illnesses and education and training for food



service operators and managers. In August 2009, the Food Service program launched Georgia's statewide health inspection search tool.

#### Public Swimming Pools, Spas and Water Parks

Reduces illness and injuries through regulation and inspection of more than 8,000 facilities; investigates complaints and water-borne illnesses; provides consultation and inspection of new construction; and provides training for pool operators and environmental health specialists.

#### Childhood Lead Poisoning Prevention

Seeks to eliminate lead poisoning through screening, monitoring and educating on the causes of lead poisoning, conducts environmental inspections to identify lead hazards; and requires lead hazard abatement of rental residential property and facilities identified with lead hazards.

# To receive a full list of programs within the Environmental Health section go to page 23.

## Epidemiology

The Epidemiology Program (Epi) improves the health status of Georgians by monitoring the distribution and determinants of health related states or events in the population. This information is used to control health problems and provide the data for evidence-based practice. Health information is used to guide strategic planning at state and local levels and to improve Epi programs and Georgia's health status. Public health agencies, partners within DCH and other partners use the data to determine the health challenges and areas of greatest need across the state. This system helps communities' direct efforts to achieve the greatest possible public health benefit. The Epi program is organized into four areas; Acute Disease Epidemiology (ADES), Chronic Disease, Injury & Environmental (CDIEE), Maternal & Child Health (MCH), and Office of Health Indicators for Planning (OHIP).

## Significant Activities and Services

- Assess and monitor the health status of Georgians
- Monitor behavioral risks of Georgians
- Respond to and investigate disease outbreaks
- Control communicable diseases
- Produce annual health status report cards
- Maintain registries of priority health problems such as stroke, birth defects and cancer
- Provide vital records and hospital data for health planning through Online Analytical Statistical Information System (OASIS)

### **Vital Records**

The mission of the State Office of Vital Records is to provide accurate records and data concerning vital events to Georgians and other stakeholders in an expeditious and friendly manner. The office maintains birth and death records filed from 1919 to the present.

#### **State Health Laboratory**

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The State Health Laboratory program works to improve the health status of Georgians by providing accurate, timely and confidential clinical and non-clinical laboratory testing in support of Division of Public Health programs, activities and initiatives as well as performing tests for Emergency Preparedness.





To accomplish the role of providing appropriate support for continually evolving public health programs, the Georgia Public Health Laboratory (GPHL) provides screening, diagnostic and reference laboratory services to citizens of the state through county health departments, public health clinics, physicians, other clinical laboratories, hospitals and state agencies.

The GPHL consists of laboratory facilities in three locations. They include:

- Central Laboratory Facility in Decatur, Georgia (opened in December 1997)
- Albany Regional Laboratory
- Waycross Public Health Laboratory (opened in August 2007)

The GPHL is arranged in five broad areas of testing and support. They include:

- Chemistry (Newborn Screening Unit, Lead Screening and Fluoride Testing)
- Emergency Preparedness (Biological/Chemical Terrorism and Molecular Biology Units)
- Facilities Support
- Microbiology (Bacteriology, Microbial Immunology, Mycology/ Mycobacteriology, Parasitology and Virology Units)
- Operations (Accessioning, Data Entry, Reports & Records, Billing, Budget, Personnel and Purchasing)

To learn more about the Public Health Division visit: health.state.ga.us/

#### **State Health Benefit Plan**

The State Health Benefit Plan (SHBP) provides health insurance coverage to state employees, school system employees, certain contract groups, retirees and their dependents. DCH's Public Employee Health Benefit Division is responsible for day-to-day operations. The SHBP covered 680,839 lives as of October 1, 2010.

Within SHBP, there are seven operating units. Their responsibilities include: answering member's questions, processing member eligibility transactions, assisting employer groups, processing member appeals, health benefit plan design, reviewing vendor performance and clinical standards, enforcing contract compliance among vendors, managing the annual enrollment/ change period and conducting member educational programs.

SHBP currently offers four Plan options for its active members and their dependents, including:

- Health Reimbursement Arrangement (HRA)
- High Deductible Health Plan (HDHP)
- Health Maintenance Organization (HMO)
- Open Access Plan (OAP) this plan will no longer be offered, effective January 1, 2011

Retirees may select from any of the Plan options listed above, but at age 65, they also have two additional options to select from: Medicare Advantage PPO – Standard and Premium Plans, if they have a minimum of Medicare Part B coverage.

To learn more about SHBP visit: dch.georgia.gov/shbp

Communications Financial Management General Counsel Health Information Technology & Transparency Information Technology Inspector General Legislative & External Affairs Operations

#### **Communications**

The Office of Communications serves as DCH's primary point of contact for all marketing, branding, media relations, and internal and external communications activities. The Communications team focuses its efforts on creating and maintaining a consistent brand and messaging for DCH. Specifically the team creates facts sheets for all of DCH's offices, divisions and programs, writes and distributes press releases and media advisories, designs and implements member and provider educational and promotional campaigns, and works with subject matter experts to create legislative briefs.

The Office of Communications is also responsible for Intranet and Internet web site maintenance, and oversees of the Governor's Office of Customer Service program at DCH.

#### **Financial Management**

Financial Management represents the financial interests of the Department. It is comprised of the Office of Planning and Fiscal Analyses, Financial and Accounting Services, Reimbursement Services and the Budget Office.

#### **Office of Planning and Fiscal Analyses**

This office is the primary source of data for internal and external adhoc and routine data requests related to claims payments and the manager of the Department's Decision Support System (DSS). This Office also provides health benefit payment projections for Medicaid, PeachCare for Kids<sup>™</sup>, and the State Health Benefit Plan.

## Financial and Accounting Services

This unit is responsible for payments to providers, vendors, and employees and prepares financial reports to ensure receipt of Medicaid, PeachCare for Kids<sup>TM</sup>(Georgia's S-CHIP) and other federal funding.

#### **Reimbursement Services**

This unit performs rate setting functions for the Medicaid and PeachCare for Kids programs and is comprised of units that support Nursing Home and Long Term Care payments; Hospital Payments; and other noninstitutional provider payments. This unit supports special financing projects such as the Upper Payment Limit and Disproportionate Share Hospital programs.

#### **Budget Office**

This office develops, requests, maintains, and monitors the department's budget. The Budget Officer represents the agency in the budget development process as the agency's request is reviewed by the Governor and General Assembly.

#### **General Counsel**

General Counsel provides overall guidance and direction for the operations of the Division; drafts and reviews procurement documents; provides legal services for all aspects of the State Health Benefit Plan; develops policies and procedures for compliance with federal and state privacy and public records requirements; drafts rules, regulations and policies for consideration by the Board of Community Health; and provides staff support for the Health Planning Review Board. Also contains the Certificate of Need Section and Division of Health Planning.

# Enterprise Support Functions

#### Legal Services Section

Provides legal services for all aspects of the Medicaid and PeachCare for Kids<sup>™</sup> programs; including representation of the department in administrative proceedings, litigation support to the Department of Law, and research and drafting of Medicaid and PeachCare for Kids<sup>™</sup> policy and procedures.

#### **Certificate of Need Section**

Administers Georgia's Certificate of Need program, conducts reviews of CON applications and issues CON decisions.

#### **Health Planning Section**

Collects health care data, helps to develop policies for health care services and provides staff, data, and analytical support for the Certficate of Need program, Health Strategies Council, and for the Department in general.

#### **Health Strategies Council**

As per Senate Bill 433 the role and responsibilities of the Health Strategies Council has changed effective July 1, 2008. The Health Strategies Council is currently pending new appointments by the Governor.

#### **Certificate of Need Appeal Panel**

Composed of members appointed by the Governor the CON Appeal Panel serves as a panel of independent hearing officers to review the Department's initial decisions to grant or deny a certificate of need application.

#### **Contracts Administration Section**

Manages the contracting process for the Department. The Section is responsible

for document review and drafting, contract management, file maintenance, training, and contingency planning. In accordance with its mandate, the section responds to contract needs of every Division in the Department.

#### Health Information Technology & Transparency

The Office of Health Information Technology and Transparency (HITT) is responsible for leading the strategic efforts of the state of Georgia for health information technology adoption and health information exchange (HIE) to improve health care delivery for providers, healthcare professionals and consumers. See below for HITT programs and initiatives.

## Health Information Security and Privacy Collaboration

Georgia is working with other states in the Health Information Security and Privacy Collaboration (HISPC) to engage and educate consumers about electronic health information, especially electronic health records (EHRs). The purpose of these EHRs is to maintain the highest quality of data that is secure, private and accessible. Georgia wants to raise consumer awareness of the benefits of electronic health information and the security and privacy safeguards that can protect it.

#### **EHR Community Partnership**

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Georgia's EHR Community Partners, is a collaboration of public and private organizations committed to expanding the use of Health Information Technology. The partners will assist DCH with outreach activities, education and recruitment of eligible primary care physician practices in their communities. The partners will also collaborate with DCH on an ongoing basis in an effort to assist them in achieving the goal of leveraging the

# Enterprise Support Functions

combined forces of private and public payers to implement programs to further drive physician practices toward the widespread adoption of EHRs.

#### **Medicaid EHR Incentives Program**

Medicaid HIT Planning Initiative

DCH was provided \$3.2 from CMS to assess the current health IT landscape in the state, create a strategic Medicaid Health IT Plan and to develop the infrastructure for disseminating Medicaid funds to providers for the adoption and utilization of certified electronic health record systems. *Key Partners: Centers for Medicare and Medicaid Services* 

Medicaid Provider Incentives Program for Certified EHR Technology CMS will reimburse state up to 100% of costs associated with providing Medicaid providers funding to adopt, implement, upgrade, or demonstrate meaningful use of certified EHR technology. *Key Partners: Centers for Medicare and Medicaid Services* 

#### **State HIE Cooperative Agreement**

Grant award from the Office of the National Coordinator for Health Information Technology (ONC) in the amount of \$13 million to develop a Strategic and Operational Plan for a statewide Health Information Exchange (HIE) that will allow the secure exchange of health information between public and private health care entities across the state. *Key Partners: HITT Advisory Board* 

#### **Regional Extension Center**

Morehouse School of Medicine's National Center for Primary Care is the Nonprofit Entity in Georgia that received a grant from the ONC in the amount of \$19 million to assist with the adoption, implementation, upgrade and meaningful use of certified EHRs. *Key Partners: DCH is a supporting partner* 

#### **Information Technology**

Information Technology is responsible for promoting project management standards throughout DCH. The Medicaid Management Information System (MMIS) unit supports the various systems used for the processing, collecting, analyzing and reporting of information needed to support all Medicaid and PeachCare for Kids claim payment functions.

#### **Inspector General**

The Office of Inspector General carries out the Department's mission by rigorously investigating and auditing Georgia Medicaid Providers and Recipients to uncover criminal conduct, administrative wrongdoing, poor management practices, waste, fraud and other abuses by participating organizations.

#### **Program Integrity**

The Program Integrity Unit (PI) is charged with the responsibility of monitoring the utilization habits and patterns of both members and providers of the Medicaid Community. PI consists of five teams including: Hospital, Pharmacy, Physician Services, Waivers and Professional Services. PI also seeks to ensure that eligible members have access to the health care

# Enterprise Support Functions

facilities and health care professionals to receive quality care throughout the State of Georgia, and educate providers about compliance regulations in accordance with the policies and procedures established by State and Federal guidelines. It is also the responsibility of PI to ensure that all personal health information (PHI) is handled in a safe and secure manner during the collection and review processes.

#### **Internal Investigations**

The Internal Investigations unit is charged with the responsibility of investigating:

- Employee misconduct involving allegations of legal violations against DCH;
- Employee misconduct involving Standards of Conduct, Ethics, and Conflict of Interest policy violations;
- Fraud, waste, and abuse involving DCH employees, contractors, subcontractors and vendors; and
- Other activities that could potentially have a negative impact on the integrity of DCH, its reputation and its employees.

## **Office of Audits**

The DCH Office of Audits is responsible for both internal and external audits and reviews. In the near future, the office will do programmatic reviews/ audits of programs within DCH as well. The main function of the DCH Office of Audits is to perform, coordinate, monitor, and assist in all internal and external audits occurring at DCH.

## **Medicaid Investigations Unit**

The Medicaid Investigations Unit is charged with the primary responsibility to identify and investigate fraud and abuse within the Medicaid and Peachcare for Kids<sup>™</sup> Programs (both provider and recipient). The Unit also works with HHS-OIG and the FBI on cases that cross over between Medicaid, Medicare and private insurance. These cases are usually prosecuted by the U.S. Attorney's Office.

#### **Legislative External Affairs**

The Office of Legislative Affairs serves as DCH's primary point of contact for all activities related to the Georgia General Assembly and the annual Legislative Session. During each session, the DCH legislative unit analyzes bills that affect Medicaid, SHBP and health care in general. The Legislative and External Affairs Unit also is responsible for ensuring the passage of the department's legislative agenda each year.

The Office of Legislative and External Affairs includes the Office of Constituent Services (OCS).

OCS is the customer service agent for Georgia's Medicaid program. OCS interacts daily with members, providers, legislators and others, as well as helping Georgians understand the Medicaid program and the department's business functions as a whole. OCS responds to thousands of calls, e-mails, letters, faxes and inquiries relating to the Medicaid program.

#### **Operations**

Operations consists of the Office of Vendor and Grant Management, Human Resources, Support Services, the Office of Health Policy and Strategy, and the Department's five Health Improvement Programs, which are the Office of Minority Health, the Office of Women's Health, the Georgia Commission on Men's Health, the Georgia Volunteers in Health Care program and the State Office of Rural Health.

#### **Office of Procurement Services**

The Office of Procurement Services (OPS) is responsible for the centralized procurement of goods and services for DCH. Procurement Services are made available to DCH's three administratively attached agencies upon request. It is the mission of OPS to obtain quality goods and services at the lowest reasonable cost for the best value, while operating at the highest standards of ethical conduct and achieving optimum results for its members and recipients.

The Grants Unit within OPS was created in March 2006 to support initiatives throughout the DCH that are funded by state, federal, and other grant sources. The charge of the unit is to ensure fairness in all aspects of the grant process including grant development, application, evaluation and award as well as compliance with mandated and procedural requirements. The unit is also responsible for proper dispensing of grant funds and the governance for services and activities by both grantees and all DCH staff involved in the grant process.

#### **Office of Health Improvement**

The Office of Health Improvement (OHI) focuses on education, heightened awareness and network development to change the current state of health disparities in Georgia by focusing on four major health diseases: heart disease and stroke, diabetes, cancer, and HIV/AIDS. These diseases affect all Georgians, but have a more profound affect on the state's impoverished citizens. In addition to the four primary disease categories, OHI also examines other critical health issues where there are major gaps in health prevention and education among Georgians. OHI consists of the following health programs: Office of Minority Health, the Office of Women's Health and the Georgia Commission on Men's Health.

#### Office of Minority Health

The Office of Minority Health helps minority communities reach a high level of health and wellness. It also works to eliminate the discrepancy in health status between minority and non-minority populations in Georgia.

#### Office of Women's Health

The Office of Women's Health (OWH) promotes and leads efforts to improve the health status and quality of life of women through education, research, policy development and coordination of women's health programming. The OWH serves as a voice and focal point for addressing the health issues of all women in Georgia.

#### Georgia Commission on Men's Health

Created under House Bill 1235 in year 2000, the Georgia Commission on Men's Health (CMH) seeks to address the ongoing, increasing and predominantly silent crisis in the health and well-being of Georgia's men as well as all men. The CMH functions to improve men's health outcomes and monitors proposed and active state and federal policy/legislation impacting men's health.

#### **Georgia Volunteer Health Care Program**

The Georgia Volunteer Health Care Program (GVHCP) provides Sovereign Immunity protection to licensed health care professionals who volunteer to treat uninsured individuals at or below 200 percent of the federal poverty level. GVHCP's goal is to increase access to quality health care for underserved Georgians through volunteerism and state-sponsored liability protection.

#### **State Office of Rural Health**

The State Office of Rural Health (SORH) works to improve access to health care in rural and underserved areas and to reduce health status disparities. SORH provides funding for institutional framework that links small rural communities with State & Federal resources to help develop long-term solutions to rural health problems.

Attached Agencies Board of Community Health Georgiahealthinfo.gov DCH Career Opportunities Additional Public Health Programs Health District Health Map Health District Contacts

#### **Attached Agencies**

*Georgia Composite Medical Board* ensures quality health care for all Georgians by licensing qualified applicants as physicians, physician's assistants, physician residents in training, perfusionists, respiratory care professionals, acupuncturists and auricular(ear) detoxification specialists.

*Georgia Board for Physician Workforce* develops medical education programs to ensure communities are served by an adequate number of physicians.

*State Medical Education Board* administers medical scholarships and loans to promote medical practice in rural areas.

*Brain & Spinal Injury Trust Fund Commission's* mission is to enhance the lives of Georgians with traumatic brain and spinal cord injuries.

Georgia Trauma Care Network Commission — In 2007, the Georgia Legislature through Senate Bill 60 established the Georgia Trauma Care Network Commission. The bill charges the Georgia Trauma Commission to create a trauma system for the state of Georgia and to act as the accountability mechanism for distribution of trauma system funds appropriated each fiscal year by the legislature.

#### **Board of Community Health**

DCH is governed by the Board of Community Health. The Board is comprised of nine people who have policy-making authority for the Department. Board members are appointed by the Governor and confirmed by the State Senate. The members serving as of August 2010 were; Ross Mason, Vice Chairman; Inman "Buddy" English, M.D.; Norman "Norm" L. Boyd; Hannah K. Heck; Sidney Kirschner; Jamie E. Pennington, Archer R. Rose, and William "Bill" H. Wallace Jr. The Board meets the second Thursday of every month.

#### georgiahealthinfo.gov

DCH launched geogiahealthinfo.gov in December 2008. The website provides detailed information on health care providers and services in the state. It also enables citizens to research where to get the most affordable medical and prescription services closest to them, and find out more about topics of interest. In 2009, newly added features such as long-term care quality comparisons, expanded provider look-up, and clinic and specialty hospitals search tools, enhanced Georgians' ability to identify long-term care options and health care providers. Georgiahealthinfo.gov is made possible by the Department's Office of Health Information Technology and Transparency (HITT).

#### **DCH Career Opportunities**

DCH is searching for skilled individuals that share a passion for its mission. For the latest career opportunities, visit: dch.georgia.gov/jobs

## **Additional Public Health Programs**

#### **Health Promotion and Disease Prevention**

Adolescent Health and Youth Development Asthma Control Breast and Cervical Cancer Cancer State Aid Cardiovascular Health Initiative Comprehensive Cancer Control Diabetes Prevention and Control Live Healthy Georgia Nutrition and Physical Activity Initiative Rape Prevention and Education Stroke and Heart Attack Prevention Program Tobacco Use Prevention Women's Health Medicaid Worksite Wellness

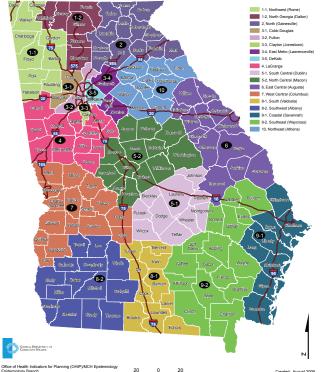
#### **Maternal and Child Health Programs**

Title V Children's Medical Services Babies Can't Wait Newborn Genetic Screening WIC Family Planning Regional Perinatal Centers Children First Oral Health Universal Newborn Hearing and Screening Intervention Nutrition Early Childhood Comprehensive Systems

#### **Environmental Health Programs**

Food Service Establishments On-Site Sewage Management Systems Land Disposal of Septic Tank Waste Public Swimming Pools, Spas and Water Parks Tourist Accommodations Childhood Lead Poisoning Prevention Tattoo Studios Rabies Control and Vector Borne Disease Tanning Facilities Control of Mass Gatherings Non-Public Water Supply Chemical Hazards Indoor Air Quality

## **Georgia Public Health Districts**



Epidemiology Branch Division of Public Health Georgia Department of Community Health

Miles

Created: August 2009 Source: Division of Public Health Projection: Georgia Statewide Lambert Conformal Conic C. Wade Sellers, M.D., MPH Northwest Georgia Health District (Rome) District 1, Unit 1 1309 Redmond Rd NW Rome, GA 30165-9655 T: 706-295-6704 F: 706-802-5435 AA: Kathy Kitchens 706-295-6704 cwsellers@dhrstate.au.s

Harold W. Pitts, M.D., J.D. North Georgia Health District (Dalton) District 1, Unit 2 100 W Walnut Ave, Suite 92 Dalton GA 3020-8427 T: 706-272-2392 F: 706-272-2291 AA: Jennifer Sampson 706-272-2342 x343 hwolts@dhrstate.oa.us

#### David N. Westfall, M.D., CPE North Health District (Gainesville)

District 2 1280 Athens St Gainesville GA 30507-7000 T: 770-535-5743 F: 770-535-5958 AA: Kathy Moreland 770-535-5866 dnwestfail@dhr.state.ga.us

#### John (Jack) Kennedy MD, MBA

Cobb/Douglas Health District District 3, Unit 1 1650 County Services Pkwy Marietta GA 30008-4010 T: 770-514-2330 F: 770-514-2330 AA: Pam Mashburn 770-514-2330 DKennedy@dhr.state.ga.us

#### Patrice Harris, MD

Fulton County Department of Health and Wellnass Districi 3, Unit 2 99 Jesse Hill Jr Dr SE Atlanta GA 30303-3045 T: 404-730-1202 F: 404-730-1294 AA: Glenda Robinson 404-730-1242 Patrice,Harris@ultoncountyga.gov

#### Alpha F. Bryan, M.D.

Clayton County Health District (Morrow) District 3, Unit 3 1117 Battlecreek Rd Jonesboro GA 30236-2407 T: 678-610-7199 F: 770-603-4872 AA: Helen Garrett 678-610-7258 afbryan@dhr.state.ga.us Lloyd M. Hofer, M.D., MPH East Metro Health District (Lawrenceville) Districi 3. Unit 4 PO Box 897 Lawrenceville GA 30046-0897 2570 Riverside Pkwy (30046-3339) T: 770-339-4280 F: 770-339-4280 AA: Suzette Gonzales 678-442-6908 Imhofer@dhr.state.ga.us

#### S. Elizabeth Ford, MD, MBA

DeKalb Health District District 3, Unit 5 PO Box 987 Decatur GA 30031-0987 445 Winn Way, Sulie 553 (30030-1707) T: 404-294-3700 F: 404-294-3700 F: 404-294-3787 AA: Sandra Piñeyro 404-294-3787 seford@dhr state.ga.us

#### LaGrange Health District

District 4 122 Gordon Commercial Dr, Suite A LaGrange GA 30240-5740 T: 706-845-4035 F: 706-845-4350 AA: Debbi Heard 706-845-4035 x219

#### Lawton C. Davis, M.D.

South Central Health District (Dublin) District 5, Unit 1 2121-B Bellevue Rd Dublin GA 31021-2998 T: 478-275-6645 F: 478-275-6655 AA: Amanda Kay Stevenson 478-275-6565 Icdavis@dhrstate.ga.us

#### David N. Harvey, M.D.

North Central Health District (Macon) District 5, Unit 2 811 Hemiock St Macon GA 31201-2198 T: 478-751-6303 F: 478-751-6099 AA: Regina Andrews 478-751-6247 dnharvey@dhr.state.ga.us

#### Ketty M. Gonzalez, M.D., M.S.

Eas<sup>C</sup> Contral Health District (Augusta) District 6 1916 N Leg Rd Augusta GA 30909-4437 Tr. 706-667-4250 F: 706-667-4250 A: Helen Smith 706-667-4257 kmgonzalez@dhr.state.ga.us

#### Zsoti H. Koppanyi, M.D., MPH West Central Health District (Columbus) District 7 PO Box 2299 2100 Comer Ave (31904-8725) 7: 706-321-6300 AA: Carol Popwell 706-321-6108 AA: Carol Popwell 706-321-6108

#### South Health District (Valdosta)

District 8, Unit 1 PO Box 5147 Valdosta GA 31603-5147 312 N. Patterson St (31601-5526) T: 229-333-5290 F: 229-333-7822 AA: Theresa Clark 229-245-6431

#### Jacqueline H. Grant, MD, MPA, MPH

Southwest Health District (Albany) District 8, Unit 2 1109 N. Jackson St Albany GA 31701-2022 T: 229-430-4127 F: 229-430-4127 F: 229-430-5143 AA: Nancy Rumph 229-430-4127 jngrant@dhr.state.ga.us

#### W. Douglas Skelton, M.D.

Coastal Health District (Savannah) District 9, Unit 1 PO Box 15879 Savannah GA 31416-2579 24 Oglethorpe Professional Blvd (31406) T: 912-644-5210 F: 912-644-5220 AA: Ruthie Smoat 912-644-5205 wdskelton@dhr.state.ga.us

#### Rosemarie D. Parks, M.D., MPH

Southeast Health District (Waycross) District 9, Unit 2 1101 Church St Waycross GA 31501-3525 T: 912-285-6002 F: 912-284-2980 AA: Melinda Monroe 912-285-6020 rdparks@dhr.state.ga.us

#### Claude A. Burnett, M.D., MPH

Northeast Health District (Athens) District 10 220 Research Dr Athens GA 30605-2738 T: 706-582-2870 F: 706-548-5181 AA: Andrea Weatherford 706-583-2870 cabmd@dhr.state.ga.us