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Georgia Project e-Newsletter

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Welcome!

Welcome to the third issue of the Georgia Project Quarterly e-Newsletter. We offer this e-Newsletter as a way to keep you informed of our activities and progress in Georgia. In addition, since transformational leadership training is one of CHT’s key activities, we will include in each issue a key principle, idea or passage from our book *The Art of Transformation*, co-authored by CHT founder Newt Gingrich and CHT CEO Nancy Desmond.

The basic strategy of the Georgia Project is to work collaboratively with transformational leaders to accelerate the creation and adoption of solutions, technologies and policies that drive system-wide transformation into a 21st Century Health System that saves lives and saves money for all Americans. Although we work actively in 39 states, Georgia serves as an implementation project where we identify and build models to replicate in other states. Our members and allies play key roles in the identification and development of the models that are transforming health and healthcare.

The Georgia-based CHT team:

Nancy Desmond, CEO of the Center for Health Transformation.
Laura Linn, Director of the Georgia Project
Wayne Oliver, Project Director
Jennifer Cunningham, Executive Assistant to the CEO

Elizabeth Ofili, MD, MPH, Morehouse School of Medicine - CHT Senior Advisor
Ron Bachman, CHT Senior Fellow
Terry Womack, CHT Fellow

We welcome your feedback, ideas, questions and comments, as our goal is not just to inform and educate but also to learn from you. We hope you enjoy this edition of our Georgia newsletter.

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The Healthy Georgia Diabetes and Obesity Project

The Healthy Georgia Diabetes & Obesity Project continues to have a positive impact on the health of Georgians and to serve as a model for other states. Launched at the Governor's Mansion in 2005, the project now has communities, employers, providers, insurers and others working throughout Georgia to improve the health of our citizens. Updates on several of the initiatives from this project are provided below.

'Nique & Newt's Full-Court Press on Diabetes'

NBA hall of famer Dominique Wilkins is the latest addition to our collaboration of leaders in Georgia dedicated to the creation of a 21st century intelligent health system. Dominique is working with CHT on a project described as "Nique and Newt's Full-Court Press on Diabetes." The initiative is designed to increase awareness, detection and prevention of diabetes and its complications, with a special focus on preventing children from developing the disease and its complications.

"Diabetes takes a tragic toll on Americans – and the toll is even greater among the African-American and Hispanic populations," said Newt. "We believe that having someone of Dominique's stature work with us to raise awareness about diabetes at venues such as the National Black Arts Festival will help us accomplish two equally important goals: one, the prevention of diabetes and its complications and, two, the elimination of health disparities in America."

Dominique said, "What the Center for Health Transformation has been doing, both in Georgia and nationally, is vitally important. I believe, by working together, we can turn the tide on diabetes and create a better, healthier future for Americans everywhere."

Dominique, who was diagnosed with diabetes seven years ago, first discussed working with the Center when he attended an event in Columbus, Georgia where Newt spoke about CHT's Healthy Georgia Diabetes and Obesity Project.

Newt and 'Nique teamed up in an effort to bring their fight against diabetes to the National Black Arts Festival held in Atlanta in July.



CHT served as a sponsor of the National Black Arts Festival, including hosting a booth at Greenbriar Mall July 20-24 and at Atlantic Station July 25-28. In addition to distributing information about the prevention, diagnosis and treatment of diabetes and distributing over 1800 pedometers, free diabetes screenings were held at both locations. The screenings were provided by Novo Nordisk, Inc., the Diabetes Association of Atlanta, the American Association of Diabetes Educators and the Institute for Wellness and Education.

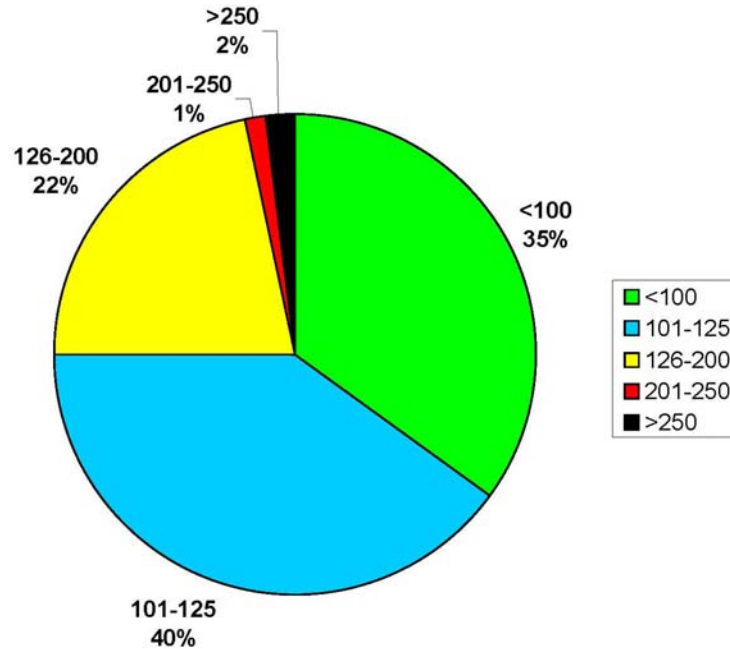


CHT CEO Nancy Desmond distributing information on how to prevent diabetes



Laura Linn, Director of the CHT Georgia Project, conducting the free diabetes screenings

Glucose Values from Screening at National Black Arts Festival



The Center for Health Transformation believes that diabetes screening activities play an important role in increasing awareness, identifying those with diabetes or at high risk of developing the disease, and connecting with communities.

Update on NCQA Diabetes Recognition in Georgia

The number of Georgia physicians recognized by NCQA for delivering high quality diabetes care is currently at 144 [from a baseline of 5]. DPRP recognition activities are underway in Metro Atlanta, Columbus, Savannah, Gainesville, and Rome.

Our Bridges to Excellence pay for performance initiative in Georgia is set to pay the initial bonuses in November to those physicians DPRP recognized last year. We continue to recruit physicians for recognition throughout Georgia. Pfizer sponsored a physician dinner in metro Atlanta in June where Newt spoke on the 21st Century Intelligent Health System; Ken Freeman, MD of Howard University spoke on pay for performance; Bruce Bode, MD of Atlanta Diabetes Associates discussed his experience with the DPRP process followed by a panel discussion with Jonathan Marquess, Pharm D of the Institute for Wellness & Education, Jack Spicer, MD of Aetna, and Terry Womack, Fellow of the Center for Health Transformation.



Newt & Jack Spicer, MD at the
Physician Dinner

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21st Century Healthy Communities

Columbus Georgia Project

Dr. Steven Leichter and the team in Columbus Georgia have begun the screening portion of the project focused on metabolic syndrome. Early results are indicating that metabolic syndrome is more prevalent than expected. The team predicts that they will have screened 1,000 individuals by mid November.

The Columbus Research Foundation is presenting an annual conference called "Diabetes University" October 19th and 20th at the Columbus Convention and Trade Center. The title for the conference this year is *The Hormonal Control of Weight and Appetite in Metabolic Syndrome*. This conference will outline the various hormonal and pharmacological influences that affect appetite regulation in patients with metabolic syndrome. It is open to all health professionals in the southeast region and all physicians, nurses and nurse educators will receive CME and CEU credits. The conference is free to all participants. This will be the 5th annual Columbus Diabetes University. Newt spoke at the event last year, launching the Columbus Project. Dominique Wilkins will participate in the conference this year.

If you are interested in attending or exhibiting at the event please contact Laura Linn at llinn@gingrichgroup.com.

Gainesville GA Healthy Community Project

The healthy community project in Gainesville Georgia is also making great progress. The Greater Hall Chamber of Commerce is sponsoring an interactive health and wellness expo, HealthSmart, October 24 at the Georgia Mountains Center. This expo is the culmination of months of work by a collaboration of leaders who came together to improve the health of the

citizens of Hall County.

In an interview in AccessNorthGA.com, Mimi Collins, Administrator of the Longstreet Clinic and chair of the Greater Hall Chamber of Commerce Healthcare Committee said "I am excited about the momentum moving us towards the vision of becoming the healthiest community in Georgia. It is gratifying to see all segments of our community embrace initiatives brought to light from the VISION 2030 process. I think we can look back towards Speaker Gingrich's visit last year to Gainesville as a tipping point, and the involvement of his Center for Health Transformation has been critical in our progress."

As a part of the 'Nique and Newt Full-Court Press on Diabetes, Dominique Wilkins will open the expo at a breakfast event and the Center for Health Transformation will sponsor a booth at the expo that will offer free glucose screening.

For more information on the HealthSmart expo and sponsorship opportunities please contact Laura Linn at llinn@gingrichgroup.com.

WellStar Health System's Be Well 101 Project

Recognizing that the incidence of pediatric obesity has reached epidemic proportions in the United States, WellStar Health System has partnered with their Pediatric Cardiologists, Children's Cardiovascular Medicine, in a collaborative effort to provide a targeted multidisciplinary program aimed at having significant reduction of the impact of comorbidities in 'at risk' children ages seven to seventeen.

Prevalence of pediatric obesity is at 15% of the 6-19 year old population and is on a steady increase. The presence of obesity predisposes the child to insulin resistance, early hypertension and future type 2 diabetes. Four primary risk factors have been identified by the American Diabetes Association and the American Academy of Pediatrics as placing children at increased risk of developing Type 2 diabetes:

1. Overweight
2. Family history of diabetes
3. Ethnicity
4. The presence of insulin resistance.

The focus of the Be Well 101 project is the result of collaboration between the physicians (Children's Cardiovascular Medicine) managing a high volume of patients with obesity and/or insulin resistance and the resources and expertise of the community health system (WellStar). The hope is to reduce the prevalence of obesity and diabetes in the community's pediatric population, which in turn will create a healthy community long term. This should then reduce the health care burden of the community.

A pilot program was designed to test a Health Literacy model felt to have an opportunity to successfully reduce the risk factors and disease burden of children identified to be overweight, hypertensive or insulin resistant. Each screened child meeting criteria was enrolled in Be Well 101 of the WellStar Living Well University, a six month health education program designed to engage the child in better self management of his or her health through intense education and exercise.

The program consists of the following components:

1. Health education content provided by a pediatric nurse practitioner designed to allow the

- child and parents to have a better understanding of the negative impact of overall disease burden;
2. Nutritional education by professional diabetes educators including cooking instruction of healthier living snacks;
 3. Behavioral health education by certified psychologists to improve attitude and self image; and
 4. Structured exercise classes and at home customized exercise programs.

Outcomes to date include significant reductions in clinical markers such as 25% reduction in serum insulin levels, 13% reduction in VLDL cholesterol and 23% reduction in triglyceride levels with a positive improvement in HDL levels of 3%. BMI reductions ranged from 5-10%. Additional improvements in self image and attitude, increased flexibility and strength and nutritional awareness were demonstrated. Parental interaction was positive and testimonials verified an improved ability of self and family to manage the disease impact.

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CHT Testifies before State Senate Study Committee

CHT Project Director Wayne Oliver and Senior Fellow Ron Bachman both recently testified before the Georgia State Senate's Health Transformation Study Committee.

Report of Wayne Oliver's Testimony

Wayne, who leads the Center's Right to Know Project, provided insight into what other states are doing to provide quality and price healthcare information to their citizens. He provided a comprehensive list of public sector Web sites which focus on making quality and price information available. Some of those sites included:

- **Hospitalcompare.hhs.gov** which was created through the efforts of CMS and organizations representing various health stakeholders Hospital Compare is a tool which provides free information on how well hospitals care for adult patients with certain medical conditions.
- **[Maryland Drug Prices](#)**- This site allows Marylanders to compare prices of prescription drugs across the state.
- **[North Carolina Hospital Quality](#)** - This site helps patients, family, and friends compare the quality and safety of care in North Carolina hospitals.
- **[Tennessee Hospital Inform](#)** - This site lists the average prices for most common procedures using hospitals' annual reports to the state from October 2003 through September 2004.
- **[Texas Health Care Information Collection Center for Health Statistics](#)** – Sponsored by the Texas Health Care Information Council, this DHS resource provides free data on hospitals and HMOs.

Commenting on the leadership of the Georgia Department of Community Health (DCH) regarding the move toward health transparency, Wayne said: "The department has set into motion an ambitious plan to provide Georgians with health information which will make them better health consumers which will result in better outcomes. The department's leadership

will also pay dividends down the road by advancing the movement of health consumerism and thereby lowering healthcare costs for all Georgians.”

Also discussed was CHT’s view on the importance of health information technology (HIT) as a key element for health transformation. On a consumer level, HIT will result in having access to quality and price healthcare information which will help consumers make better choices in healthcare. Having educated consumers who are armed with quality and price information will result in decreased costs. On the provider level, HIT systems allow physicians and other healthcare professionals to have access to more patient information and thereby make more informed decisions regarding treatment options. HIT also results in fewer opportunities for health misadventures which results in decreased costs and increased quality of care. From the payer (employer) perspective, HIT increases competition among healthcare providers in terms of quality and price which results in lower costs which allows for lower premiums and expanded coverage opportunities.

Report of Ron Bachman’s Testimony

Ron Bachman shared with the committee that nationally 16% or over 46 million Americans have no health insurance coverage. In Georgia, over 1.6 million individuals are without health coverage. Georgia is tied for the 5th highest percentage with only Oklahoma, Florida, New Mexico, and Texas having a higher percentage of uninsured.

Ron focused his testimony on providing solutions. He indicated that “systems begin with laws and regulations. Markets can only serve clients, and products can only be developed, within the laws and regulations set by governments. Today, we seem to have the worst of all worlds. We have a costly government healthcare that locks citizens into restrictive limited choices, and a private market that is overburdened with state and federal laws and regulations. We need an aggressive outreach to the many low income families who qualify for government subsidized programs who have not enrolled. We need a robust competitive private market that offers better products, with more choices, lower costs, and improved access to quality care. State and federal laws and regulations need an overhaul to release the power of the free-market to improve both government and private market insurance.”

Ron indicated that there are two “camps of thought” for our future. He suggested that we will either move to a government-managed, bureaucratic-dominated health system or we will develop expanded private-sector, market-based insurance solutions. Ron warned that unless the market is given more freedom to meet this problem, citizens will undoubtedly turn to the federal government to “solve the crisis.”

He suggested the establishment of a “Healthcare Compact” with each of the stakeholders. All of the stakeholders have different goals. For example, hospitals want to eliminate uncompensated care; physicians want to strengthen tort reform; insurers desire to stabilize insurance markets; employers want to support affordable health insurance; consumers want to increase choice, improve quality, and lower costs; and the uninsured need health insurance coverage.

“Georgia is a conservative state,” said Ron. “I believe the majority of Georgians would prefer market-based solutions to an expanded government role in healthcare. The House, Senate, and governor’s office are of the same party. If State elected officials can not agree on market-based solutions and set an example for the country of how conservative principles can work, then surely we will head in the opposite direction.”

Ron indicated that the uninsured do not have a single profile. “One can slice and dice the

uninsured in many ways," he said. "I suggest legislative action by considering four major categories:

	<u>% in Ga</u>	<u># in Ga</u>
1. Uninsureds Eligible for Government Programs	20%	320,000
2. Uninsureds Not Needing Financial Assistance	35%	560,000
3. Uninsureds Needing Some Financial Assistance	40%	640,000
4. The Uninsurables	<u>5%</u>	<u>80,000</u>
	100%	1,600,000

Ron also addressed solutions for each segment: For the uninsured who are eligible for government assistance programs, suggested an aggressive outreach and education campaign is needed to assure that these 320,000 Georgians who qualify for Medicaid and SCHIP are signed up. For those who are uninsured who do not need financial assistance, he believes that the Georgia legislature can make insurance a better buy. "For example, in Florida there are insurance products that have an individual HSA policy that provides reward points for healthy behavior. These points can be exchanged, like frequent flyer points, into premium reductions."

For those uninsureds who need some financial assistance, Ron said that efforts to stimulate private-sector, market driven new products could result in lower prices. "Today's products in Georgia are too expensive. You can lower the number of uninsured who would need financial assistance if a robust competitive market was established with new products offered at lower prices." And finally, he discussed those who are referred to as the uninsurables which are typically the most expensive category of uninsureds. "Georgia has argued for years on how to fund a high risk pool," said Ron. He is currently working with U.S. Congressman Paul Ryan (R-Wisconsin) on a proposal to establish state high risk pools. The concept involves direct federal subsidies with current DSH payments in a structure that encourages personal responsibility and compliance with evidence based medicine. He concluded that Georgia can not afford to lag or be timid. Delay is costing time, money, health and lives.

CHT will continue to work with Georgia leaders to transform health and healthcare.

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"Real Change Requires Real Change"

- New results require new ideas, new actions, and sometimes new structures and new cultures.

If transformation is the goal, we have to be committed to adopting new ideas and new actions. Much of the time, transformation also involves changing both structures and cultures.

When W. Edwards Deming was brought in to help transform corporations, he refused to work with them unless the CEO was directly involved. He knew that without a real commitment from the highest level, transformation was impossible. The fact is real change can happen only if the person at the top is invested and leading the charge.

To order *The Art of Transformation*, visit our website at www.healthtransformation.net.

