

Georgia's Gubernatorial Candidates Address Our State's Most Critical Health Challenges



Election Guide 2010

Updated September 2010

Healthcare Georgia Foundation
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About Election Guide 2010

Healthcare Georgia Foundation is pleased to present the updated version of *Election Guide 2010: Georgia's Gubernatorial Candidates Address Our State's Most Critical Health Challenges*, featuring the final two candidates: Roy Barnes and Nathan Deal.

The Guide was conceived as a truly nonpartisan public education effort designed to inform Georgia voters as they decide which road to follow towards better health and healthcare for our citizens. Election Guide 2010 seeks to promote the examination and discussion of the critical health issues facing our state today, and hopefully, open the door to new and innovative solutions. Between November 2009 and January 2010, each known candidate responded to nine questions pertaining to their vision of health and healthcare in Georgia should they become governor. As a primer for Georgia's upcoming gubernatorial election, we have reprinted the original responses of Roy Barnes and Nathan Deal.

To view the Guide in its entirety, including all of the candidates' survey submissions, visit www.healthcaregeorgia.org or contact the Foundation at 404-653-0990.

Healthcare Georgia Foundation

Healthcare Georgia Foundation is a statewide, private independent foundation. The Foundation's mission is to advance the health of all Georgians and to expand access to affordable, quality healthcare for underserved individuals and communities. Through its strategic grantmaking, Healthcare Georgia Foundation supports organizations that drive positive change, promotes programs that improve health and healthcare among underserved individuals and communities, and connects people, partners and resources across Georgia.

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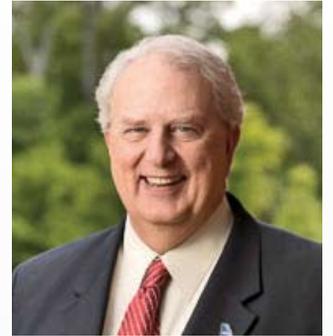


Roy Barnes - Democrat

Bio

Recent Experience: Former Governor, former State Senator, former State Representative and Attorney with The Barnes Law Group

Roy Barnes served as Georgia's governor from 1999–2003. Prior to taking office as governor, he served eight terms in the State Senate and six years in the State House of Representatives. Since his tenure as governor, Barnes devoted six months of his time to Atlanta Legal Aid before returning to law practice through the establishment of The Barnes Law Group. Barnes was born and raised in Mableton, Georgia. After earning an undergraduate degree and a law degree from the University of Georgia, he served as a prosecutor in the Cobb County District Attorney's office. Roy and his wife, Marie, live close to their three children and six grandchildren.



1 What do you see as the state's most pressing health or healthcare problem, and how do you intend to address it? And pay for it?

Eighteen percent of Georgians are uninsured, and even more are underinsured. Those individuals that are inadequately insured are less likely to receive preventive and primary care services and ultimately face worse health outcomes; further, they are forced to rely on emergency health care services, driving up health costs for taxpayers and putting undue strain on hospitals and health care providers. A majority of Georgians receive health care benefits through their employer; however, as unemployment has risen in Georgia, so has the number of uninsured individuals. We can start reducing the number of uninsured Georgians by creating more jobs in the state.

2 *National health status surveys consistently rank Georgia poorly in various health measures.*

Under your leadership, what is the single most important initiative you will undertake to move Georgia out of the bottom 10 unhealthiest states (United Health Foundation rankings, 2007 and 2008)?

Moving Georgia out of the bottom ten unhealthiest states starts with the next generation. Studies have consistently shown that providing comprehensive preventative care for children drastically reduces their chances to develop health problems later in life, so we must take steps to ensure that every Georgia child has access to quality preventative and primary health care services. Our public schools must also play a role in ensuring that Georgia children get a healthy start

in life. We need to think more critically about the habits we teach our children in school, from menu options at lunchtime, to health and nutrition education, to the importance of physical education and exercise. There is a significant connection between a healthy childhood and adulthood free of medical problems.

3 *Georgia has the tenth highest percentage of residents without health insurance in the nation according to the U.S. Census Bureau (three year average, 2006-2008), and the number of uninsured has been growing.*

What policies would you put in place to ensure more Georgians (including the uninsurable) have access to affordable health insurance?

We know that a majority of Georgians receive health care benefits through their employers, so therefore it would follow that we must ensure that Georgians have access to jobs that provide employer-based coverage. For those Georgians who are employed but still do not have access to employer-based insurance, we can work to provide incentives for small businesses to participate in health insurance pools, thereby lowering the overall cost of providing insurance for Georgia workers. In terms of affordability, we can also work to improve provider choice, increase transparency of services and fees, and eliminate the barriers imposed by insurance agencies that unnecessarily inflate the healthcare costs. By returning healthcare to a focus on the relationship between doctor and patient, we will be able to eliminate the fees that inflate healthcare beyond an affordable range.

4 *Traditionally, Georgia has recognized that those who receive adequate healthcare as children are healthier and more productive as adults.*

Recognizing we are in the midst of healthcare reform and declining revenues, what is the appropriate role of the state in promoting health and preventing disease among Georgia's children?

Regardless of what happens with health care reform at the federal level, the state can play an important role in ensuring that Georgia's children receive the health care services that they need to grow and thrive. Children have broad health needs that must be addressed to make certain that they develop into healthy adults, regardless of whether or not revenues are declining. In the face of increasing unemployment, and therefore increasing numbers of children losing access to their parents' employer-sponsored health coverage, the state can ensure that Medicaid and PeachCare continue to serve as effective insurance safety nets for lower income children. We can streamline enrollment procedures for our public health insurance programs, as reducing administrative burdens for enrollment and renewal of coverage increases the likelihood that eligible children will enroll and remain covered—during a recession, this is crucial, as parents who are accustomed to private insurance plans must apply for public health care assistance.

5 *Georgia's trauma death rate is above the national average and approximately one million Georgians live more than an hour away from any trauma facility. The 2010 state budget funds the ramp-up of a trauma network with \$23 million, but trauma advocates say that closer to \$80 million annually will be required for a top notch system.*

Do you support the aims of the Georgia Trauma Care Network Commission as laid out in SB 60 and subsequent legislation? If so, at what annual level would you fund the Trauma Network, and what method(s) do you propose to perpetuate its funding?

The Georgia Trauma Care Network Commission plays an important role in coordinating and overseeing Georgia's trauma facilities and ensuring that Georgians have adequate access to trauma care. Our state's trauma death rate is considerably higher than the national average, so it is crucial that we bolster our existing trauma care infrastructure while continuing to build a comprehensive state trauma care system that is funded in a common-sense, sustainable manner.

6 *Most would agree that Georgia has not done an adequate job of treating and protecting its citizens with mental illness. Recently, a federal judge ruled that Georgia has failed to comply with a Department of Justice settlement regarding patient care and protection in state institutions.*

What actions would you propose to remedy this situation?

Mental health patients in state institutions deserve the best care that Georgia can provide, but unfortunately our mental health system has been pushed beyond its limits in recent years. We must work to fulfill the provisions of the Department of Justice's settlement by improving incident reviews and investigations, reviewing administrative protocols, and identifying other possible improvements in patient mental health care.

Have we also failed in the provision of community mental health services, and if so, what actions would you propose to remedy this situation?

Community mental health services are a crucial component in our state's health

care delivery system, and we should never stop seeking new ways to improve patient care.

7 *Despite Georgia's ever increasing population, growing numbers of uninsured and more demand on local public health departments, grant-in-aid programs for public health have been cut, public health programs and resources have been eliminated, and critical infrastructure (such as data and billing systems) has not been updated. Statewide, there are more than 600 vacant public health positions.*

What is your vision for the role of public health in Georgia?

My vision for public health in Georgia is simple—we need to have a public health system that addresses the needs of the diverse communities across our state. Prevention—not just treatment and preparedness—is vital, which means that we must be willing to support the vehicles that provide valuable public health services for Georgia families. Therefore, we must protect funding for grant-in-aid to the counties that need it most, while also providing county health departments with the resources they need to serve their unique populations.

What, if anything, should the state do to build public health capacity and infrastructure?

For public health agencies and workers to prevent and protect against the spread of disease, injuries, and disaster, a strong, cohesive public health infrastructure must be present in our state. In order to accomplish this, we must do several things. First, we need to make an honest assessment of our public health workforce needs, and then provide opportunities for education and training to the public health workers of tomorrow. Second, we must bolster our state's public health capacity by joining forces with organizations from the private health sector as well as building strong public health organizations and leaders. Lastly, we must strengthen our public health information systems, which will allow public health officials to communicate with the public, gather and utilize data, and share crucial information with state agencies and officials, all in a more effective and efficient manner.

8 *Congressional Quarterly reports that Georgia ranks 50th among states in revenues collected per capita (includes state taxes, fees, and federal funds).*

Is this a distinction you think is important to maintain? If not, would you be willing to increase revenues in order to invest more in health services for Georgians? If so, specifically how? (New fees, higher tobacco taxes, etc.)

I never voted for a tax increase in the legislature, nor did I ever ratify a tax increase as Governor, and yet I was able to fund countless initiatives and programs during my tenure in government. We can achieve advances in health care funding if we focus on reducing waste, clarifying spending priorities, and eliminating unnecessary revenue losses through special interest tax exemptions. Instead of looking to our citizens' pockets for funding, we must look at where money coming into the capitol is leaking back out. In 1975, there were just a handful of exemptions to the sales tax. Currently, there are over 200 exemptions on the books. We cannot allow our growth revenue to be continually eroded, as has happened over the past several years.

9 *In a short paragraph, can you articulate the rest of your health agenda if elected?*

First and foremost, we need to make it as easy as possible for every Georgian, regardless of age, race, or socioeconomic status, to receive health insurance. Second, we need to improve access to health care services—no matter where you live in Georgia, every individual in this state should be able to find affordable, quality health care services in their community. Additionally, we need to make sure that, regardless of the federal health care reform outcomes, Georgians are able to make their own choices when it comes to health care—we should all be able to choose our own physicians and hospitals. Lastly, in order to serve Georgia's ever-growing population, we must ensure that we have a highly skilled health care workforce and a finely tuned health care infrastructure in place in all corners of our state.



Nathan Deal - Republican

Bio

Recent Experience: Congressman, former State Senator, former Juvenile Court Judge, Attorney and Army Veteran

Nathan Deal is the U.S. Representative to Congress serving the people of Georgia's Ninth District. He was first elected to Congress in 1992 and today serves the citizens of 15 North Georgia counties. Representative Deal is a member of the Committee on Energy and Commerce. He was raised in Sandersville, Georgia and graduated from Mercer University in 1964 and Mercer Law School in 1966. He lives in Gainesville, Georgia with his wife Sandra and has four children and six grandchildren.

1 What do you see as the state's most pressing health or healthcare problem, and how do you intend to address it? And pay for it?

Given the breadth of issues encompassed within healthcare delivery in our state, it is difficult to enumerate one priority over another. However, ensuring availability of care and access to healthcare services are challenges which are consistent across all fields of healthcare (See question #3). Being able to improve the public health in our state depends upon securing a highly-trained and effective healthcare workforce and to provide support to build needed healthcare jobs throughout every corner of the state. I support efforts to provide healthcare to Georgia's children who are in need and support school-based nursing clinics. These facilities often serve as a child's only access point to primary care and provide critical healthcare support to Georgia's children who would otherwise not be treated today.

2 *National health status surveys consistently rank Georgia poorly in various health measures.*

Under your leadership, what is the single most important initiative you will undertake to move Georgia out of the bottom 10 unhealthiest states (United Health Foundation rankings, 2007 and 2008)?

Unfortunately, far too many Georgians are suffering from illnesses as a result of lifestyle choices. Healthy eating, physical wellness and disease prevention have real and lasting impacts not only on the lives of Georgians, but on state health programs as costs from avoidable illnesses are reduced. As Governor, I will work with the appropriate Departments, healthcare

providers and patients across the state to advocate for policies which promote healthy living and disease prevention.

3 *Georgia has the tenth highest percentage of residents without health insurance in the nation according to the U.S. Census Bureau (three year average, 2006-2008), and the number of uninsured has been growing.*

What policies would you put in place to ensure more Georgians (including the uninsured) have access to affordable health insurance?

Access to affordable health insurance is dependent upon a number of laws and regulations—some state and some federal—which govern the purchase and sale of health insurance policies as well as the provisional structure of the policy and its benefits. Under today's health insurance system, a large majority of health insurance regulation remains vested with the individual states, giving Georgia's legislature, Insurance Commissioner, and Governor the flexibility which is needed to create a regulatory and economic environment which will drive down premiums, improve coverage, and ensure more Georgians have access to the care which they need.

As a member of the United States Congress, I have had the privilege to serve as Chairman and now Ranking Member of the House Committee on Energy and Commerce's Subcommittee on Health and have devoted considerable effort in Washington to improve federal policy affecting healthcare. Currently in the 111th Congress, I have introduced several bills which would improve access to affordable health insurance. I support fully-funding high-risk pools and reinsurance programs

for individuals with 'pre-existing' conditions and tightening consumer protections to prevent unwarranted exclusions of coverage. Further, I have legislation which would put federal consumer protections provided within the individual market 'on par' with those within the group market which are considerably more robust. I support allowing states to enter into regional compact agreements to increase economies of scale, thus reducing per capita premium costs. Additionally, the current economic situation underscores regulatory barriers which result in millions of people who have lost their job from maintaining coverage. Federal health insurance continuation law prescribed by the Consolidated Omnibus Reconciliation Act (COBRA) often results in policies which many families in Georgia cannot afford and results in loss of certain consumer protections when coverage has to be dropped. I have offered legislation in the House which would ensure these consumer protections remain available for families and would provide the regulatory flexibility needed for families to change their health insurance plan to something which they can afford. I also have offered legislation which would provide Georgia's Medicaid and the State Children's Health Insurance Program (SCHIP) additional options not available in today's one-size-fits-all approach. My legislation would provide these individuals with the ability to use this assistance to participate in an employer-sponsored plan which best fits their individual coverage needs. Encouraging enrollment in options already available to thousands of Georgians must be a priority, as well. Studies indicate that a significant proportion of those who make up our states 'uninsured' population have options made

available to them through their employer or other programs, but simply do not enroll. I have offered legislation which would overcome the inertia which results in thousands of individuals being uninsured by providing the ability for employers to enroll new employees in a health insurance plan offered to their employees by default, so long as the opportunity to elect out of such coverage exists without any penalty.

4 *Traditionally, Georgia has recognized that those who receive adequate healthcare as children are healthier and more productive as adults.*

Recognizing we are in the midst of healthcare reform and declining revenues, what is the appropriate role of the state in promoting health and preventing disease among Georgia's children?

Given our current economic environment both at the state and federal level, I believe it is important that elected leadership focus on providing the most critical services while working to reduce duplication and ineffective utilization of limited dollars. Preventing disease and promoting the welfare of Georgia's children is one such priority. The State Children's Health Insurance Program (SCHIP), known as PeachCare in Georgia, has served a critical role in bridging the gap of care for countless children across our state since the program was established in 1997.

Earlier this year, Congress reauthorized the State Children's Health Insurance Program and changed a number of policies within the law designed to ensure the program focuses on providing care for children as it was originally intended. In addition to relaxing standards to ensure only eligible individuals gain access to SCHIP program resources, millions of adults and higher-income families in other parts of the country are able to enroll in coverage designed to protect our nation's most vulnerable children. I offered an amendment which would have prohibited states from enrolling these individuals before ensuring that at least 90% of children who are below 200% of poverty which are eligible for SCHIP benefits are enrolled. The amendment was unfortunately rejected.

5 *Georgia's trauma death rate is above the national average and approximately one million Georgians live more than an hour away from any trauma facility. The 2010 state budget funds the ramp-up of a trauma network with \$23 million, but trauma advocates say that closer to \$80 million annually will be required for a top notch system.*

Do you support the aims of the Georgia Trauma Care Network Commission as laid out in SB 60 and subsequent legislation? If so, at what annual level would you fund the Trauma Network, and what method(s) do you propose to perpetuate its funding?

Determining the appropriate level of funding for critical programs such as the Georgia Trauma Care Network Commission depends upon a host of variables which are often difficult to predict, particularly as our state continues to feel the true weight of our nation's economic downturn and is forced to make difficult choices. As Governor, I will work with the Georgia General Assembly to ensure all critical healthcare programs are funded as fully as possible given the state's limited resources, and without adding to the tax burden of hardworking families across the state who are likewise challenged to balance their budgets.

6 *Most would agree that Georgia has not done an adequate job of treating and protecting its citizens with mental illness. Recently, a federal judge ruled that Georgia has failed to comply with a Department of Justice settlement regarding patient care and protection in state institutions.*

What actions would you propose to remedy this situation? Have we also failed in the provision of community mental health services, and if so, what actions would you propose to remedy this situation?

At the federal level, I supported reauthorization of federal mental health parity law during the 110th Congress. This critical law ensures patients in need of mental health services maintain access to needed care, and as Governor, I will continue my efforts to ensure Georgians maintain needed access to critical mental health services.

7 *Despite Georgia's ever increasing population, growing numbers of uninsured and more demand on local public health departments, grant-in-aid programs for public health have been cut, public health programs and resources have been eliminated, and critical infrastructure (such as data and billing systems) has not been updated. Statewide, there are more than 600 vacant public health positions.*

What is your vision for the role of public health in Georgia? What, if anything, should the state do to build public health capacity and infrastructure?

Public health is critical to our state in protecting our population against disease and ensuring Georgia remains home to a strong and effective student body and workforce ready to perform. We are blessed as residents of our great state to serve as a home to the Centers for Disease Control and Prevention (CDC) and numerous world-class health research and education institutions, and as Governor, I would advocate policies which harness the power of these institutions' public outreach efforts for the betterment of the people of our state.

I also support the mission of our state's Community Health Centers and will work to continue to support their efforts to provide care to the citizens of Georgia. During consideration of the "Community Health Center Reauthorization Act" last year, I was actively engaged in bipartisan-bicameral negotiations which led to its successful passage and signing into law and worked to ensure Georgia's Health Centers benefit fully from the law. Community Health Centers fill a critical gap in the continuum of care in our state and as Governor, I will work to advance policies which encourage more health-care providers to volunteer their skills to enhance access for patients. I have advocated for federal liability protection for such volunteers for many Congresses and will continue to encourage similar approaches be made both at the state and federal level.

Nathan Deal, Republican - *continued*

8 Congressional Quarterly reports that Georgia ranks 50th among states in revenues collected per capita (includes state taxes, fees, and federal funds).

Is this a distinction you think is important to maintain? If not, would you be willing to increase revenues in order to invest more in health services for Georgians? If so, specifically how? (New fees, higher tobacco taxes, etc.)

At a time of economic downturn, in particular, I believe the state government first has an obligation to the taxpayers of Georgia to look internally for resources. Financing public health activities involve a complex set of benefits and consequences which must be evaluated in the light of changing circumstances. As Governor, I will work with the General Assembly to address the fiscal needs of our state, keeping the potential benefits and consequences consistently at the forefront of my decision-making.

During consideration of the “Children’s Health Insurance Reauthorization Act (CHIPRA)” in both the 110th and 111th sessions of Congress, additional excise tax revenues were included to finance expansions of the SCHIP program. Through a lengthy and somewhat repetitive legislative process, I was presented with a vote eight different times which, among other provisions, would approve additional federal taxes on tobacco products if passed. I consistently voted against the measure each time it was brought to the floor for a vote and will consistently oppose regressive taxes such as this.

9 In a short paragraph, can you articulate the rest of your health agenda if elected?

Given the substantial role of state governments in the regulation of healthcare and health insurance, many opportunities exist to improve upon Georgia’s healthcare delivery system. As Governor, I will utilize continued experience working in Congress on healthcare issues for the state and will work with the Georgia General Assembly, the state Insurance Commissioner, the Congress, healthcare providers and their patients to enact proven reforms to our healthcare delivery system which reduce cost, improve quality, and ensure all Georgians maintain the freedom over their healthcare decision-making.

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