

Healthcare Georgia Foundation
grantmaking for health

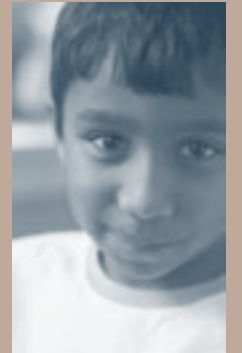


Informed Grantmaking

Annual Report 2003



better health



Our mission is to advance the health of all Georgians and to expand access to affordable, quality healthcare for underserved individuals and communities.

Our Mission

A Message From the Chairman & President	2-3
Year in Review	4-8
Our Grantmaking Priority Areas & Grantees	9-15
Grantmaking by the Numbers: Grants Summary	16
Grant Application Guidelines	17
Foundation Board and Staff	18
Financials	19-23

As we reflect upon our second year of grantmaking, Healthcare Georgia Foundation acknowledges the significant responsibility that comes with our role as a **catalyst** for better health and health care in Georgia.

In 2003, the Foundation awarded more than \$4.2 million in grants to fifty-four nonprofit health organizations benefiting Georgians. The Foundation also strengthened its grantmaking program in 2003 through the production, utilization and dissemination of health-related data and information. Recognizing that data is the currency for informed decision making, we are confident that building a more comprehensive base of information for the Foundation and the nonprofit health organizations it serves will benefit the health of all Georgians.

How did we do it? With an informed approach to grantmaking in place, the Foundation used its resources to support organizations that drive positive change, promoting programs that improve health and health care among underserved individuals and communities. The Foundation supported organizations engaged in building information systems, disseminated applied research results, conducted focused program evaluations and carried out in-depth listening tours with consumers.

Our focus on identifying emerging trends and unmet needs, supporting effective programs and advancing innovative approaches enables the Foundation and its grantees to make the greatest collective impact where it is most needed. By connecting people, organizational partners and resources throughout Georgia, we endeavored to accomplish more with less; building sustainable solutions to preventable health problems.

Informed Grantmaking: Acting On The Evidence

In the summer of 2003, The Rollins School of Public Health at Emory University was awarded a grant to produce *"The Facts About Georgians: Our Health Depends On It."* The report, a revealing documentation of more than fifty critical health indicators, provides a snapshot of the health status of Georgians; including the burden of poor health and its underlying causes. This population health report will enable organizations to make more informed decisions, shift investments where advisable and hold the systems of health services and supports accountable.

Through a grant, The Survey Research Center at the University of Georgia conducted the "2003 Access to Coverage and Prevention Survey," a statewide public opinion poll aimed at gauging the perceptions of Georgia residents about selected issues related to health care and prevention. The results of the poll have uncovered the harsh realities many Georgians without access to health care face on a regular basis. The Foundation published the results of the poll in its inaugural issue of *HealthVoices* - a publication intended to be an educational service to Georgians interested in health policy.

The year also featured the launch of our second statewide Listening Tour; a community-level inquiry specifically focused on giving voice to the health care experience of patients, clients and consumers living in Georgia. The Listening Tour will continue into 2004, resulting in a

published account of how Georgians experience health care and what we can do to make their voices heard in ways that improve the prospects for better health.

As a result of a grant award to the Women's Policy Education Fund, HealthTRAK Georgia, the State's first centralized source of web-based and printed materials analyzing health policy in Georgia was launched. HealthTRAK Georgia will be an effective tool for legislators, advocates, the nonprofit community and health care consumers, enabling them to gain access to, and act on, current information on legislation, regulation and policy options.

Building Real Momentum Towards Change

This year, we were challenged by what we learned about the health issues facing Georgians: poverty, literacy, population diversity, shortages of health care providers, the uninsured, homelessness, broad disparities in health and a fragile system of health services and supports. While these issues are indeed daunting, we see them as opportunities to open a new dialog for meaningful change.

Through informed grantmaking, we can build real momentum towards solutions to our state's most pressing health challenges. We hope these efforts will shed light on new health issues; providing communities, nonprofit organizations and decision makers with a comprehensive and compelling look at emerging opportunities in Georgia.

The data and information uncovered by public opinion polls and the work of those we serve will enable us to continue to move forward with our commitment to achieving the highest levels of public accountability and grantmaking excellence in health. We will also use these findings to assess our progress with respect to our grantmaking priority areas.

The 2003 Annual Report provides more detail about the important work carried out by Georgia's nonprofit health organizations during the year. Indeed, when we consider their achievements, we are confident that building a better base of information is a prerequisite for better health and health care for all Georgians.

Warm regards,



Enoch J. Prow, Chairman



Gary D. Nelson, President

By supporting and connecting others, we aim to provide nonprofit organizations and the public with informed opportunities to advance the health of all Georgians.

2003

Year in Review

In 2003, we made great strides towards improving our understanding of the health needs of Georgians from the ground level through several data-driven grants.



Amplifying Voices

This summer, Global Evaluation & Applied Research Solutions (GEARS) launched our second Listening Tour; a statewide outreach effort focused on giving voice to the health care experience of consumers living in Georgia.

The Tour included thirteen 90-minute "listening" sessions among 12 categories of health care consumers. These consumer categories ranged from the elderly to teens and included persons living with disabilities and recovering substance abusers.

Over one hundred Georgians shared very personal, revealing health care experiences during the Tour. The Foundation and its grantees will gain valuable insight and first-hand recommendations on how Georgia's system of health services and supports could be improved.

Of the participants, three individual experiences stood out, and we thank them for their courage in sharing them:

Kate Gainer is a fifty-four-year-old woman living with Cerebral Palsy (CP). Kate's brain damage occurred during birth when her doctor decided to, "pull her out rather than do a C-section." Although Kate's CP could have been avoided, she doesn't see herself as a victim. The advocate she's become for herself and others is inspirational.

As a child, Kate received good medical care. Once she turned eighteen, she became responsible for her own health, and dealing with doctors was a whole new endeavor. According to Kate, every doctor she encountered was an adventure. She quickly learned that in order to get proper care, she had to first "teach them" about her disability.

One particular incident Kate shared with us spoke volumes about how the health care system focuses all too often on the disability rather than treating the pain. Experiencing a sudden, sharp pain in her neck at work, Kate went to her physician. Her doctor assumed the pain was related to her CP, and prescribed a muscle relaxer - a combination that produced disastrous results.

Four subsequent physicians proceeded to misdiagnose Kate. Five years (and much pain) later, a pain clinic correctly diagnosed Kate with a broken neck. She was, in fact, just a hair away from paralysis. The ensuing surgery quickly relieved Kate's pain, but not her lack of confidence in the system.

Kate's experience and determination have caused her to take control of her own health. She does most of her research online, often self-diagnosing her symptoms. According to Kate, improving health care for people with disabilities includes more education and training for doctors, nurses, and medical professionals, an improved payment system and a central resource for locating physicians and specialists. Her advice to the medical community is "learn how to work with patients and trust their instincts."

Dustin Hall is a sixteen-year-old high school student-athlete in Dalton, Georgia. His motivation for paying attention to health-related issues goes far beyond wanting to perform well on the field and secure an athletic scholarship. Dustin sees health as an essential part of his formula for success in life.

One of the most striking things we noticed about Dustin is his remarkable maturity and poise for a young man his age. Dustin spoke to us about the challenges of being a teenager today and why he makes the choices he does. According to Dustin, much of his positive attitude and proactive approach to his own health can be tied to his environment and surroundings. His large family plays a leading role in taking care of each other. Dustin feels his family's strong spiritual commitment provides a holistic underpinning for his family's overall health.

A large part of Dustin's success can be attributed to his taking responsibility for his health by making good choices. Although he recognizes that improvements in the health care system are sorely needed, he feels strongly that they will never succeed without that all-important element of personal responsibility.

Vanessa Sawyer is an advocate for the mentally ill who can speak from her own personal experience. When she was in her mid-twenties, with almost no warning, she found herself struggling with Bipolar Affective Disorder. Fortunately for Vanessa, she had excellent benefits provided by her employer, and she quickly received an accurate diagnosis and treatment. Her doctor managed her medication and did therapy, a rarity.

Her employer allowed her time to recover, and when her doctor said she was ready, she went back to work. Once her problems returned, she asked to be released from her job. After recovering from another manic episode, she found a new job in Atlanta. Dealing with mental illness in Atlanta was a very different experience for Vanessa because her employer didn't provide health insurance.

Vanessa knows all too well the differences in treatment between having good health

insurance and having none. According to Vanessa, having health insurance makes "all the difference in the world."

Her treatment at the state mental health facility was "the worst treatment of her life" and left her feeling more like a criminal than someone who was mentally ill.

Now forty-one, Vanessa has come a long way from her days in the state facility. She advocates for herself and others, encouraging others to know their rights and become active in their own treatment. Her primary recommendation for improving the care offered for mental illness hinges on awareness and understanding. According to Vanessa, it's important to remember there is a difference between the mental illness and the person living with it.

The most striking message the Foundation heard from this Tour was that these groups felt that the health care system has somehow lost the "caring and personal relationship" expected from providers and insurers.

The Listening Tour will continue in 2004, when 20 sessions among 13 health care consumer groups will be conducted in communities located in West Georgia, South Georgia, Coastal Georgia and East Central Georgia.

Public Opinion Counts

As a result of a grant award from the Foundation, the University of Georgia Research Foundation conducted a statewide public opinion poll to assess health care access by residents of Georgia and determine the attitudes and opinions of Georgians toward their own health care coverage and coverage for the poor in the state. The full report, the "2003 Access to Coverage and Prevention Survey," can be viewed at <http://src.ibr.uga.edu/healthcare.htm>.



Kate Gainer



Dustin Hall



Vanessa Sawyer

analyze



The Facts about Georgians: Our Health Depends On It

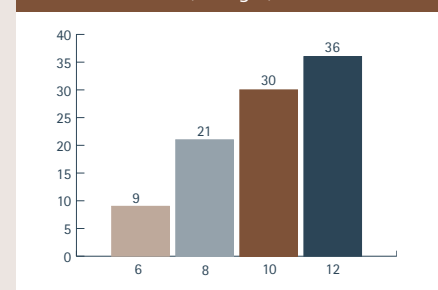
In the summer of 2003, The Rollins School of Public Health at Emory University compiled *"The Facts About Georgians: Our Health Depends On It,"* a comprehensive look at the health status of Georgians, specifically focused on demographic and social factors, health status, access to care, preventive services, health behaviors and environmental factors.

The data in this report provided a snapshot of the critical health issues facing Georgians. The Foundation will use this report to continuously inform the most effective allocation of our resources, guiding others to best affect our system of services and support.

"Tobacco use remains the leading preventable cause of death in the United States."

"In Georgia, tobacco kills more than 10,000 people each year and drains \$1.2 billion from our economy in health care expenditures."

Percent of Students Who Currently Use Some Form of Tobacco, by Grade, 2001 (Georgia)



To view *"The Facts About Georgians: Our Health Depends On It,"* please visit www.healthcaregeorgia.org.



HealthVoices: Georgians Speak Out

In October 2003, the results of the *"2003 Access to Coverage and Prevention Survey"* conducted by the University of Georgia were published and distributed through *HealthVoices* - a new policy publication produced by the Foundation focused on increasing awareness about important health policy issues in Georgia.

In its inaugural issue, *HealthVoices* tackled an issue on the minds of all Georgians: health care coverage and prevention. With over one million Georgians uninsured, access to health coverage and prevention is clearly on the forefront of everyone's minds.

Here are some highlights of what Georgians had to say:

- **Protect now or pay later** – more than 1/2 of Georgians agree that we should spend more community health resources preventing illness and supporting good health.
- **Everyone deserves quality health care** – more than four out of five Georgians believe everyone should have the same amount and same quality of health care.

HealthVoices is published periodically by Healthcare Georgia Foundation as an educational service to Georgians interested in health policy.

To read or download *HealthVoices*, please visit www.healthcaregeorgia.org.

"Over half of Georgians said that a greater share of community health resources should be spent preventing illness and promoting health."

Looking Inward: Grantmaking Accountability

As a grantmaker, we feel a strong sense of accountability to those we serve. This summer, after having just completed our first full year of grantmaking, the Foundation conducted an assessment of our Grantmaking Program. In an effort to understand perceptions of the Foundation's mission and role, communications, funding process and relationships with grantees, we commissioned Common Focus to survey more than 150 organizations and institutions that had applied for support.

The results of the assessment have been invaluable, and we are using them to inform and improve our grantmaking process. While the feedback we received was overwhelmingly positive, we uncovered several opportunities to make our processes more effective and efficient. In the near future, we will publish excerpts from the survey and its results at www.healthcaregeorgia.org.

2003



Building a Learning Community

In November, the Foundation held its inaugural grantee conference, **Connections 2003: Advancing the Health of All Georgians**. Connections 2003 created a "learning community" where grantees committed to promoting the health and well being of underserved individuals and communities could meet and learn more from each other.

The grantee-led conference was attended by over 100 representatives of the Foundation's grantee organizations, addressing several key issues critical to the health of all Georgians.

Highlights included: dynamic roundtable discussions around topics such as program evaluation, successful grant applications, effective board development, health policy and communications. An inspirational plenary session featuring participants from our second Listening Tour was soon followed by breakout sessions featuring active discussions on addressing health disparities, access to primary health care and a healthy nonprofit sector. Afternoon skills workshops designed to improve organizational and program sustainability, communications and access to current legislation, regulation and policy options for Georgia provided those in attendance with powerful tools to improve their overall effectiveness.

The Foundation presented six community heroes with its *Community Service Award*, honoring them for their leadership, passion and unselfish service.

Here are the 2003 Community Service Award Winners:

Ginger Ackerman Smith
Georgia Ovarian Cancer Alliance

Vicki Castleberry
Bosom Buddies of Georgia

Jim Hazel
Murray Medical Center

Dr. Gerald Kramer
J.C. Lewis Health Center of Union Mission

Ken Murphy
Georgia Transplant Foundation

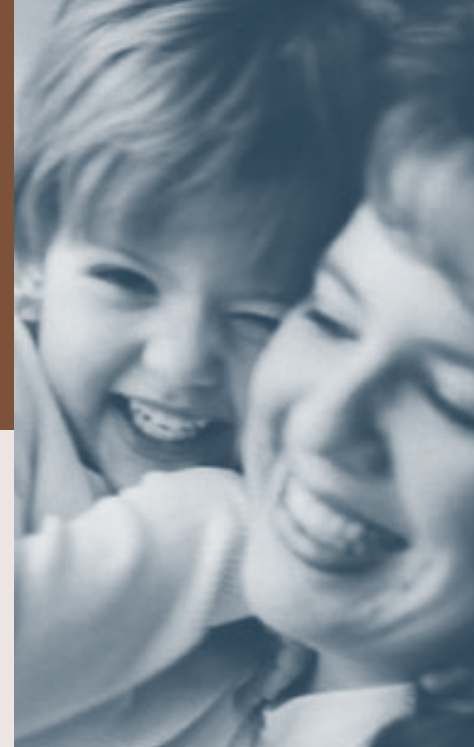
Dr. Samuel O. Poole
Good News at Noon Health Clinic

Connections 2003 was a valuable learning and networking experience for all that attended, and we look forward to hosting similar events in the future. We would like to thank the speakers, participants and moderators for their engaging and lively contributions to the success of Connections 2003.

A full wrap-up of the conference highlights can be found at www.healthcaregeorgia.org/ConnectionsWrapup.htm.

HealthTRAK Georgia: Tracking Critical Health Issues

November featured the launch of HealthTRAK Georgia, an interactive Web site where visitors can access current information on legislation, regulation and policy options for Georgia. HealthTRAK Georgia, a Project of the Women's Policy Education Fund, was funded through a grant from the Foundation. It will inform users of legislative and public hearings and other opportunities to weigh in on health policy. The service will track twelve areas critical to addressing the state's current health issues, including: Access to Health Services/Uninsured, Health Disparities among Women/Minorities/Rural Areas and Public Health and Community Based Programs.



Our Grantmaking Priority Areas & Grantees

focus

We have established initial grantmaking priorities reflecting prevalent health problems, the disproportionate burden of illness, disability and death among underserved individuals and communities, and statewide public input on perceived opportunities to advance the health of all Georgians.



Addressing Health Disparities

Healthcare Georgia Foundation can do much to encourage and strengthen the State's capacity, leadership, readiness and focus for eliminating high disparity health conditions. Consistent with our mission and goals, such grantmaking focuses on creating the necessary conditions to address the commonly agreed causes of health disparities. These conditions include: unequal access to health care and treatment, socio-cultural and informational barriers that prevent full access to quality health information and service utilization and the inadequate supply of appropriate, well-trained health care providers.

The Carter Center, Inc. \$5,000
Support for the 19th Annual Rosalynn Carter Symposium on Mental Health Policy to be held on November 5-6, 2003 to encourage leadership within the mental health community to improve the nation's mental health service delivery system.

Center for Diversity in Health Research, Inc. \$45,000
Support to inform the design of a strategic grantmaking initiative to address health disparities in Georgia.

Emory University (School of Medicine) \$385,000
Support to provide interpregnancy care and social supports to underserved women at-risk of poor pregnancy outcomes in Fulton and DeKalb Counties.

Georgia Cancer Coalition, Inc. \$250,000
Support to enhance two rural regions' (West Central and Southwest Georgia) community outreach efforts for cancer prevention, early detection and treatment to reduce cancer disparities in over 50 counties.

Georgia State University \$5,000
Support to publish a health policy brief that analyzes the effects of further increases in the tobacco tax in Georgia.

Grantmakers In Health \$5,000
Support for a national meeting titled 'Erasing the Color Line: Philanthropy's Role in Eliminating Health Disparities' to be held November 6-7, 2003 in Washington, D.C.

Kennesaw State University \$200,000
Support to develop, implement and evaluate a Latino-Hispanic Diabetes project in Cobb County.

The Morehouse School of Medicine, Inc. \$3,000
Support for the Presidential Inaugural Symposium on Health Disparities on April 11, 2003, with sessions on determinants, quality of care and access.

National Foundation for the Centers for Disease Control & Prevention, Inc. \$9,660
Support for Georgia's public health leaders' participation in 'The Public's Health and the Law in the 21st Century: Second Annual Partnership Conference on Public Health Law' to be held June 16-18, 2003 in Atlanta, Georgia.

Grantee Profile:

Emory University – World Health Organization Collaborating Center in Reproductive Health

Amount: \$385,000
Awarded: March, 2003

Purpose: Support to provide interpregnancy care and social supports to underserved women at-risk of poor pregnancy outcomes in Fulton and DeKalb Counties.

The Emory University – World Health Organization Collaborating Center in Reproductive Health (WHO/CC/RH) was established in 1981 to address the complex and serious problem of high infant mortality in Georgia.

WHO/CC/RH represents an alliance between three major institutions: The Robert W. Woodruff Health Sciences Center of Emory University, the National Centers for Disease Control and Prevention (CDC), and The Georgia Department of Human Resources (DHR). The alliance provides leadership in maternal and infant health by monitoring perinatal data and offering recommendations for change that impact the general health of Georgia women.

As part of an intervention package for high-risk women, the alliance established an Interpregnancy Care Project (IPCP) at Grady Memorial Hospital. The project provides 24 months of comprehensive integrated primary health care to women mainly from Fulton and DeKalb Counties who have had a very low birth weight infant at Grady Hospital.

IPCP services include an individualized interpregnancy care plan comprised of primary healthcare with treatment of chronic medical diseases, dental services, substance abuse and mental health treatment, child spacing and psychosocial services to reduce stress and domestic violence. The providers include physicians, a nurse midwife/family nurse practitioner, social workers, case managers and Resource Mothers.

Addressing Health Disparities

As a result of the grant from Healthcare Georgia Foundation, Emory University – World Health Organization Collaborating Center in Reproductive Health in conjunction with the Grady Health System will:

- provide 24 months of comprehensive, integrated primary care services to each of a minimum of 300 women who deliver very low birth weight infants (stillborn or live born) at Grady Memorial Hospital;
- reduce infant mortality and morbidity for subsequent births of enrolled women by decreasing the incidence of very low birth weight outcomes through improvement of the women's health and child spacing, and;
- disseminate information from the IPCP Program regarding the contribution of very low birth weight infants to overall infant mortality/morbidity rates, and racial disparities, along with identified efficacious interpregnancy care strategies.

equity



Expanding Access to Primary Healthcare

Through strategic grantmaking, Healthcare Georgia Foundation can improve the uninsured and underinsured population's access to primary health care services. In an effort to provide a comprehensive, integrated and seamless system of health services, the Foundation's technical and fiscal resources support: health policy analysis and advocacy, applied intervention research, workforce development, leadership development and recognition, organizational improvement, the provision of preventive health services and workforce development.

Atlanta Lesbian Cancer Initiative, Inc. \$70,000
Support for cancer and chronic disease prevention and health education targeted to lesbian women in metropolitan Atlanta, Macon and Savannah.

Atlanta Women's Foundation, Inc. \$2,500
Support for the inaugural 'Women in Medicine for the Atlanta Women's Foundation' event on April 15, 2003 to raise support for programs dealing with cancer-related issues specific to women and girls in Georgia.

Center for the Visually Impaired, Inc. \$75,000
Support for a diabetes education program for blind and visually impaired adults in the Metropolitan Atlanta area.

Central Savannah River Partnership for Community Health \$99,000
Support for two registered nurses providing enhanced health education and chronic disease case management for patients in Richmond County and surrounding rural areas.

Council on Social Work Education \$10,000
Support for the first National Gerontological Social Work Conference to be held in Atlanta February 27 - March 2, 2003.

Emory University \$105,000
Support for the development and production of a comprehensive inventory of key health indicators in Georgia.

Farmworker Health Services (Colquitt County Board of Health) \$10,000
General operating support to provide bridge funding for the Family Farm Worker Health Program, providing health service delivery for migrant workers in Ellenton, Georgia for two weeks in the summer each year.

FCS Urban Ministries Inc. \$3,500
Support for a briefing paper on the health dimensions of homelessness in Georgia.

Georgia Campaign for Adolescent Pregnancy Prevention, Inc. \$85,000
Support for Enlace (Spanish for 'link'), a pilot community initiative to improve the access and availability of mental health services to Latino adolescents and their families in Gainesville.

Georgia Health Policy Center (Georgia State University Research Foundation, Inc.) \$125,000
Support to enhance Georgia's school health program capacity and to conduct research to inform Georgia's best options for collaborative work to address childhood overweight and obesity.

Georgia Hospital Association Research & Education Foundation, Inc. \$7,500
Support for "The Promise of Nursing for Georgia" to be held November 12, 2003 in Atlanta to raise awareness and support about the nursing shortage in Georgia.

Georgia Public Telecommunications Commission \$5,824
Support for the 'Lifeline to Health' show, featuring interactive call-in segments, health/fitness news and feature stories on health to promote the health of Georgians.

Georgia Southern University Research and Service Foundation, Inc. \$75,000
Support to expand the Rural Nursing Outreach Program to address both the underserved healthcare delivery needs of rural Southeast Georgia residents and the need for increased numbers of well educated professional nurses for the region.

Grantee Profile:

Georgia Campaign for Adolescent Pregnancy Prevention, Inc. (G-CAPP)

Amount: \$85,000
Awarded: March, 2003

Purpose: Support for Enlace (Spanish for "link"), a pilot community initiative to improve the access and availability of mental health services for Latino adolescents and their families in Gainesville, Georgia.

The Georgia Campaign for Adolescent Pregnancy Prevention (G-CAPP) was founded in 1995. G-CAPP's mission is to prevent early pregnancy by promoting the healthy development of children, adolescents and their families.

Enlace (Spanish for "link") is an initiative of G-CAPP that seeks to reduce cultural barriers and improve the availability of mental health services for Latino adolescents. Under the direction of the G-CAPP Latino outreach project - El Puente (The Bridge), Enlace participants, the Gainesville School District, community members and organizations link together to break down cultural/racial barriers and share educational and health resources. The program is piloted in the Gainesville City School District of Georgia and targets families and students in grades K - 8.

Through its "Community Engagement Process" (CEP), G-CAPP has identified several high-risk health related behaviors that affect Latino youth: teen pregnancy, gang violence and poor school performance. Enlace serves as a bilingual mental health resource for Latinos, providing structural and behavioral family therapy, parental peer support, case management services, after school programs and behavioral family skills training.

Expanding Access to Primary Healthcare

As a result of the grant from Healthcare Georgia Foundation, Georgia Campaign for Adolescent Pregnancy Prevention, Inc. will:

- assist Latino families with children in the Gainesville City School District with school assimilation by developing and implementing a mental health/support program to enhance the students and families' abilities, skills and knowledge;
- demonstrate at least 50% of the program participants will have a positive school experience and demonstrate improved attendance, student behavior ratings from teachers and/or improved student academic performance;
- teach families of Latino students in the Gainesville City School District how to access services with at least 50% of participants having improved services delivery, increased parent/school contact and improved parental ability to address their children's needs;
- strengthen students' ability to cope with daily pressures and to engage in positive, healthy behaviors, improved knowledge of health and wellness, and reduced risk factors for delinquency, risk taking and negative behavior;
- develop and distribute an initiative report that documents the specific program experiences, lessons, theories of change, strategies and outcomes to a broad audience including other school health providers, Georgia Public Health Association and other academic/research audiences interested in Latino health and well-being, and;
- demonstrate improved attendance, student behavior ratings from teachers and/or improved academic performance for at least 50% of program participants.

Global Evaluation & Applied Research Solutions \$200,000
Support to design, implement and report findings of Healthcare Georgia Foundation's (HGF) second Listening Tour -collecting data from consumers on their health and healthcare experiences in Georgia.

Hospital Authority of Jefferson County & the City of Louisville \$90,000

Support to expand the Jefferson County Access Project's pharmacy assistance and preventive healthcare programs and to develop a data management system to track and analyze the project's data.

Institute for Public Health (Georgia State University Research Foundation, Inc.) \$160,000
Support to establish the Georgia Tobacco Policy Project in the Georgia State University Institute of Public Health to conduct policy research on state and local tobacco control strategies.

Marcus Institute for Development and Learning, Inc. \$50,000

Support to develop a multi-disciplinary, comprehensive spasticity program that provides diagnostic and treatment services to children ages birth to 21 in Atlanta, improves providers' clinical practice through education, and implements a tracking system.

The Morehouse School of Medicine, Inc. \$325,000
Support to establish the Institute for Health Policy in the National Center for Primary Care and to conduct policy research on primary care, prevention, and mental health services for underserved communities in Georgia.

New Horizons Area MH-MR-SA Program \$65,000
Support to enhance its substance abuse treatment capacity through staff development and training, reducing the percentage of substance abuse relapses in seven West Central Georgia counties.

Porter Novelli \$10,000
Support to conduct communications research designed to inform the publication and positioning of a public opinion poll on access to healthcare and prevention in Georgia.

The Sheltering Arms \$90,000
Support for health-related training for its family support coordinators who provide preventive health education and healthcare referrals for low-income families and children in metropolitan Atlanta.

Shepherd Center, Inc. \$180,000
Support for the Marcus Community Bridge Program and the provision of enhanced case management services for clients with disabilities and compromised skin integrity.

Women's Information Network, Inc. \$5,000
Support for 'Spring Training', a regional health promotion and education campaign providing a health screening event in Northwest Georgia and working to develop partnerships with health service providers, businesses, and the community.

accountability



Strengthening Nonprofit Health Organizations

Healthcare Georgia Foundation allocates grant funds for organizational improvement, underscoring our commitment to assisting underserved populations and the organizations that serve them. Organizational improvement grants are awarded to eligible nonprofit health organizations for the purpose of strengthening and sustaining their capacity to fulfill their mission.

Albany Advocacy Resource Center \$125,000
Support for two sites in Georgia providing professional development, recruitment activities, and skill training for 500 direct support professionals - individuals who support the daily living activities of the developmentally disabled.

Berrien County Board of Education \$30,000
Support for the school health program and salary support for a part-time registered nurse at Berrien High School in Berrien County.

Catoosa County Board of Health \$30,000
Support to build and enhance the existing school nurse program at Ringgold Middle School in Catoosa County.

Center for Civic Partnerships (Public Health Institute) \$38,000
Support for the provision of sustainability technical assistance to Georgia's nonprofit health organizations.

Chattooga County Board of Education \$30,000
Support to enhance the established links between its school health program, the public health department and other community partners to increase the healthy lifestyles of children and families in Chattooga County Georgia.

Columbus Regional Healthcare System, Inc. \$30,000
Support for its school health program to prevent health problems, promote health, ensure access to healthcare and identify and manage barriers to students' learning in Talbot County.

Community HealthCare Center, Inc. \$85,000
General operating support for critical staffing, strategic planning and staff development important to serve the medically underserved in the city of Savannah and Chatham County.

City Schools of Decatur (DeKalb Medical Center) \$85,000
Support for its school health program with the children of families in the free or reduced lunch program in DeKalb County.

FCS Urban Ministries Inc. \$8,000
Support for an evaluation to assess 160 Georgia based nonprofit health organizations and their efforts to seek grant support from Healthcare Georgia Foundation from May- June 2003.

Friends of Disabled Adults and Children Too, Inc. \$23,000
General operating support for a Medicare/Medicaid administrative position to assist individuals living with disabilities secure durable medical equipment important to daily function and integration into community in north Georgia and metropolitan Atlanta.

The Georgia Center for Nonprofits, Inc. \$75,000
Support for the statewide implementation and evaluation of the Healthcare Capacity Building Project; grant also provides for organizational assessment services for Georgia-based nonprofits.

Georgia Public Health Association, Inc. \$141,000
Support for the initial Public Health Leadership Institute for 160 local members of County Board of Health from the 19 health districts and for the 2003 Annual Meeting and Conference.

Georgia Rural Health Association, Inc. \$60,000
General operating and conference support to strengthen the capacity of the association to meet its mission of educating and advocating for healthcare issues in rural Georgia.

Grantee Profile: Women's Policy Education Fund (WPEF) (HealthTRAK Georgia)

Amount: \$210,000

Awarded: June, 2003

Purpose: Support for the creation of a centralized source of web-based and printed material tracking health policy in Georgia and to encourage its use by consumer focused organizations and other key stakeholders.

Founded in 1988, the Women's Policy Education Fund's (WPEF) mission is to empower women to work in public policy by providing focused issue education grounded in policy research, advocacy skills training, strategic leadership, and coalition building. Health issues addressed by WPEF include access to healthcare, services for the disabled, family planning and teen pregnancy, and anti-violence initiatives.

To make it easier for consumers and advocates to engage in health policy making, WPEF developed HealthTRAK Georgia. HealthTRAK is a user-friendly website and database with current information on healthcare legislation and policy in Georgia. The goal of HealthTRAK is to increase participation in state health policy decisions by providing up-to-date tracking of health legislation and policy education to legislators, advocacy groups, direct service providers, and consumers.

HealthTRAK Georgia will feature: Legislation – a summary of General Assembly bills, their status and activities; News – budget and legislative news summaries; online, interactive legislative analysis; regional forums; legislative meetings; Policy Briefs – an analysis of critical health policy issues raised in the Georgia General Assembly; and an Issue In Depth Series – an annual report that provides researched

policy analysis with a focus on pro-active strategies in health policy.

HealthTRAK Georgia will be built around twelve priority areas of health: access to health services/uninsured; emergency preparedness; family violence and child protection; health care financing and quality of care; health disparities – women/minorities/rural; health education and disease management; mental health/disability rights/addictive diseases; professional licensing and regulation; public health and community based programs; reproductive health; seniors; wellness and prevention.

Strengthening Nonprofit Health Organizations

As a result of the grant from Healthcare Georgia Foundation, the Women's Policy Education Fund will:

- create a web-based legislative tracking system and other communication vehicles to chronicle relevant legislative and policy efforts affecting statewide healthcare;
- provide outreach to high priority constituencies through promotional materials and at least four demonstrations in Year 1 and at least eight scheduled demonstrations in Year 2, and;
- plan and develop the HealthTRAK Georgia Forums, a statewide education effort to increase awareness of the eight health priority areas in each of Georgia's 12 service delivery regions.

For more information, please visit: www.healthtrakga.org.

Georgia Transplant Foundation, Inc. \$7,500
General operating support for the development and dissemination of a CEO Case for Support fundraising publication.

Georgia Rural Health Association, Inc. \$60,000
General operating and conference support to strengthen the capacity of the association to meet its mission of educating and advocating for healthcare issues in rural Georgia.

Health Students Taking Action Together (AIDS Survival Project) \$35,000
General operating support for Health Students Taking Action Together (HSTAT) for continued leadership development activities to young, health professional students and for organization strengthening.

Madison County School System \$30,000
Support for its school health program to provide health education and expand CPR training in Madison County.

Medbank Foundation, Inc. \$179,100
General operating support to strengthen its capacity to provide free or donated prescription medications to low-income residents of Chatham and Effingham Counties with chronic health conditions.

Northwest Georgia Healthcare Partnership, Inc. \$125,000
General operating support for key organizational improvements and bridge funding for its Volunteers in Medicine Program providing medical, dental and pharmaceutical care to the medically underserved in Whitfield and Murray Counties.

Professional and Scientific Associates \$80,000
Support for the inaugural conference of Georgia nonprofit health organizations and Healthcare Georgia Foundation grantees.

Saint Joseph's Mercy Care Services, Inc. \$100,000
Support to implement a database analysis research project for improved healthcare and support services to the homeless in metropolitan Atlanta.

University of Georgia Research Foundation, Inc. \$10,000
Support to augment the existing HGF grant to collect public opinion data on a variety of health and healthcare issues facing Georgians by producing two data-based policy briefs.

Women's Policy Education Fund \$210,000
Support for the creation of a centralized source of web-based and printed material tracking health policy in Georgia and to encourage its use by consumer focused organizations and other key stakeholders.

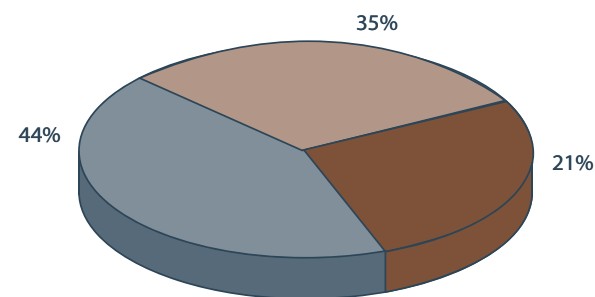
support



Grantmaking By The Numbers

2003 Grants Summary
54 Grant Awards totaling \$4,237,584

2003 Grant Allocations by Grantmaking Priority Area

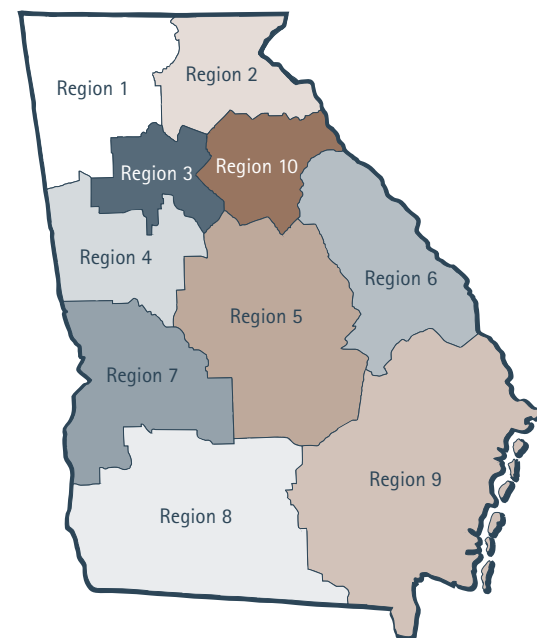


- Addressing Health Disparities \$907,660
- Strengthening Nonprofit Health Organizations \$1,481,600
- Expanding Access to Primary Healthcare \$1,848,324

2003 Grantmaking by Region

Grantmaking Region	Amount Awarded	% of 2003 Total Grant Awards
Region 1: NW, Dalton	\$190,000	4.5
Region 2: NE, Gainesville	\$147,500	3.5
Region 3: Metropolitan Atlanta	\$928,833	21.9
Region 4: LaGrange	\$ 0	0.0
Region 5: S. Central, N. Central	\$ 23,334	0.5
Region 6: Augusta	\$226,500	5.3
Region 7: West Central	\$220,000	5.2
Region 8: SW, Valdosta	\$227,500	5.4
Region 9: SE, Savannah, Coastal	\$324,933	7.7
Region 10: Athens	\$ 30,000	0.7

 \$1,918,984 Statewide Grants – 2003
45.3% of 2003 Total Grant Awards



Our Grant Application Guidelines

Instructions for Submitting a Letter of Inquiry (LOI)

After reviewing the Foundation's priorities, the next step is the submission of a Letter of Inquiry.

Letters of Inquiry may be submitted at any time. We will acknowledge receipt of the LOI within 3 months and notify the applicant organization of the results of our review and decision whether to request a complete grant proposal. Letters of Inquiry should be approximately 1-2 pages in length, following the format below:

1. **The Funding Request.** In 2-3 sentences or less, please describe your funding request and include the dollar amount you are requesting. Highlight how your proposed program/project fits with the Foundation's mission and goals, and a particular Grantmaking Priority Area. Requests for organizational improvement grants within the "strengthening nonprofit health organizations" Grantmaking Priority Area should not exceed \$50,000.
2. **About your Organization.** In 2-3 sentences briefly describe your organization's history and mission, including the year it was established. Please provide the name of your organization and contact information.
3. **The Problem or Opportunity.** In 2-3 sentences, describe the particular health problem or opportunity your program or project seeks to address. What is the current magnitude of this problem or opportunity specific to the state of Georgia or your local community/region, if available?
4. **The Program.** In 3-4 sentences, describe the program's purpose and list 2-3 major objectives for this project/program during the funding period.
5. **The Target Population.** Describe who will benefit from this program. Highlight any relevant characteristics (i.e. gender, age groups, ethnic-racial composition, disability, socio-economic status, and/or income) that further clarify your target group.
6. **Success, Outcomes and Results.** As a result of funding, what constitutes success for your organization or program?

Letters of Inquiry should be submitted in writing (on applicant letterhead) and mailed to the attention of:

Director of Grants Management
Healthcare Georgia Foundation
50 Hurt Plaza, Suite 550
Atlanta, Georgia, 30303
404.653.0990 (P) 404.577.8386 (F)
info@healthcaregeorgia.org

Instructions for Submitting a Proposal

Following the receipt and favorable review of the applicant organization's LOI, the Foundation will provide guidelines and a request for the submission of a full written grant proposal including timelines for submission. Foundation staff will meet with representatives of the applicant organization following the submission of the grant proposal. Staff will then undertake an extensive technical and financial analysis of your proposal. Healthcare Georgia Foundation meets quarterly to review grant recommendations. The entire application and proposal review process normally takes about 8-9 months. Please review these printed materials carefully. Please submit questions regarding the application process to Healthcare Georgia Foundation's Director of Grants Management.



Board & Staff

Board of Directors

James W. Curran, M.D., MPH
Joseph D. Greene
Mark Johnson
Michael F. Kemp, Esq.
Linda Lowe
Enoch J. Prow - Chairman
Jerome Scott
Richard D. Shirk
Charles Underwood, M.D.

Staff

Gary D. Nelson, Ph.D.
President
Martha Katz, MPA
Director of Health Policy
Milano Harden, Ed.M.
Program Director
Michael J. Sweeney, III
Director of Finance
Nicole Howe Buggs
Director of Grants Management
Barbara Park
Executive Assistant to the President
Ta-Tanisha Smith
Program Assistant

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Healthcare Georgia Foundation, Inc.
Atlanta, Georgia

We have audited the accompanying statements of financial position of Healthcare Georgia Foundation, Inc. (the Foundation) as of December 31, 2003 and 2002 and the related statements of activities and changes in net assets and statements of cash flows for the years then ended. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatements. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Foundation as of December 31, 2003 and 2002 and the results of its activities and changes in net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Atlanta, Georgia
January 20, 2004

STATEMENTS OF FINANCIAL POSITION
December 31, 2003 and 2002

	2003	2002
Assets		
Cash and cash equivalents	\$ 216,074	\$ 180,653
Investments, at fair value	116,599,324	100,300,524
Equipment, net of accumulated depreciation	156,666	184,317
Other assets	9,849	9,800
Prepaid taxes	-	11,995
Deferred federal excise tax benefit	-	95,558
Total assets	<u>\$116,981,913</u>	<u>\$100,782,847</u>
Liabilities and Net Assets		
Accounts payable	\$ 10,316	\$ 10,226
Accrued expenses	129,813	67,416
Tax payable	22,713	-
Deferred federal excise liability	66,417	-
Total liabilities	<u>229,259</u>	<u>77,642</u>
Unrestricted net assets	<u>116,752,654</u>	<u>100,705,205</u>
Total liabilities and net assets	<u>\$116,981,913</u>	<u>\$100,782,847</u>

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
For the Years Ended December 31, 2003 and 2002

	2003	2002
Unrestricted operating revenues and other supports:		
Interest and dividend income	\$ 2,600,791	\$ 3,202,763
Net gain or (loss) on investments	19,910,402	(15,100,663)
Other income	-	36,349
Total unrestricted revenue and other support	<u>22,511,193</u>	<u>(11,861,551)</u>
Grants:		
Discretionary	99,984	100,000
Non Discretionary	4,137,600	4,274,240
	<u>4,237,584</u>	<u>4,374,240</u>
Program operating and investment expenses:		
Compensation and fringe benefits	758,286	465,911
Office expense	60,543	54,362
Occupancy	95,201	78,240
Insurance	14,194	12,112
Public relations	151,868	120,783
Professional services	116,107	512,904
Travel	36,423	30,315
Telephone and data	30,809	27,515
Freight and postage	7,249	2,936
Other	82,573	44,740
Investment management fees	655,927	480,071
Total expenses	<u>2,009,180</u>	<u>1,829,889</u>
Increase (decrease) in unrestricted net assets before federal excise tax and deferred tax expense	16,264,429	(18,065,680)
Federal excise tax on investment income	(55,005)	(24,354)
Deferred federal excise tax (expense) benefit	(161,975)	112,207
Increase in unrestricted net assets	<u>16,047,449</u>	<u>(17,977,827)</u>
Unrestricted net assets, beginning of year	<u>100,705,205</u>	<u>118,683,032</u>
Unrestricted net assets, end of year	<u>\$116,752,654</u>	<u>\$100,705,205</u>

The accompanying notes are an integral part of these financial statements.

STATEMENTS OF CASH FLOWS
For the Years Ended December 31, 2003 and 2002

	2003	2002
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	\$16,047,449	\$(17,977,827)
Adjustments to reconcile change in net assets to cash provided by operating activities		
Depreciation	44,727	37,213
Net (gain) or loss on investments	(19,910,402)	15,100,663
Deferred tax	161,975	(112,207)
Changes in assets:		
Prepaid expenses	36,349	(36,349)
Deposit	(49)	-
Changes in liabilities:		
Accounts payable	90	10,226
Accrued expenses	62,397	45,414
Taxes payable	(1,641)	(45,645)
Net cash provided by (used in) operating activities	<u>(3,559,105)</u>	<u>(2,978,512)</u>
CASH FLOWS FROM INVESTING ACTIVITIES		
Net proceeds from sales of investments	3,611,602	1,778,355
Purchase of equipment	(17,076)	(88,044)
Net cash used in investing activities	<u>3,594,526</u>	<u>1,690,311</u>
Net increase in cash and cash equivalents	35,421	(1,288,201)
CASH AND CASH EQUIVALENTS, Beginning	180,653	1,468,854
CASH AND CASH EQUIVALENTS, Ending	<u>\$ 216,074</u>	<u>\$ 180,653</u>

The accompanying notes are an integral part of these financial statements.



NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2003 and 2002

1. Organization and Business Purpose

Healthcare Georgia Foundation, Inc. (the Foundation) was incorporated under the laws of Georgia. It was formed in 1999 as the beneficiary of an endowment set up by Blue Cross/Blue Shield of Georgia. The mission of the Foundation is to advance the health of all Georgians and to expand access to affordable, quality healthcare for under-served individuals and communities.

The Foundation's activities are overseen by an outside board of directors.

2. Summary of Significant Accounting Policies

Basis of Presentation

The Foundation follows the provisions of Statement of Financial Accounting Standards ("SFAS 117"), "Financial Statements of Not-for-Profit Organizations." This statement requires the reporting of total assets, liabilities and net assets in a statement of financial position; reporting the change in net assets in a statements of activities; and reporting the sources and uses of cash and cash equivalents in a statements of cash flows.

SFAS 117 also requires that net assets and revenues, gains, expenses and losses be classified as unrestricted, temporarily restricted or permanently restricted based on the existence or absence of donor-imposed restrictions as follows:

Permanently restricted - Net assets subject to donor imposed stipulations that they be maintained permanently by the Foundation.

Temporarily restricted - Net assets whose use by the Foundation is subject to donor-imposed stipulations that can be fulfilled by actions of the Foundation pursuant to those stipulations or that expire by the passage of time.

Unrestricted - Net assets that are not subject to donor-imposed stipulations. Unrestricted net assets may be designated for specific purposes by the Foundation or may otherwise be limited by contractual agreements with outside parties.

Revenues - Revenues are considered to be available for unrestricted use unless specifically restricted by the donor.

Cash and Cash equivalents - Cash and cash equivalents consist of highly liquid investments with maturity of three months or less when purchased. Cash and cash equivalents held by investment money managers are classified with investments in these financial statements.

Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires the use of estimates made by management. Actual results could differ from those estimates.

Equipment - Equipment is stated at cost. Depreciation is provided for by the straight-line method, based on the estimated useful lives of the assets. The Foundation capitalizes items with a cost exceeding \$1,000.

Concentration of Credit Risk - Investment securities are exposed to various risks such as interest rate, market and credit. Due to the normal level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in market conditions in the near term would materially affect the Foundation's account balances and the amounts reported in the financial statements.

Investments - Investments in equity and debt securities are stated at estimated fair value based on quoted market prices. Gains or losses that result from market fluctuations are recognized in the period such fluctuations occur. Realized gains or losses resulting from sales of securities are calculated on an adjusted cost basis. Adjusted cost for this purpose is the market value of the security at the beginning of the year, or the cost if purchased during the year. Dividend and interest income are accrued when earned.

Fair Value of Financial Instruments - The carrying amounts of cash and equivalents, accounts payable and other liabilities approximate fair value because of the short maturity of these items. Investments are carried at estimated fair value based on quoted market prices.

3. Concentrations

The Foundation maintains cash balances at a bank. Accounts at the bank are insured by the Federal Deposit Insurance Corporation up to \$100,000. The Foundation's amounts on deposit at December 31, 2003 and 2002 exceed the insured limit by \$61,633 and \$80,653, respectively. The Foundation manages this risk by placing their deposits in a high quality financial institution.

4. Federal Excise Tax and Distribution Requirements

The Foundation is recognized as exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code and is classified as a private foundation as defined under the Code.

In accordance with the applicable provisions of the Code, the Foundation is subject to an excise tax of 2% (1% if payout requirements prescribed by the Code are met) on net investment income, including realized gains as defined in the Act. Deferred excise taxes arise primarily from unrealized gains or losses on investments and are calculated at the effective rate expected to be paid by the Foundation.

The Foundation is subject to distribution requirements of the Internal Revenue Code. Accordingly, it must distribute within one year after the end of each fiscal year, 5% of the fair value of its investment assets, as defined. The investments includable for the 5% distribution requirement are based on average monthly balances and are exclusive of those investments deemed to be held for charitable activities or other program-related investments. In determining qualifying distributions, grant payments are considered on a cash basis and certain expenses are considered as qualifying distributions. The Foundation has complied with distribution requirements through December 31, 2003.

5. Investments

Investments held by the Foundation are as follows as of December 31, 2003:

	Fair Value	Cost	Unrealized Gain/Loss
Money manager held funds:			
Cash equivalents	\$ 12,054,778	\$ 12,054,778	\$ -
U.S. equities	55,655,530	51,488,779	4,166,751
Non U.S. equities	23,762,853	21,263,250	2,499,603
Fixed income	<u>25,126,163</u>	<u>25,150,786</u>	<u>(24,623)</u>
Total	<u>\$116,599,324</u>	<u>\$109,957,593</u>	<u>\$ 6,641,731</u>

Investments held by the Foundation are as follows as of December 31, 2002:

	Fair Value	Cost	Unrealized Gain/Loss
Money manager held funds:			
Cash equivalents	\$ 1,092,353	\$ 1,092,353	\$ -
U.S. equities	55,756,418	64,263,886	(8,507,468)
Non U.S. equities	12,040,465	14,070,063	(2,029,598)
Fixed income	<u>31,411,288</u>	<u>30,430,015</u>	<u>981,273</u>
Total	<u>\$100,300,524</u>	<u>\$109,856,317</u>	<u>\$(9,555,793)</u>

6. Equipment

Equipment of the Foundation is as follows:

	December 31, 2003	December 31, 2002
Leasehold improvements	\$ 10,630	\$ 8,530
Furniture and fixtures	82,069	78,930
Equipment	<u>151,481</u>	<u>139,643</u>
	244,180	227,103
Less accumulated depreciation	<u>87,514</u>	<u>42,786</u>
Total	<u>\$156,666</u>	<u>\$184,317</u>

7. Leases

The Foundation leases the office space it occupies under an operating lease agreement. Rent expense for the year ended December 31, 2003 and 2002 was \$95,201 and \$78,240, respectively. Future minimum lease payments are as follows:

Year ended	
December 31	
2004	\$ 91,922
2005	94,670
2006	97,503
2007	<u>100,418</u>
Total	<u>\$384,513</u>

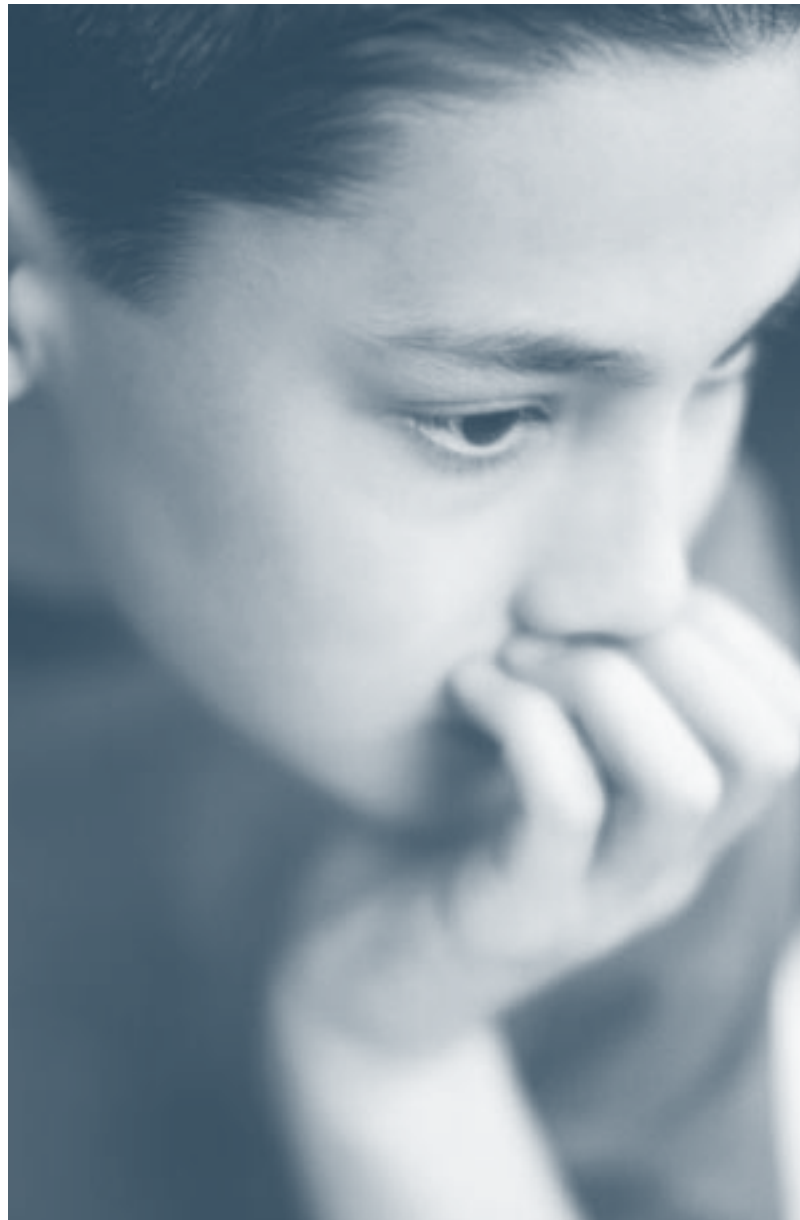
8. Benefit Plan

During the year ended December 31, 2003, the Foundation entered into a retirement plan under Section 401(a) and 403(b) of the Internal Revenue Code covering all employees meeting certain eligibility requirements. Contributions to the plan are made by the Foundation at 10% of employee salary and the Foundation matches 5% of employee contributions. Plan expense totaled approximately \$76,637 and \$30,627 for the year ended December 31, 2003 and 2002, respectively.

9. Expense Classification

Included in the caption "Program operating and investment expenses" in the statements of activities and changes in net assets are expenses pertaining to the general grant making activities of the Foundation, such as reviewing proposals and awarding, monitoring and evaluating grants. Also included in this caption are expenses relating to managing the Foundation's investment portfolio, including fees paid to outside investment managers. Below is a functional classification of these expenses:

	Year Ended	Year Ended
	December 31,	December 31,
	2003	2002
Program support and management	\$ 1,197,114	\$1,062,569
Investment related expenses	<u>812,066</u>	<u>767,320</u>
	<u>\$2,009,180</u>	<u>\$1,829,889</u>



Our Diversity Policy

Healthcare Georgia Foundation is a private independent foundation whose mission is to advance the health of all Georgians and to expand access to affordable, quality healthcare for underserved individuals and communities. The Foundation's ability to achieve its goals can best be accomplished if the programs it offers and supports reflect a diversity of perspectives among the Foundation's Board of Directors, staff, consultants, and partners.

Healthcare Georgia Foundation believes that such diversity encompasses, but is not limited to age, gender, race, national origin (ethnicity), religious beliefs, physical abilities and characteristics, sexual orientation, economic circumstances and lifestyle.

The Foundation considers a commitment to diversity as integral to its mission and its pursuit of grantmaking excellence in health. Healthcare Georgia Foundation seeks to collaborate and conduct business with individuals and organizations who share this commitment to diversity, as reflected in the composition of their Boards and staffs and in the programs they implement.

Annual Report Prepared By:

Avatar Marketing Group, Inc.
www.avatarmg.com

Healthcare Georgia Foundation
grantmaking for health



50 Hurt Plaza
Suite 550
Atlanta, GA 30303
p. 404.653.0990
f. 404.577.8386
healthcaregeorgia.org