The Georgia Health Policy Center, established in 1995, provides evidence-based research, program development, policy guidance, and technical assistance locally, statewide and nationally to improve health at the community level. The center distills its unbiased, qualitative and quantitative research findings to connect decision makers with the objective research and guidance needed to make informed decisions about health policy and programming.

Other projects to date focus on some of the most complex policy issues facing health care today including: community and public health, public and private health insurance coverage, long-term care, child health, and community health systems development. The GHPC manages an average of 40 contracts at any given time. The center is active in all 50 states and more than 200 communities nationwide. Karen J. Minyard serves as director of the center.

**Highlights**

In 2013, as part of the Georgia Health Policy Center’s (GHPC) ongoing work surrounding understanding and translating the implementation of the health care reform law, the Affordable Care Act (ACA), the GHPC released a health reform planning tool, Leading through Health Systems Change: A Public Health Opportunity. With input from public health professionals from across the country, the Centers for Disease Control and Prevention, the National Network of Public Health Institutes, and the GHPC created the collaborative planning tool to help public health organizations begin to examine and discuss opportunities and challenges that health system change poses. The tool is available online at www.acaplanningtool.com; it can be used individually or with a team to examine the basics of health care reform, apply adaptive thinking to questions related to health system change, and create a simplified implementation plan to leverage the opportunities in the health care reform law to improve population health.

With funding from the Betty and Davis Fitzgerald Foundation, the GHPC and Communities Joined in Action (CJA) hosted the “Health Reform in Community Settings” conference in Macon, Ga. The conference was held on September 30, 2013 and was attended by more than 70 people from across the state. The conference focused on strategic thinking and opportunities around health reform and enrollment for community health collaboratives, clinics, and hospitals. Speakers at the conference included representatives from the U.S. Department of Health and Human Services and Enroll America. A resource sheet, The Role of Georgia’s Safety Net Providers in the Health Insurance Marketplace, was designed by the GHPC to answer key questions that surfaced from the conference. A follow-up conference, “Georgia’s Marketplace Enrollment: An Update on Safety Net Provider Activity,” was held in February of 2014.

The GHPC has been an active member of the Atlanta Regional Collaborative for Health Improvement (ARCHI) Steering Committee. ARCHI is an interdisciplinary, coalition working to improve the region’s health through a collaborative approach to community health assessments and improvement strategies. In 2013, the collaborative released the ARCHI Playbook for use by anyone who would like to align with ARCHI’s vision and contribute to collective impact. It describes the circumstances that gave rise to this new collaborative and why we expect success in creating substantial, sustainable improvements for Atlanta. A video for the ARCHI project was also created and can be viewed on the website, along with the playbook, here: http://www.archicollaborative.org.
The GHPC completed the fifth year of the Legislative Health Policy Certificate Program (LHPCP). The LHPCP was developed to inform members and staff of the Georgia General Assembly about pressing health related issues. In 2013, more than 40 state elected officials and their staff attended at least one educational session—15 representatives, 3 senators, and 13 staff members completed at least three Legislative Health Policy Certificate sessions in order to earn certification.

In 2013, the GHPC led the Georgia’s Public Health Research, Epidemiology, and Surveillance for Hemoglobinopathies (PHRESH) project. PHRESH is a follow-up to the Registry and Surveillance System for Hemoglobinopathies (RuSH) project for which Georgia was one of seven states selected to conduct population-based surveillance of sickle cell disease and thalassemia. A resource page for the project was created, and the team also produced the first of several finding briefs, which can be viewed here: http://aysps.gsu.edu/ghpc/public-health-research-epidemiology-and-surveillance-hemoglobinopathies-phresh-project.

During 2013, the Community Health Systems Development (CHSD) team hosted four Peer Learning Seminars for grantees of the federal Office of Rural Health Policy (ORHP). These two-day events focused on capacity development and peer-to-peer-exchanges in the areas of oral health, mental health, access to care, and wellness and health promotion. Over 120 individuals from across the country participated. In addition, the CHSD team added e-learning as a component of the ORHP technical assistance program. Six web-based e-learning modules are now available to grantees for self-directed learning. The GHPC also released a fact sheet detailing our technical assistance services. Our tailored technical assistance is focused on helping communities build local capacity to increase access to care and improve the health status of their residents. View the fact sheet here: http://aysps.gsu.edu/sites/default/files/documents/TechnicalAssistanceFactSheet_Final.pdf.

The GHPC was active in Health Impact Assessment (HIA) work in 2013. With funding from the Health Impact Project, a collaboration between Pew Charitable Trusts and the Robert Wood Johnson Foundation, the GHPC has engaged in HIA projects in community development. The GHPC is also serving as evaluator for community development related HIAs across the country and received funding support from the Office of Sustainability in Memphis and Shelby County, Tenn. to lead HIA work in that region, with a focus on green space design.

**51 ACTIVE PROJECTS IN 2013**

12 PUBLICATIONS

49 PRESENTATIONS

14 POSTER PRESENTATIONS

13 MEDIA HITS

43 STAFF MEMBERS
**Child Health & Well-Being**

*The center aims to improve child outcomes and child and family policies in Georgia through applied policy analysis and research. Grants from public and private sources fund programs in the areas of school health, childhood obesity, and child well-being.*

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**Georgia Center of Excellence for Child and Adolescent Behavioral Health.** The GHPC, in partnership with the Center for Collaborative Social Work in the School of Social Work, was awarded a contract to develop the Georgia Center of Excellence in Child and Adolescent Behavioral Health (COE). The COE is partnering with the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) to provide fidelity monitoring, evaluation, research, training, and technical assistance for the child and adolescent behavioral health System of Care in Georgia. This project is funded by the Centers for Medicare & Medicaid Services (CMS) through a contract with DBHDD.

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**Georgia Legal Services Program.** The GHPC is assisting Georgia Legal Services Program in planning and completing the evaluation of its Health Benefits Hotline service. The GHPC is providing technical assistance in evaluation planning, survey development and administration, and will analyze data and report survey findings.

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**Healthcare Georgia Foundation—Obesity Grant.** The GHPC is partnering with Georgia State University’s School of Public Health to provide support and technical assistance to local communities (selected by Healthcare Georgia Foundation) for implementation of childhood obesity prevention programs.

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**PeachCare for Kids Outreach and Member Production.** The GHPC is working with the Georgia Department of Community Health to develop outreach efforts and member materials for PeachCare for Kids, Georgia’s health insurance program to serve low-income children.

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**Technical Assistance for Georgia School Health and Physical Education (SHAPE).** The GHPC is providing technical assistance and training to Georgia SHAPE School grantees. The technical assistance and training addresses conducting a school health assessment, planning, and implementing proposed projects/activities, and evaluation of school-specific programs related to the requirements of Georgia SHAPE and the federal Healthy Hunger Free Kids Act.
Community Health Systems Development
The GHPC’s Community Health Systems Development program focuses on helping communities develop a strategic approach to program implementation, building capacity while utilizing technical and adaptive approaches, and focusing on long-term sustainability. The center provides tailored, technical assistance to communities throughout Georgia and across the nation.

**HRSA Delta States Rural Development Network Grant Program.** The GHPC provided technical assistance for the Delta States Rural Development Network Grant Program. Through this contract awarded by the Health Resources and Services Administration’s (HRSA) Office of Rural Health Policy, GHPC’s Community Health System’s Development Team supports 12 grantees in the implementation of their grant programs through one-on-one consultation and training.

**HRSA National Technical Assistance: Rural Health Care Services Outreach Grant Program.** The GHPC provided technical assistance to the Rural Health Care Services Outreach Grant Program. Through this contract awarded by the Health Resources and Services Administration’s (HRSA) Office of Rural Health Policy, GHPC’s Community Health Systems Development team supports 71 grantees across the country in the areas of strategic planning, capacity building, and program sustainability.

**HRSA National Technical Assistance: Rural Health Network Development Grant Program.** The GHPC provided technical assistance to the Rural Health Network Development Grant Program. Through this contract awarded by the Health Resources and Services Administration’s (HRSA) Office of Rural Health Policy, GHPC’s Community Health Systems Development Team is providing an array of technical assistance services to 20 Rural Health Network Development grantees and 20 Rural Health Workforce Development grantees across the country.
Community & Public Health

The center works to fulfill its mission of improving health status at the community level by gathering, analyzing, and disseminating information in a manner that fosters collaboration and innovation and builds trust and relationships with local, state, and national organizations interested in improving health status.

An Evaluation of the Community Health Worker Initiative. The United Way of Metropolitan Atlanta has initiated a program to engage Community Health Workers (CHW) to help patients improve health status, choose a medical home at one of the participating Federally Qualified Health Centers or one of the Grady Clinics, and reduce re-admissions to the Grady Emergency Department. GHPC is evaluating the CHW program by analyzing survey data, interviewing a selection of patient participants, and conducting a CHW focus group.

Center for Health Information Technology. GSU’s Second Century Initiative is an ambitious hiring initiative to recruit 100 additional faculty members to the University over the next five years. The Department of Computer Information Systems and the Institute of Health Administration in the J. Mack Robinson College of Business and the GHPC are undertaking research around the theme of health information technology (HIT). The Center for Health Information Technology will build upon the existing strengths of each department. It is expected that this investment will lead to increased HIT funding, top-tier journal publications, and enhanced national reputation for GSU, Atlanta, and our state.

Communities Joined in Action (Administrative Home). The GHPC is the administrative home of CJA. This partnership has paved the way for critical national policy dialog with federal agencies like the Centers for Medicare & Medicaid Services and the CDC. GHPC provides infrastructure support such as office space and telephone, computer and technology support, office equipment and access to meeting rooms, access to administrative support, HR functions including staff support and supervision, and access to services and professional expertise.

Community Health Needs Assessment. The GHPC is conducting a community health needs assessment to inform strategic and community benefit planning. The assessment covers the current 28 county Kaiser Foundation Health service region with an in-depth focus on the metro Atlanta counties.

Grady Community Health Needs Assessment and Implementation Plan Development. The GHPC is conducting a community health needs assessment and facilitation of an implementation plan in support of the new IRS requirement for non-profit hospitals.

Domestic Violence Needs Assessment. The GHPC is conducting a needs assessment for domestic violence shelters in Georgia for the Governor’s Office for Children and Families, Domestic Violence Division. The GHPC is determining the number of shelter beds needed in each county based on historical demand for shelter services.
Evaluation of the National Public Health Improvement Initiative (NPHII). GHPC staff will work as a member of the Advisory Board to support the development and implementation of the NPHII evaluation activities to the highest standards and rigor, will participate in a NPHII Data Analysis and Translation Think Tank, and will review the NPHII Evaluation Team’s efforts to develop evaluation protocols and instruments and collect/analyze data. Staff will also provide guidance on the development of reports, manuscripts, and white papers.

Facilitating a Sustainability Planning Session. The GHPC will plan and facilitate a one-day sustainability planning meeting of the Georgia Health Information Technology Extension Center.

Georgia's Comprehensive Cancer Control Implementation Plan Support. In an ongoing effort, which began in April of 2006, the GHPC has been engaged by the Georgia Cancer Coalition to facilitate the revision and implementation of the state’s Comprehensive Cancer Control Plan, and to serve as local evaluators to the effort. In the process, the GHPC has staffed five work groups across the cancer control continuum and assisted in the engagement of nearly 150 cancer experts, workers, and survivors from across the state. An interactive web portal was used to manage this time-sensitive process that continues to be driven by evidence-based data and metrics. The GHPC continues to staff and provide support to the Georgia Research Alliance and the Division of Public Health throughout the implementation process.

The Health Law Partnership (HeLP). Addressing the legal issues of patients of low socioeconomic status can be useful in increasing organizational reimbursements, reducing costs, and improving access to care. Medical-legal partnership is an addition to the health care armamentarium that directly addresses this goal. The HeLP provides a holistic, interdisciplinary approach to health care. An evaluation of the legal and educational services provided by HeLP showed that it secured otherwise unreimbursed Medicaid payments for services over a four-year period from 2006 to 2010, increased physician satisfaction, and saved hospital employers approximately $10,000 in continuing education costs annually.

Improving the Quality of Community-Based Delivery Systems of Care: Community HUB Accreditation. The GHPC and partners are responsible for the organization and development of the National Leadership Team, construction of tools for HUB Certification, pilot site certification process, and scientific journal publications.

Legislative Education Initiative. The GHPC was awarded a grant from the Robert W. Woodruff Foundation to continue efforts to educate legislators about issues of health policy. The program includes: a pocket glossary of terms and acronyms, the Little Blue Book; one-on-one briefings; issue-specific research; and a comprehensive training series for members of the Georgia General Assembly, known as the Legislative Health Policy Certificate Program. In 2011, an Advanced Health Policy Institute was developed to provide further training in health financing and leadership for graduates of the certificate program.
ReThink Meeting Guidance and Logistics Support. The GHPC is working with the Frannie. E. Ripple Foundation, providing project management and guidance to the ReThink Health “Frontiers in Sustainable Financing for Health System Stewardship” project. The GHPC is also assisting with project team management, supporting the planning and coordination of site visits and meetings, and assistance in the design and facilitation of strategy workshops.

Projecting the Health and Economic Impact of Implementing CDC Policy Priorities. The GHPC and the National Network of Public Health Institutes (NNPHI) are working collaboratively with the CDC to explore the use of microsimulation models to understand the potential economic and health impacts of specific policies and approaches towards reducing teen pregnancy. Microsimulation models to be considered will use parameters and actual data that are representative of the target population (whether at the national, state, county, or community level), to project the expected short-term and long-term health and economic impacts of implementing the identified public health policy priorities.

Project Support Services, Georgia Center for Oncology Research and Education (CORE), Inc. The GHPC is supporting the work of the Georgia CORE and its stakeholder partners in the following ways: Convene the Consortium, facilitate the development of a Logic Model and work plan, assist in the conduct of a formative assessment, and provide guidance for policy implementation.

Public Health Research, Epidemiology, and Surveillance for Hemoglobinopathies (PHRESH). The GHPC leads Georgia’s PHRESH project, a follow-up to the Registry and Surveillance System for Hemoglobinopathies (RuSH) project for which Georgia was one of six states selected to conduct population-based surveillance of sickle cell disease and thalassemia. Partners in this work include the Georgia DPH, Sickle Cell Disease Foundation of Georgia, Inc., and the comprehensive sickle cell centers at Children’s Healthcare of Atlanta, Grady Hospital and Georgia Regents University. With the goal of better outcomes for people in Georgia with sickle cell disease, data from multiple sources are being analyzed to inform policy, outreach, and practice.

Research Support for the Atlanta Regional Collaborative for Health Improvement (ARCHI). The GHPC will conduct up to 20 tailored conversations with key stakeholders, conducting up to 10 community focus groups or community meetings, and holding partner meetings. The National Network of Public Health Institutes is providing funding to the GHPC in its role in the ARCHI to secure commitments by key leaders from hospitals, financial institutions, philanthropic organizations, and public health and business organizations to develop and implement a multi-sectoral co-investment strategy for community health improvement in the Atlanta region. Funding was provided by Kaiser and NNPHI.
RTI/Centers for Disease Control and Prevention Technical Assistance: PRISM Model Utilization - Community Transformation Grants. PRISM is a simulation model for chronic disease interventions. This web-based tool helps users make informed intervention decisions by modeling the likely impacts of intervention strategies on a population’s health. CTG awardees and other public health professionals can use PRISM to estimate how combinations of clinical, behavioral, environmental and other evidence-based interventions could impact cardiovascular disease factors and other disease-related risk factors, deaths, and costs. The GHPC offers technical assistance to awardees to help build their capacity to utilize, interpret, and strategically apply PRISM.

Strategic Planning for Chronic Disease Prevention and Health Promotion. The GHPC has been asked to develop a strategic plan for Georgia’s Chronic Disease Prevention and Health Promotion Section to include clarifying the mission, identifying priorities, and setting strategic goals and objectives to address the chronic disease burden in Georgia. The strategic planning process will also include the establishment and convening of the Chronic Disease Prevention and Health Promotion Statewide Strategic Partnership and Georgia Tobacco Use Prevention Coalition. The partnership consists of a group of diverse stakeholders and partners that will develop and implement a comprehensive, integrated Georgia Chronic Disease Prevention and Health Promotion Strategic Plan.

Strategic Planning and Technical Assistance. The GHPC will work closely with the Office of Health Equity to conduct research in order to update the strategic planning document in accordance with the standards set forth by the National Stakeholder Strategy developed by the Office of Minority Health and the CDC. The GHPC will convene meetings with internal and external partners.

Strategies to Address CDC Prioritized Health Outcomes. The GHPC is providing guidance to CDC programs, through funding from the National Network of Public Health Institutes, on how to define a best package of strategies to address prioritized health outcomes by developing multiple tip sheets.

Substance Abuse and Mental Health Services Administration (SAMHSA) Services in Supportive Housing Evaluation. The GHPC is working with the River Edge Behavioral Health Center to provide ongoing technical assistance and evaluation support to the River Edge project team implementing the SAMHSA Supported Housing Program.

Systems Dynamics Model Use and Design. The GHPC will use policy simulation tools and supporting material to improve understanding and options to prevent child and youth exposure to violence. The GHPC will work in collaboration with the CDC, Division of Violence Prevention, Prevention Practice and Translation Branch to submit recommended actions, beta materials, and rapid cycle feedback on how CDC can develop better models, maps, and learning modules on the violence linkages model.
Health Care Reform
The GHPC has formed a work group to understand and translate the implementation of the Affordable Care Act (health care reform). Experts from across Georgia State University have convened to study the law’s impact on many stakeholder groups, including state officials, health care providers, community-based organizations, and individuals.

Characterizing the Impact of the Affordable Care Act on Public Health. The GHPC and the National Network of Public Health Institutes (NNPHI) are working collaboratively with the CDC, public health institutes, and additional key partners in a comprehensive policy approach that will aid CDC in creating and advancing health policies that positively affect health at the population level. The GHPC developed a webinar, interactive workbook, and an online portal that will assist public health leaders in learning how to apply adaptive thinking skills to the challenges and opportunities presented by the ACA.
**Health in All Policies**

“Health in All Policies” is a concept that aims to strengthen the link between health and policies from other sectors such as housing, transportation, education, labor, and land use to create an environment that enables people to lead healthy lives. Health Impact Assessments (HIA) are one of the tools utilized for our Health in All Policies approach. The GHPC facilitates HIA training sessions, coordinates HIA’s for communities, makes recommendations based on findings, and provides technical assistance.

**Community Development HIA and Evaluation Services.** The GHPC is conducting a HIA to inform the 2015 Georgia Qualified Allocation Plan for Low Income Housing Tax Credits. The HIA will focus on the proposed criteria for allocating the tax credits, and consider how these criteria will impact health through the effects on housing for vulnerable populations and community development decisions. The GHPC will engage the GA Department of Community Affairs and others to build support for implementation of HIA recommendations. This HIA is supported by a contract from the Health Impact Project, a collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts.

**HIA for Galveston, Texas.** The GHPC, in collaboration with the GSU Department of Sociology and the University of Texas Medical Branch Center to Eliminate Health Disparities, is engaged in an HIA funded by the Health Impact Project, a collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts, with additional funding from the Kresge Foundation. The GHPC is conducting an HIA of the Galveston Housing Authority’s plan for addressing replacement of nearly one-third of the 569 public housing units that were lost to Hurricane Ike in Galveston, Texas. Recommendations will be offered to the Galveston Housing Authority Board of Commissioners.

**Centers for Disease Control and Prevent HIA Training.** The GHPC will develop and deliver training on HIA to CDC staff.

**Health Impact Project.** The GHPC will provide training, mentoring, and technical assistance to Pew grantee, Kentucky Environmental Foundation, to ensure successful completion of the grantees’ deliverables and a high-quality HIA that is consistent with best practices in the field as articulated in the National Research Council’s report, “Improving Health in the United States: the Role of Health Impact Assessment.” Additionally, the GHPC will provide technical assistance and training to potential HIA practitioners in Minnesota.

**Healthy Comprehensive Planning for South Carolina.** The GHPC will meet with the steering committee on multiple occasions and assist in the development of Policy Best Practices and Models. The GHPC will assist in the development of a policy analysis that supports public health practitioners and advocates throughout the state in reviewing existing or proposed policies for their effectiveness and support of health eating/active living.
Greenways and Green Infrastructure HIA—Shelby County. The GHPC, in collaboration with Alta Planning + Design (Alta) and TRUST Marketing and Communications (TRUST) will complete an HIA, lead a public participation process, and present and train on HIA for the Mid-South Regional Greenprint & Sustainability Plan.

PEW HIA Training. The GHPC will assist in the design and implementation of a Call for Proposals for institutes to function as new homes for HIA and will design and facilitate Train the Trainer Curriculum. GHPC staff will provide technical assistance to a public health institute for completion of an HIA and training.
Long-Term Services & Supports

As the Baby Boomer generation ages and individuals with disabilities live longer, the need for long-term services and supports grows. The GHPC conducts independent, evidence-based research, technical assistance, and evaluation on topics ranging from early stage Alzheimer’s disease programs to the implementation of the Georgia Aging and Disability Resource Connections. The GHPC strives to be in the forefront of efforts targeted at improving the lives of the aging, elderly, and disabled.

Evaluation Services in Support of the Dementia Capable, Sustainable Service Systems Grant. The GHPC is assisting in evaluating specific interventions [the Division of Aging Services will implement multiple interventions that ensure that persons with dementia and their family caregivers have clear and ready access to a sustainable, integrated system that offers a comprehensive set of high quality, evidence-based or evidence-informed services that can help them remain independent and healthy in the community.] The evaluation activities are anticipated to last three years. The GHPC will evaluate the following: telephone reassurance consumer instrument design and data analysis and caregiver education training test design and data analysis.

Money Follows the Person Evaluation. The GHPC is working with the Georgia Department of Community Health to create a program logic model for the Money Follows the Person Medicaid waiver program. The logic model is being created so that Georgia can focus on state-specific evaluation metrics as the program matures over the next four years. The GHPC is also conducting one- and two-year post-transition interviews with consumers who have moved from institutions to community environments as part of the evaluation.

Research Services Analyzing the Waiting List. The Division of Aging Services requested the assistance of the GHPC in conducting research regarding the waiting list for non-Medicaid Home and Community-Based Services in Georgia.
Private Policy & Grants Management

The GHPC partners with public and private grantmakers to leverage federal, state, local, and philanthropic resources to understand, prioritize, and structure investments in health issues. The center is the research arm and administrative home for the Philanthropic Collaborative for a Healthy Georgia, an informal group of Georgia’s foundations seeking to understand and respond to the health-related challenges facing the state.

Philanthropic Collaborative for a Healthy Georgia (Administrative Home). The center is the research arm and administrative home for the Philanthropic Collaborative for a Healthy Georgia, an informal group of Georgia’s foundations seeking to understand and respond to the health-related challenges facing the state. GHPC recently conducted a series of meetings to inform collaborative partners about the infrastructure and capacity of Georgia’s health care safety net services.

Georgia Health Decisions (GHD). Housed within the GHPC, GHD has been working across Georgia to give public voice to the health values and viewpoints of citizens. Distinct from other grassroots groups that address health issues from advocacy and consumer oriented perspectives, GHD attempts to elicit a self-consciously “civic” or citizenship outlook on health.
Public & Private Insurance Coverage
The GHPC helps shape public and private insurance markets through policy and economic analyses. Projects have ranged from evaluations and analyses of Medicaid and the Children’s Health Insurance Program (CHIP) to understanding the impact of the Affordable Care Act. The GHPC also works with foundations to design and evaluate programs that provide health care access to those who are uninsured.

Children's Health Insurance Program Reauthorization Act (CHIPRA) Cycle II Evaluation. The GHPC serves as the evaluator for the Georgia Department of Community Health’s CHIPRA Cycle II Outreach grant. The grant contains five strategies to improve enrollment and retention activities in the PeachCare for Kids and Medicaid programs through the use of technology.

Decision Support for Eligibility Redesign for the Medicaid and PeachCare for Kids Programs. The GHPC is assisting the Georgia Department of Community Health (DCH) in data collection activities to provide information that will assist DCH’s decision-making and planning processes that will potentially lead to a redesign of Georgia’s Medicaid and PeachCare for Kids eligibility systems.

PeachCare for Kids and Medicaid Program Evaluation. The GHPC was contracted by the Georgia Department of Community Health (DCH) to conduct the annual evaluation of Georgia’s Children’s Health Insurance Program, PeachCare for Kids. The GHPC assists DCH in their annual quality reporting to the Centers for Medicare & Medicaid Services (CMS).
PUBLICATIONS

Glenn Landers, Angela Snyder, and Mei Zhou, “Comparing Preventive Visits of Children in Foster Care with other Children in Medicaid,” Journal of Health Care for the Poor and Underserved: Volume 24, Number 2 (May 2013).


The Georgia Health Policy Center, the Centers for Disease Control and Prevention, and the National Network of Public Health Institutes released the planning tool Leading through Health System Change: A Public Health Opportunity on July 1, 2013.


Presentations


Jimmy Dills, John Haupert (Grady Hospital), Commissioner Larry Johnson (DeKalb County), Cindy Zeldin (Georgians for a Healthy Future), and Jeannette Jordan (J&J Health Consultants), discussed Health in All Policies during the panel “Health Disparities and Health Issues” moderated by Sabra Slaughter (Medical University of South Carolina). Atlanta Community Leaders Institute at Morehouse School of Medicine. Atlanta, GA. February 9, 2013.


Debra Kibbe, “Everything You Ever Wanted to Know about Georgia’s School Nutrition Programs But Were Afraid to Ask!” Georgia Academy of Nutrition and Dietetics annual conference. Atlanta, GA. March 1, 2013.


Elizabeth Fuller, “Exploring Institutionalization of HIA through Public Health Institutes.” at the National Network of Public Health Institutes annual conference in New Orleans, LA on May 21, 2013.


Chris Parker and Dr. James Hotz, “Regional Cancer Coalition and Cancer State Plan.” Georgia Department of Public Health Board Meeting. Atlanta, GA. September 10, 2013.


Angela Snyder, research assistant professor (Georgia Health Policy Center) gave testimony to the Senate Select Alternative Funding for Medicaid and Other Health Care Federal Funding Committee in Atlanta, GA on October 16, 2013.


Beth Fuller, “The Shifting Health Care Landscape: Where Are We Now with the Affordable Care Act?” Health Insurance Exchanges: Rebooting the Conversation event at Emory University. Atlanta, GA. November 5th, 2013.

Jimmy Dills, research associate II (Georgia Health Policy Center), was a panelist on a public health perspective of aging in place panel at the Congress for the New Urbanism (CNU) Atlanta Workshop: Atlanta’s Growing Elderburbia-Rethinking Solutions for an Aging Population in Atlanta, GA on November 8, 2013.


Jane Branscomb, “ARCHI-Pathways to Advantage.” ELUC Poverty Subcommittee meeting. December 3, 2013. Atlanta, GA.
Poster Presentations


Ann DiGirolamo served as a member of the American Society for Nutrition.

Kristi Fuller served as a member of the Georgia Gerontology Society.

Debra Kibbe served as a reviewer for the International Journal of Obesity.

Glenn Landers served as a Session Chair for the American Evaluation Association in Washington, D.C.

Glenn Landers served as a Task Force Member for the Georgia Department of Community Health Aged Blind and Disabled.

Glenn Landers received his ScD from the Tulane University School of Public Health and Tropical Medicine on May 18, 2013.

Susan McLaren served as a member of the American College of Healthcare Executives.

Karen Minyard served as a member on several dissertation committees.

Mary Ann Phillips served as an Ad hoc reviewer for CS4Health.info.

Mary Ann Phillips served as an Ad hoc reviewer for Robert Wood Johnson Foundation proposals.

Amanda Phillips Martinez was a member of the Board of Migrant Health Promotion.

Beverly Tyler served as a member of National Cooperative of Health Networks.

Beverly Tyler served as a member of National Rural Health Association.

Chris Parker served as a Board Member of the Georgia Rural Health Association.
Chris Parker was quoted in the Douglas County Sentinel article, “Douglas County is getting healthier, but obesity remains a concern” on March 24, 2013.

Glenn Landers and Kristi Fuller published the article, “Kristi Fuller and Glenn Landers on Ensuring Utility in Evaluation Practice” on AEA365 A Tip-a-Day by and for Evaluators blog on March 24, 2013.

The Georgia Health Policy Center (GHPC) was referenced in the Roll Call article “Many Solutions Needed to Bridge the Dental Divide” on May 31, 2013.

The Georgia Health Policy Center (GHPC) was cited in the Centers for Disease Control and Prevention’s Morbidity and Mortality Weekly Report on July 5, 2013.

Mary Ann Phillips and Debra Kibbe were quoted in Georgia State University’s article “Researchers Seek Solutions to Childhood Obesity Crisis.”

The Georgia Health Policy Center’s research was cited in the article “GSU Health Policy Center staffs cancer control plan implementation” on the Georgia Center for Oncology Research and Education website on July 17, 2013. The article quotes Robyn Bussey.

Karen Minyard and Glenn Landers were featured in the Athens Banner-Herald article “Health care changes can improve public health, speaker says” on October 3, 2013.

The Georgia Health Policy Center was mentioned in the Atlanta Magazine article “Grady CEO John Haupert on Obamacare, Medicaid, and the value of prevention” on October 4, 2013.

Karen Minyard was mentioned in the Forsyth County News article “Summit focusing on health care act” on October 9, 2013.

Karen Minyard was featured in the Forsyth County News article “Summit addresses health care act” on October 17, 2013.

Karen Minyard was mentioned in the North Fulton article “Health care law makes employers rethink business plans” on October 18, 2013.

Karen Minyard was featured in the Atlanta Business Chronicle article “Women should benefit under ACA implementation” on October 18, 2013.

The Georgia Health Policy Center was mentioned in the Atlanta Business Chronicle article “Regional collaborative targets health-care improvement” on November 1, 2013.
NEW STAFF AND PROMOTIONS

Kimberly Bass was promoted to Project Coordinator.

Jane Branscomb was promoted to Senior Research Associate.

Evan Cole was hired as an Associate Project Director.

Ann DiGirolamo was hired as a Senior Research Associate.

Dame Epiphane was promoted to Project Coordinator.

Becca Fink was hired as a Communications and Marketing Specialist.

Elizabeth Fuller was promoted to Associate Project Director.

Kristi Fuller was promoted to Senior Research Associate.

Melissa C. Haberlen was hired as an Attorney and Research Associate II.

Attiyya Mujahid was hired as a Knowledge Management Specialist.
GEORGIA HEALTH POLICY CENTER STAFF

Karen J. Minyard, Ph.D.  Executive Director
Tanisa Adimu  Senior Research Associate
Kimberly Bass  Project Coordinator
David Bolt  Research Associate I
Jane Branscomb  Senior Research Associate
Robyn Bussey  Research Associate II
John Butts  Research Associate II
Rachel Campos  Research Associate II
Evan Cole  Associate Project Director
Cindy Clark Davis  Assistant Director, Business Operations
Ann DiGirolamo  Senior Research Associate
Jimmy Dills  Research Associate II
Cina Draper  Administrative Assistant
Dame Epiphane  Project Coordinator
Deana Farmer  Senior Research Associate
Rachel Ferencik  Senior Research Associate
Becca Fink  Communications and Marketing Specialist
Elizabeth Fuller  Associate Project Director
Kristi Fuller  Senior Research Associate
Sacha Gayle  Administrative Assistant
Amy Glass  Project Director
Lillian Haley  Research Associate II
Melissa Haberlen  Research Associate II
Liz Imperiale  Assistant Director, Communications and Marketing
Libby Kauss  Research Associate I
Mohammad Khalaf  Research Associate II
Debra Kibbe  Senior Research Associate
Glenn M. Landers  Associate Project Director
Susan McLaren  Research Associate II
Attiyya Mujahid  Knowledge Management Specialist
Chris Parker  Associate Project Director
Tamanna Patel  Research Associate II
Mary Ann Phillips  Associate Project Director
Amanda Phillips-Martinez  Senior Research Associate
Annette Pope  Associate Director
Marketta Powers  Business Affairs Coordinator
Astrid Prudent  Research Associate II
Brittney Romanson  Research Associate I
Michelle Rushing  Research Associate II
Angie Snyder  Research Assistant Professor
Beverly Tyler  Associate Project Director
Cynthia Williams  Research Associate II
Mei Zhou  Senior Research Associate