



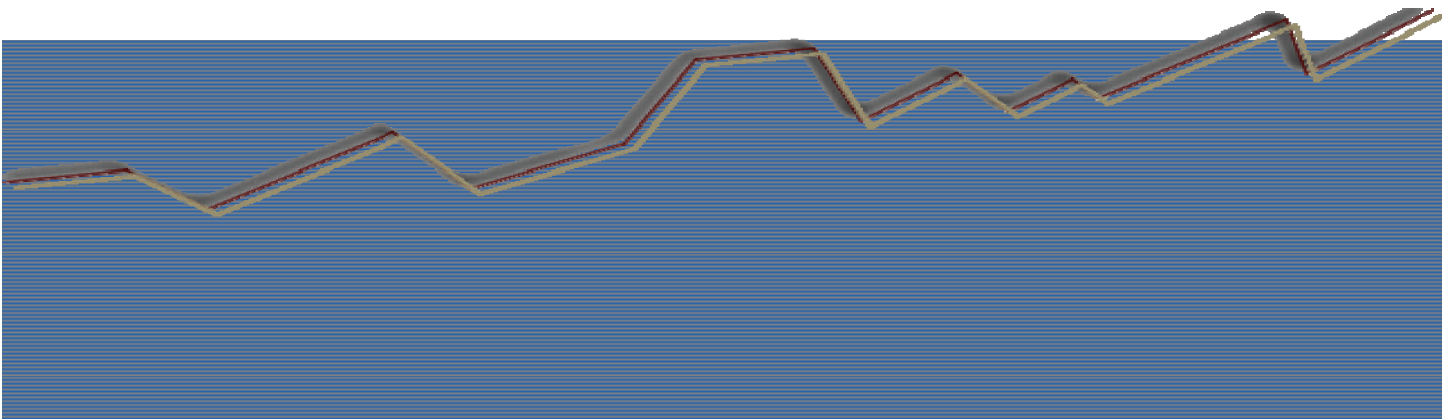
# GEORGIA IN PERSPECTIVE

## 2011

# Healthy Georgia

Statistics, Trends,  
Facts & Figures

**OPB** GOVERNOR'S OFFICE  
*of* PLANNING & BUDGET





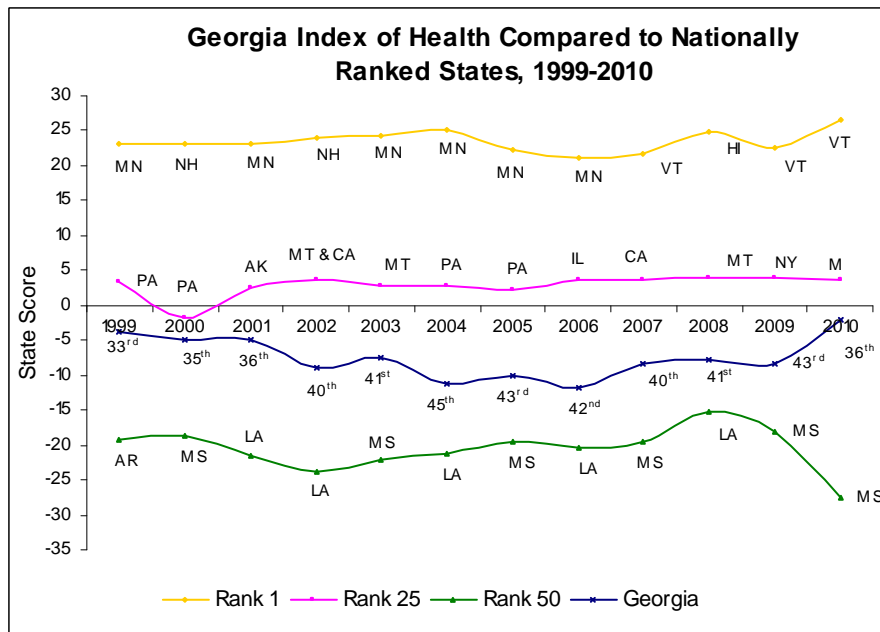


*Georgia has successfully increased access for the uninsured and underserved in Georgia through its safety net clinics. Georgia invested \$8.15 million in state funds to expand Safety Net Clinics throughout the state and received \$20.2 million from the federal government.*

## INDICATORS

Health Status of Georgians	26
Oral Health	27
Insurance Status	28
Georgia Physicians and Safety Net Clinics	29
Emergency Room Utilization	30
Mental Health	31
Vaccinations	32
Teen Birth Rate and Low Birthweight Babies	33
Obesity	34
Smoking	35
Diabetes and Cardiovascular Disease	36
Cancer Screenings	37
Cancer Mortality	38
HIV/AIDS and Pneumonia Mortality	40
Georgia Trauma Network	41

# Health Status of Georgians



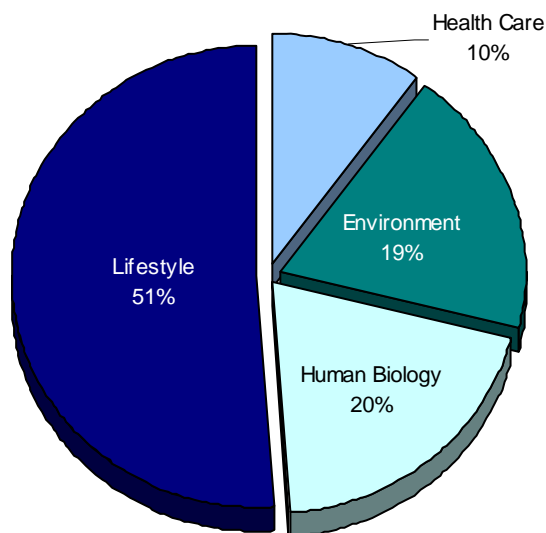
Source: United Health Foundation, America's Health Rankings 2009

- America's Health Rankings™ combines individual measures of each of the determinants (personal behaviors, clinical care, community environment and public and health policy) into one comprehensive measure of the state's health.
- In 2010, Georgia's health ranking among the states increased to 36<sup>th</sup> compared to 43<sup>rd</sup> in 2009. The state's strengths include low prevalence of binge drinking, and few mental and physical health days lost per month.

Note: Scores indicate the percentage a state is above or below the national norm. For example, a state with a score of 20 is 20% above the national average for that component. A negative score means the state is below the national average.

- According to the Centers for Disease Control and Prevention, life style choices have the greatest impact on a person's health.
- Georgia ranks 28<sup>th</sup> among the states on the percentage of adults participating in exercise (75.7%), compared to the national average of 76.3%, according to the Centers for Disease Control and Prevention.
- Over the past decade the percentage of adults in Georgia reporting their health as either excellent or very good declined from 62.3% in 1997 to 53.0% in 2009.

## Factors Influencing Health Status

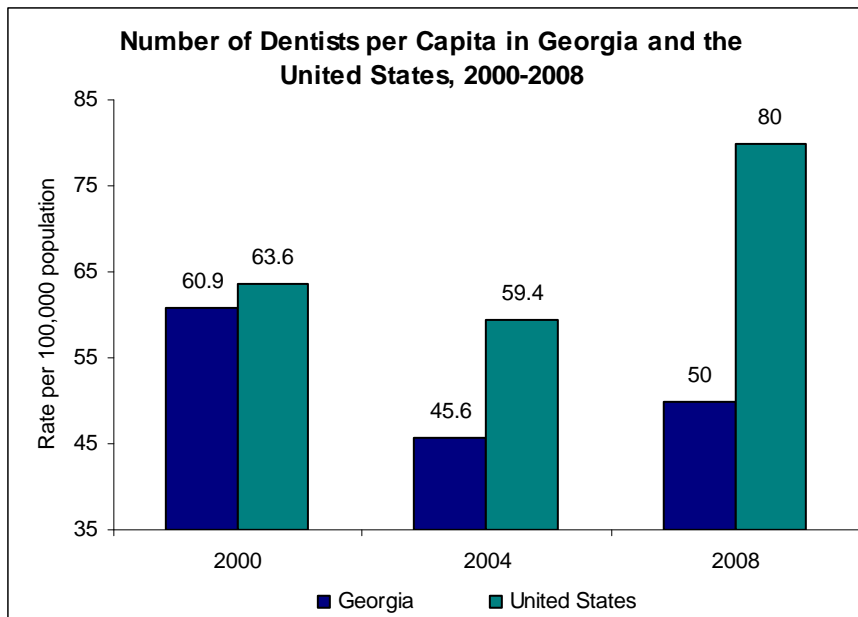


- Environmental factors impacting health include housing, access to food, income distribution, transportation means, and racial disparities, as well as physical conditions such as air quality.
- Lifestyle factors include behavioral risk factors such as smoking, obesity, stress, nutrition, blood pressure, and alcohol and drug use.
- Health care factors include insurance status, prenatal care, immunizations and dental care.

Source: Georgia Health Policy Center, Georgia State University and National Center for Chronic Disease Prevention & Health Promotion

# A HEALTHIER GEORGIA

- Between 2000 and 2008, the number of dentists per capita in Georgia decreased by 17.9%.
- The Medical College of Georgia, School of Dentistry is the only dental school in Georgia. The most recent class graduated 56 dentists.
- Georgia was one of 16 states to receive federal funding for FY 2009 from the CDC to improve basic state oral health services. The goal was to strengthen state-based public health programs that are critical to oral health.

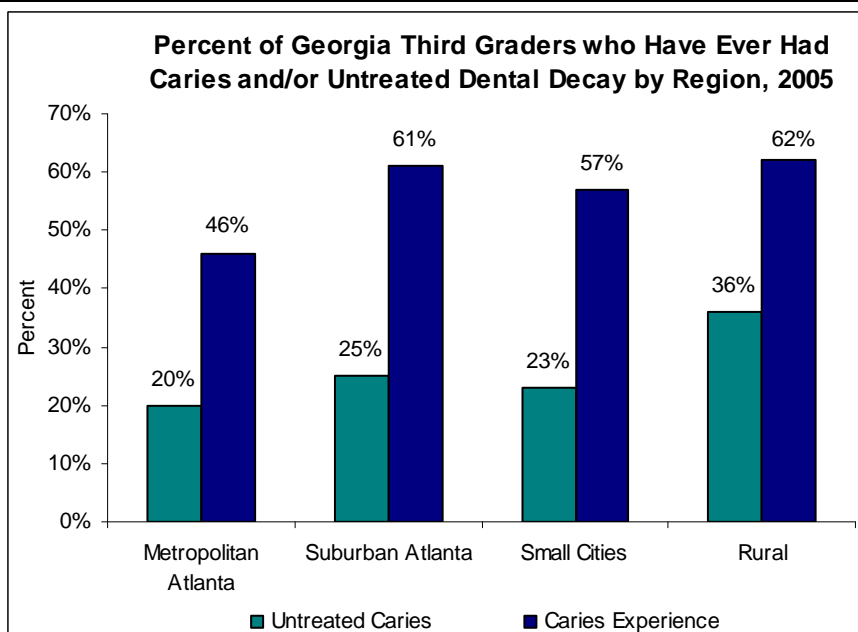


Source: Health Resources and Services Administration and Kaiser Family Foundation, State Health Facts

- Over the last 30 years, 85% of graduates from Georgia's dental program have remained in Georgia to practice.
- According to the American Dental Association, Georgia is one of only 10 states that require a dental exam before children start school.
- Dental disease places children at risk for expensive chronic diseases such as cardiovascular disease and diabetes. Maternal dental problems can lead to increased risk of low birth weight in infants.
- Dental sealants help prevent caries (dental decay) in risk groups and cost approximately one-third (\$27) the cost of an average filling (\$73).

Oral Health of Georgia's Children: Results from the 2005 Georgia Third Grade Oral Health Survey:

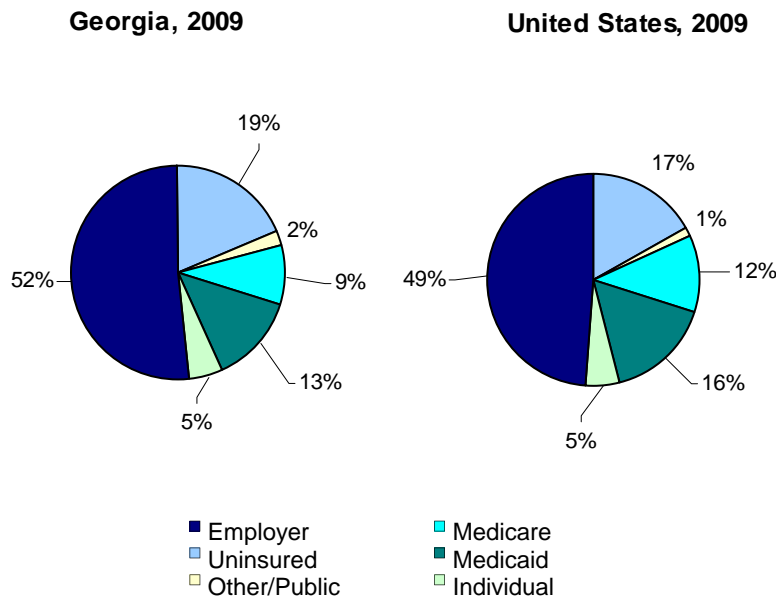
- 1 in 2 (56%) 3<sup>rd</sup> grade children in Georgia have caries (dental decay) experience.
- 1 in 4 (27%) 3<sup>rd</sup> grade children in Georgia have untreated dental decay.
- Children from rural areas and suburban Atlanta are most likely to have caries experience.
- Only Metropolitan Atlanta (20%) met the Healthy People 2010 objective for untreated dental decay.



Source: Georgia Department of Community Health, Division of Public Health

# Insurance Status

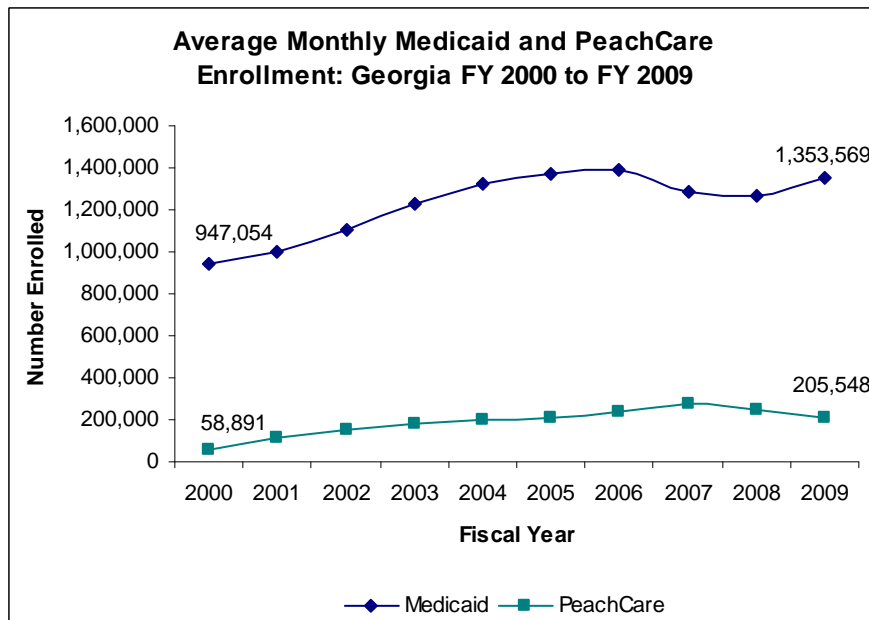
## Health Insurance Coverage: 2009



- Approximately 1.8 million (19%) Georgians are uninsured, ranking Georgia 7<sup>th</sup> among the states for the highest percentage of uninsured.
- More than half of all Georgians (52%) have employer sponsored health insurance coverage, slightly higher than the national average (49%).
- The cost of employer based health insurance premiums increased 131% between 1999 and 2009.

Source: Kaiser Family Foundation, State Health Facts

- The number of Georgians covered by Medicaid increased by 9% between June 2008 and June 2009.
- Nearly 40% of the uninsured population in the United States reside in households that earn \$50,000 or more annually (U.S. Census Bureau).



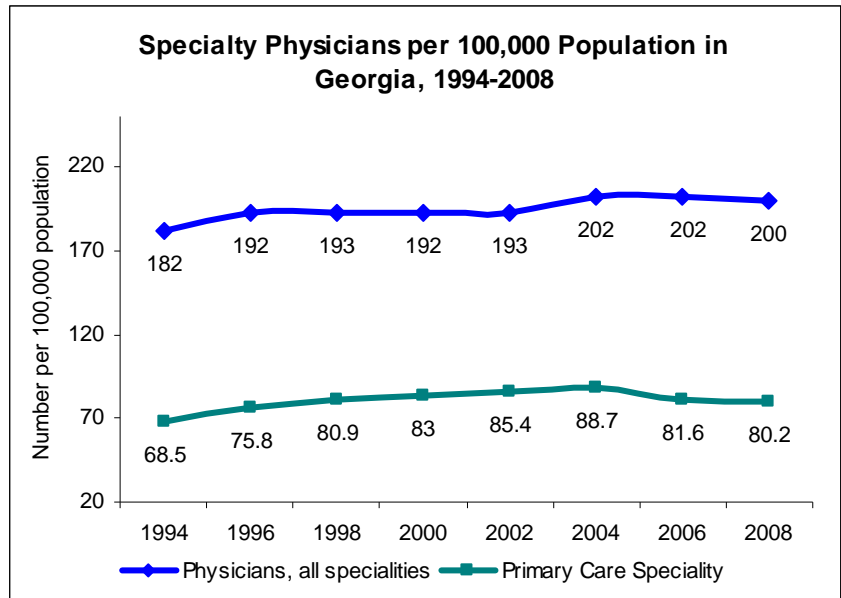
- Average monthly Medicaid enrollment in Georgia increased 43% between FY 2000 and FY 2009, from 947,054 to 1,353,569.
- Enrollment in PeachCare, Georgia's Children's Health Insurance Program (CHIP) enrollment increased each year during the past decade, until 2008 when enrollment began to decrease. Enrollment declined from 273,659 in FY 2007 to 205,548 in FY 2009.
- Georgia ranks 15th among the states with respect to the highest number of children enrolled in Medicaid/CHIP.

Source: Georgia Department of Community Health, Kaiser State Health Facts

## A HEALTHIER GEORGIA

# Georgia Physicians and Safety Net Clinics

- Georgia ranked 40<sup>th</sup> in the nation with respect to the number of physicians per capita in 2009; a decline from 38<sup>th</sup> in 2002, according to American Medical Association.
- Primary care specialties include pediatrics, internal medicine, family medicine and OB/GYN.
- The rate of pediatricians per 100,000 population was nearly two times greater in urban areas than in rural areas in 2006.

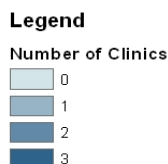
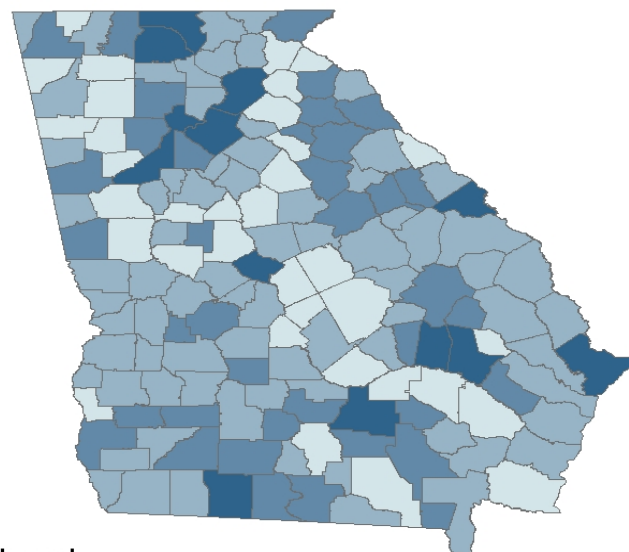


Note: Data for 2008 is provisional.

Source: Georgia Board of Physicians Workforce, Kaiser State Health Facts

## Number of Safety Net Clinics Georgia Counties: 2010

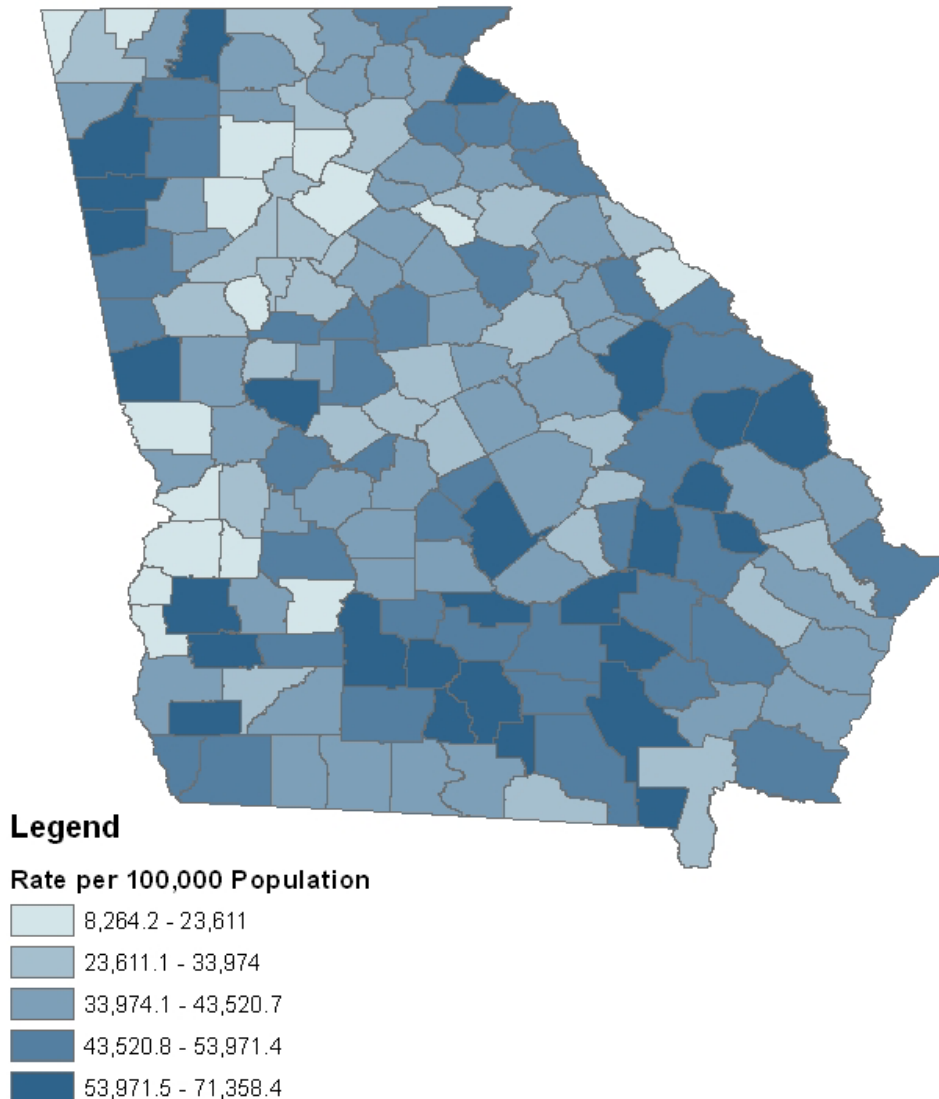
- Safety net clinics include the following in Georgia: Federally Qualified Health Centers, Free Clinics, Georgia Farm Worker Health Programs, Georgia Volunteer Health Care Program, Rural Health Clinics and the Rural Health Safety Net Project.
- Nearly 78% of counties in Georgia have some type of safety net clinic; however, 35 counties (22%) have no safety net clinic available to serve its residents.
- After investing \$8.15 million in state funds for safety net clinics between FY 2006 and FY 2009, Georgia received \$20.2 million from the federal government.



Source: Georgia Department of Community Health

# Emergency Room Utilization

## Emergency Room Visits Per 100,000 Population Georgia Counties: 2008

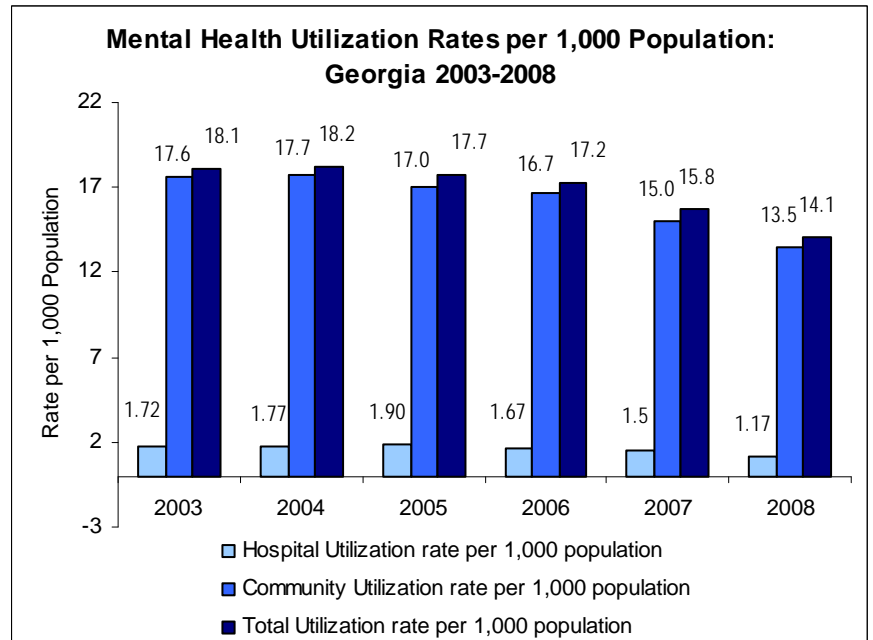


Source: Georgia Department of Community Health, Division of Public Health, OASIS

- Georgia ranks 20<sup>th</sup> among the states with respect to the lowest number of emergency room visits per 100,000 population.
- According to the Medical Expenditure Panel Survey (MEPS), the average emergency room visit in the U.S. cost \$1,038 in 2007.
- One out of four hospital emergency rooms (26.1%) in Georgia is owned by state or local government compared to the national average of 16.6%, resulting in a ranking of 12<sup>th</sup> among the states with the highest proportion of ER rooms owned by government agencies.



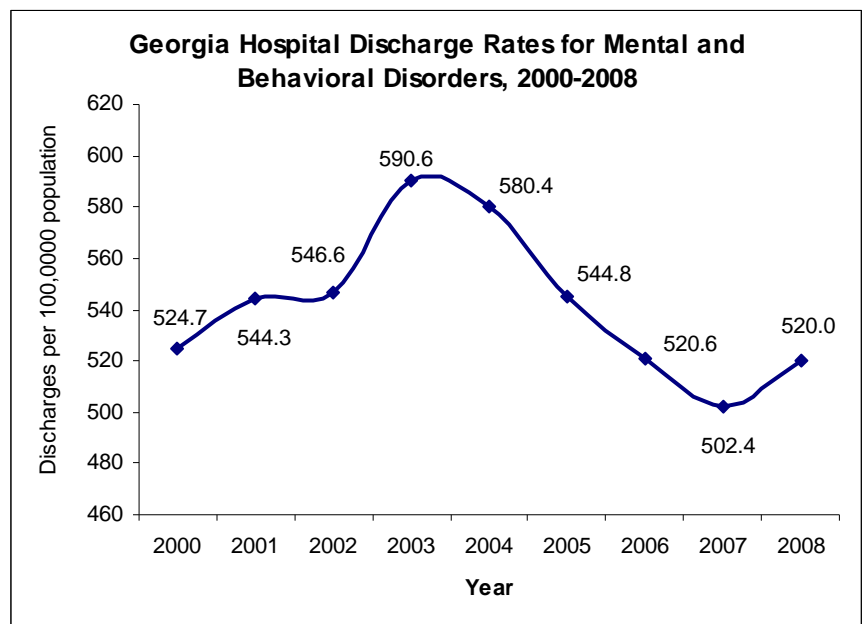
- The rate at which Georgians used mental health services between 2003 and 2008 declined from 18.13 per 1,000 residents to 14.08.
- The rate at which hospital based mental health services were used by state residents declined 32%, from 1.7 per 1,000 to 1.2 per 1,000 between 2003 and 2008.
- The state of Georgia instituted the Georgia Crisis and Access Line in 2006 in order to centralize and improve access to mental health services.



Source: SAMSHA Mental Health Community Services Block Grant Uniform Report System

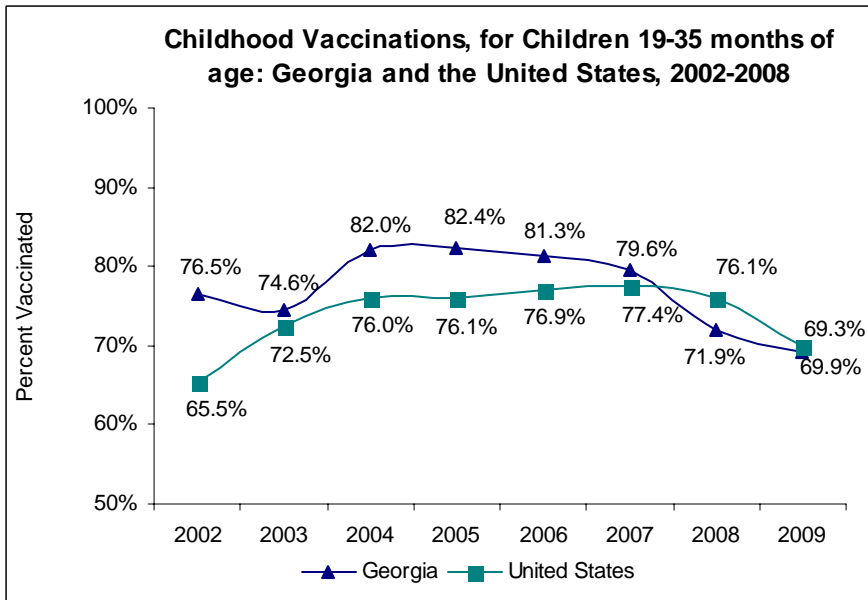
- In 2008, 26% of mental health patients were re-admitted to a state hospital within 180 days, higher than the national average of 21%.
- 18.8% of families who have children with special health care needs pay \$1,000 or more out of pocket for medical expenses annually and 23.8% have conditions that require a family member to reduce work hours or leave the labor force.

- Georgia's hospitalization and discharge rate of patients with mental health disorders peaked in 2003 at 590.6 per 100,000 population, followed by a steady decline until 2008.
- The National Institute of Mental Health estimates that approximately 1 in 4 adults suffer from a diagnosable mental health disorder each year, including depression.
- Georgia provides crisis services, outpatient services, community support services, residential support and day and employment services.



Source: Georgia Department of Community Health, Division of Public Health, OASIS

# Vaccinations: Children and Adults

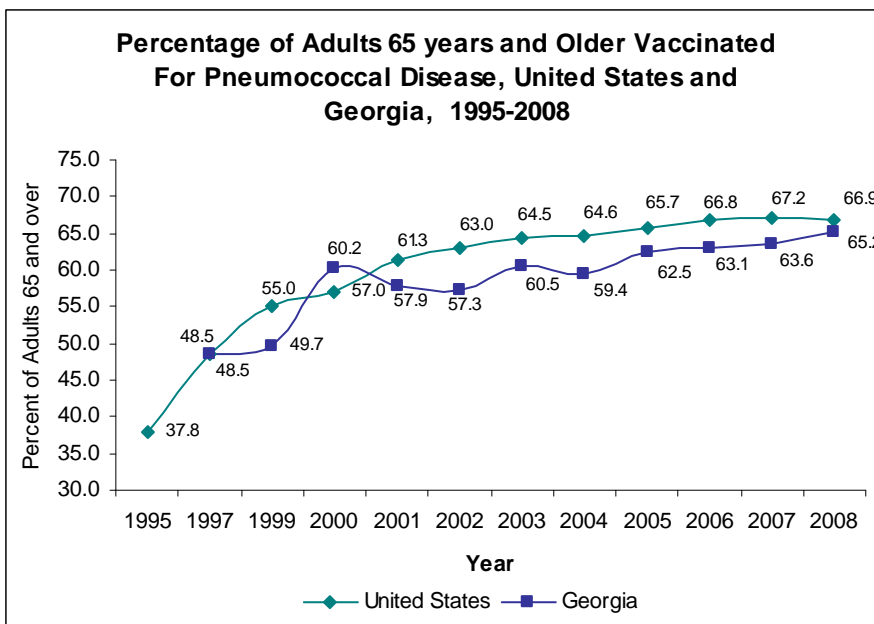


- All children attending day care or school are required to be vaccinated against: diphtheria, polio, measles, mumps, tetanus and rubella, Hib, Hepatitis B, varicella, as well as pneumonia and pertussis.
- Georgia ranks 36<sup>th</sup> among the states for percentage of children 19-35 months of age who are vaccinated.
- Georgia ranks 5<sup>th</sup> among the six southeast states for the percentage of children vaccinated; this is a decline from 1<sup>st</sup> over the past few years.

Note: The methodology for reporting Hib vaccination status was revised in 2009, while at the same time there was a national shortage of available Hib vaccine. These factors impacted vaccination rates at the state and national levels.

Source: Centers for Disease Control and Prevention, National Immunization Survey

- To overcome barriers to vaccination, Georgia's public health departments remind parents when their children's vaccinations are due; offer extended clinic hours; provide vaccinations on a walk-in basis; and distribute educational materials on immunization.
- Infections caused by pneumococci are a major cause of death and disease globally. Pneumococcal vaccinations in Georgia are given year round and usually only has to be administered once after the age of 65 years. Some adults with weakened immune systems may receive more than one dose over their lifetime.

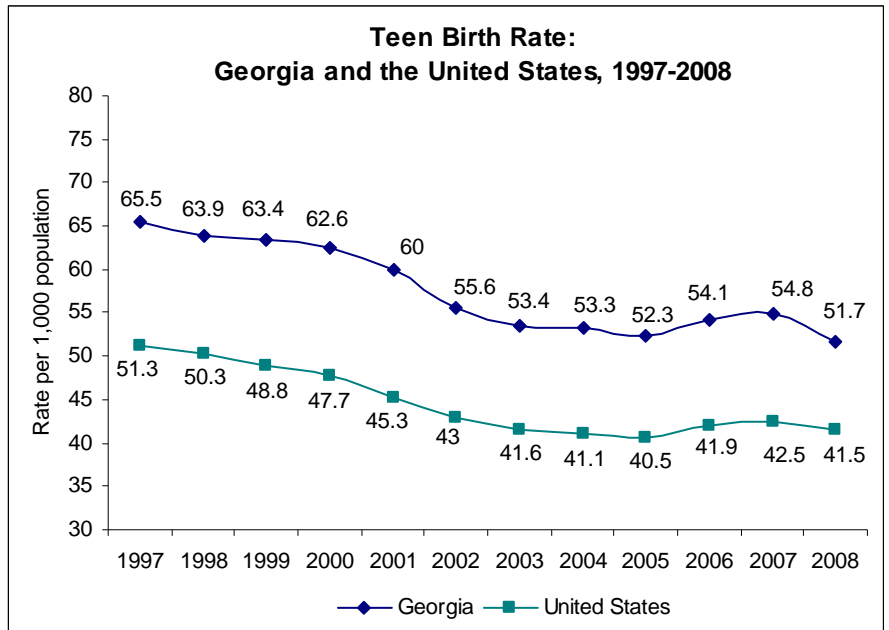


- Pneumonia and meningitis are the most common manifestations of invasive pneumococcal disease. Bacteria spread in the respiratory tract to cause ear infection, sinusitis or recurrent bronchitis (World Health Organization).
- The highest rate of pneumococcal disease occurs in the elderly and young children and affects those suffering from chronic conditions and weakened immune systems.
- 65.2% of elderly Georgians were vaccinated against pneumococcal disease in 2008.

Source: Georgia Department of Community Health, Division of Public Health, Annual Health Status Measures 2008 and CDC WONDER

# Teen Birth Rate and Low Birthweight Babies

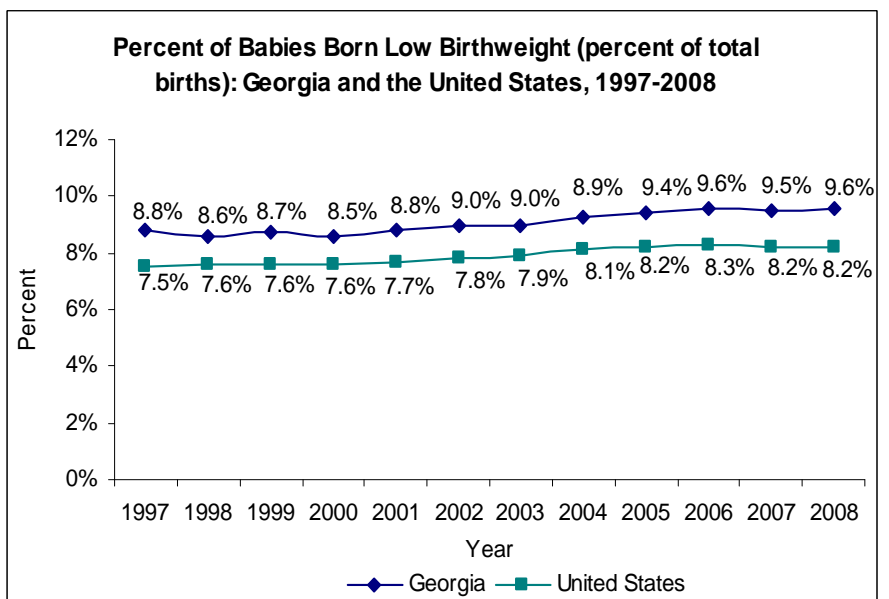
- In 2007, Georgia ranked 11<sup>th</sup> nationally in the rate of teen births and had the second highest rate among its southeast neighbors – Tennessee had the highest.
- Georgia's teen birth rate is consistently higher compared to the national rate.
- Georgia's teen birth rate steadily decreased between 1997 and 2005. After increases in 2006 and 2007, the teen birth rate again registered a decrease in 2008.



Source: Georgia Department of Community Health, Division of Public Health, OASIS and CDC National Center for Health Statistics

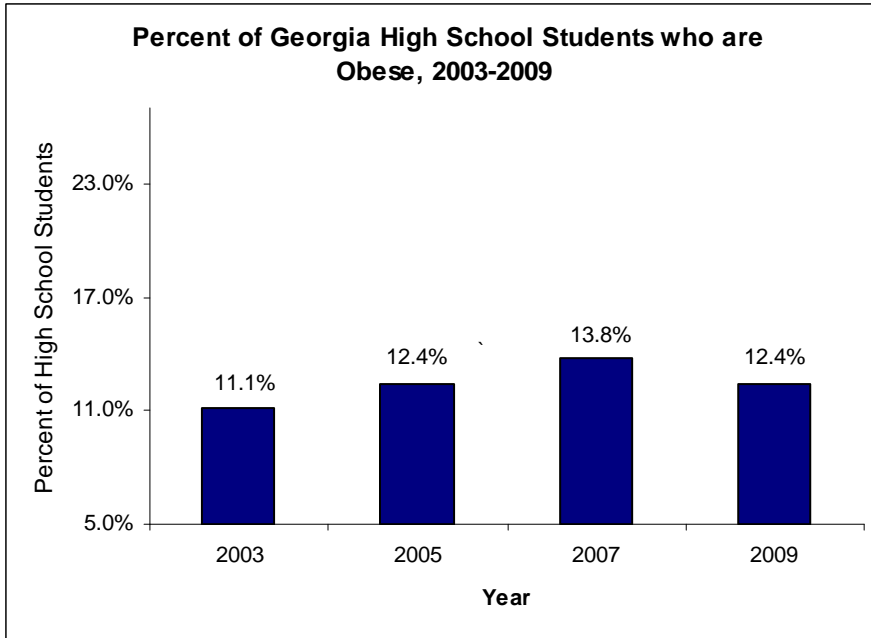
- Children born to teen mothers are more likely to be born preterm and low birthweight, as well as to be born into families with limited educational and economic resources (Kids Count Data Book 2010).
- Educating expectant mothers about smoking cessation during pregnancy, prenatal care, eating right and appropriate weight gain can help deter low birthweight. Socioeconomic factors must also be considered; low birthweight babies and teen mothers are more likely to use Medicaid and state services.

- Low birthweight babies weigh less than 5 pounds, 8 ounces and face an increased risk of death, long-term disability and developmental delays.
- Georgia's low birthweight rate increased to 9.4% in 2005 and has remained fairly stable since that year.
- Georgia's percentage of infants born at low birthweight has exceeded the national average each year during the past decade.



Source: Georgia Department of Community Health, Division of Public Health, Office of Vital Records, CDC National Center for Health Statistics

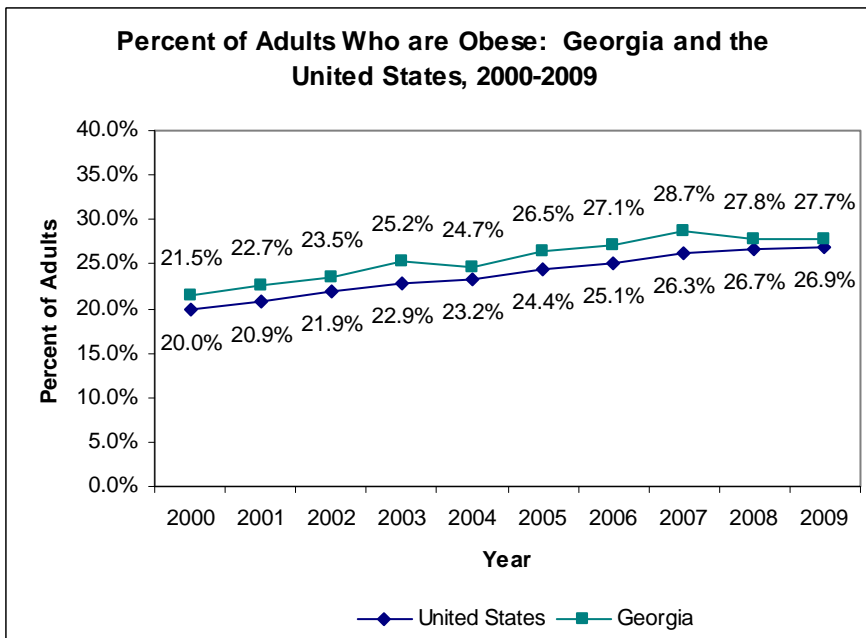
# Obesity: Children, Youth and Adults



- A child who is classified as obese has a body mass index (BMI) for age and gender that is greater than or equal to the 95th percentile.
- In 2009, 12.4% of Georgia's high school students were obese.
- Until the early 1990's, Type II diabetes was rarely diagnosed in children; today nearly half of the newly diagnosed patients with Type II diabetes are children.
- In 2009, one out of seven Georgia middle school students (15%) were obese.

Source: CDC, Youth Risk Behavior Surveillance System and DCH, Division of Public Health

- Many factors, including poor diet and physical inactivity have contributed to the rise in both adult and youth obesity.
- The Department of Community Health, Division of Public Health estimates the annual cost of obesity in Georgia at \$2.1 billion, or approximately \$250 per Georgian each year.



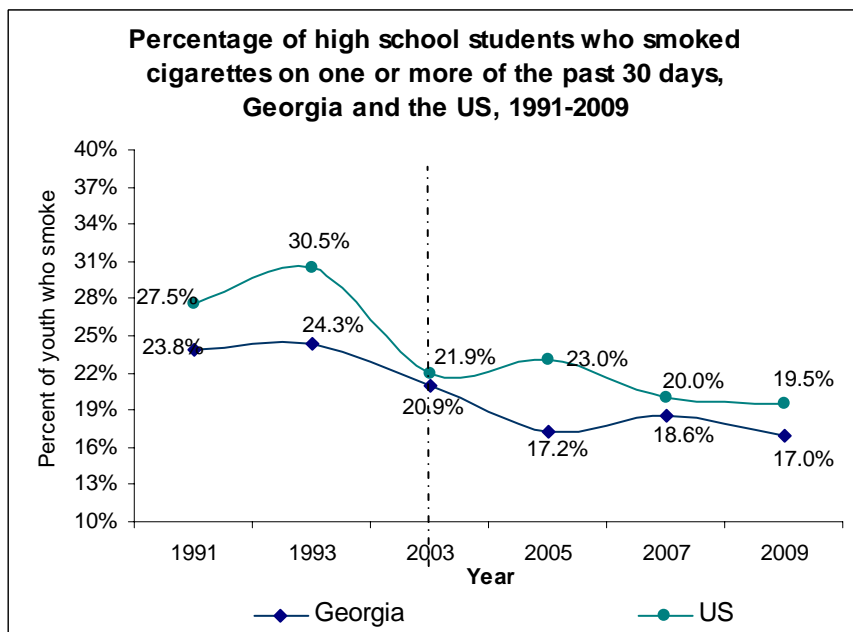
- Adult obesity is defined by a body mass index (BMI) of 30 or greater.
- Obesity increases the risk of many diseases and health conditions, including hypertension, type 2 diabetes, coronary heart disease, stroke, osteoarthritis, dyslipidemia and some cancers.
- Georgia was ranked as the 23rd most obese state in the nation in 2009.

Source: CDC Behavioral Risk Factor Surveillance System, Georgia Behavioral Risk Factor Surveillance System

# Smoking in Georgia: Youth and Adults

- Approximately 19,000 (5%) of middle school students and 72,000 (17%) high school students in Georgia smoke cigarettes.
- The percentage of students who have tried smoking has declined 32% among middle school students and 18% among high school students since 2003.
- Tobacco use in adolescence is associated with other risky behaviors including sexual behavior and alcohol and drug use.

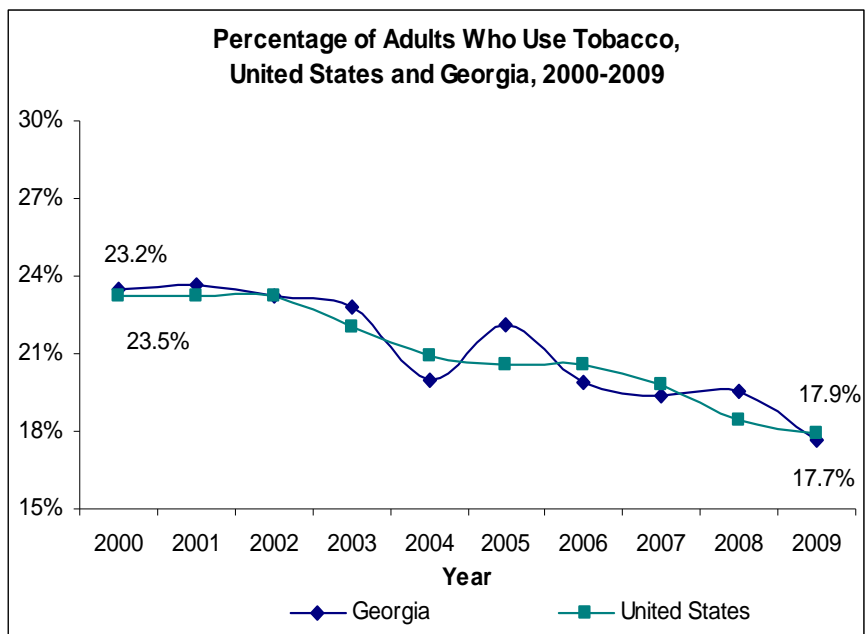
Note: The dashed line in the chart indicates the gap in years for which Georgia did not collect data for the national survey (between 1993 and 2003).



Source: Georgia Department of Community Health, Division of Public Health, Office of Vital Records and CDC National Youth Risk Behavioral Factor Surveillance System

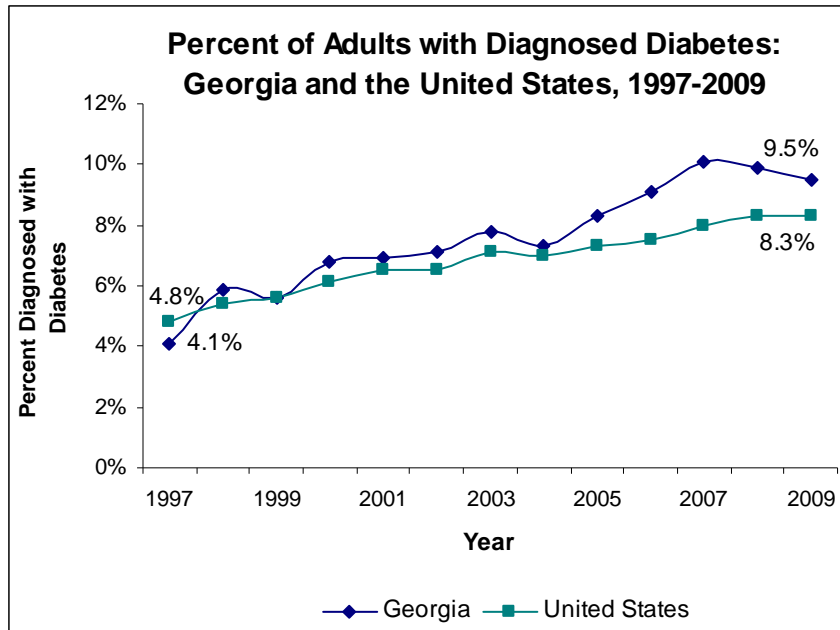
- In 2005, Georgia banned smoking in all public places, except bars or restaurants that do not serve children, mandated separate hotel rooms for smokers, and required workplaces to have separate ventilation for smokers.
- 900,000 adult smokers in Georgia do not have health insurance, according to the Department of Community Health.
- Adult smokers lose an average of 16 years of life compared to adult non-smokers and 1 out of 6 Georgians die annually from smoking related illnesses.

- Approximately 1.4 million adults in Georgia smoke cigarettes.
- Despite some fluctuations, the percentage of adults who use tobacco has declined since 2000 both nationally and in Georgia.
- The Department of Community Health estimates the health-care costs associated with smoking among Georgia adults at \$1.8 billion.



Source: Georgia Department of Community Health, Division of Public Health and CDC Georgia Behavioral Risk Factor Surveillance System

# Diabetes and Cardiovascular Disease

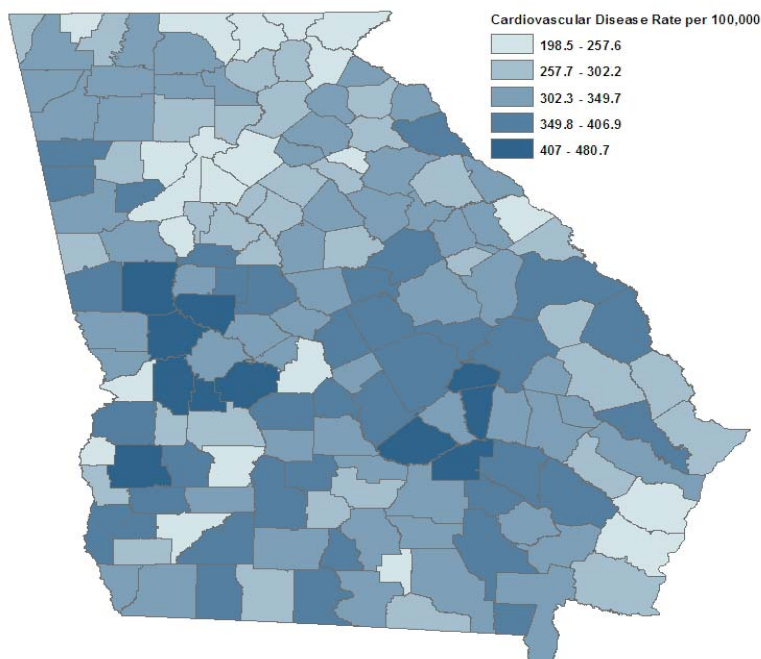


Source: CDC Behavioral Risk Factor Surveillance System

- In 2009, 9.5% of Georgia adults were diabetic compared to 8.3% nationwide.
- Over the past decade the percentage of Americans with diabetes nearly doubled, from 4.8% in 1997 to 8.3% in 2009.
- There was a slight decline in the number of adult Georgians with diabetes, from the high of 10.1% in 2007 to 9.5% in 2009.
- Diabetes is the leading cause of blindness and kidney failure. Stroke and heart disease are the two leading causes of death in patients with diabetes.

- Diabetes is a disease with serious complications and can lead to premature death. However, those living with the disease can control the disease and reverse the course of the disease through proper nutrition, regular physical activity and well-managed treatment plans.
- Like diabetes, cardiovascular disease can be moderated by living a healthier life and understanding what risk factors influence an individual's likelihood of developing the disease.

**Major Cardiovascular Disease  
Age-Adjusted Death Rate per 100,000 Population:  
Georgia Counties: 2005-2007**

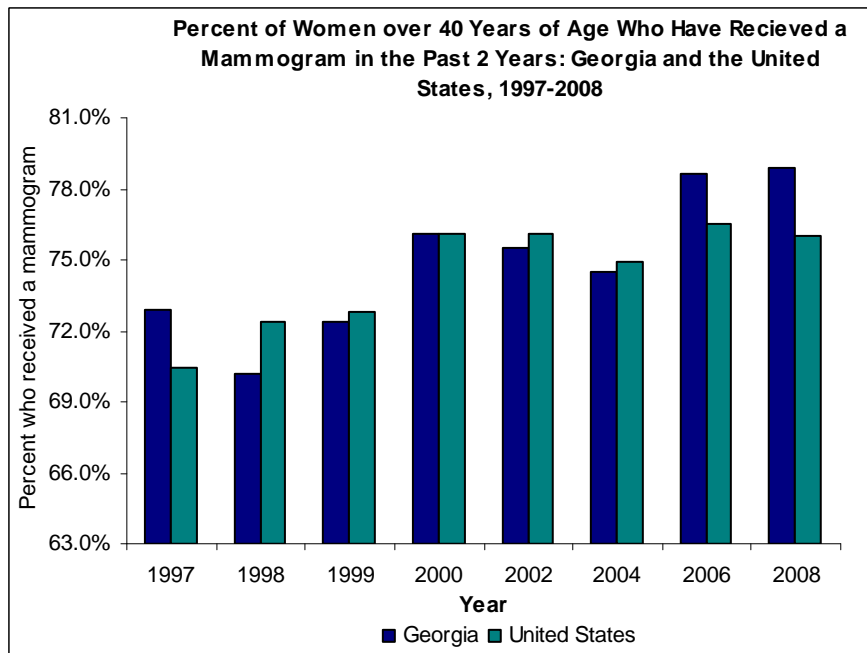


- Cardiovascular disease (CVD) includes all diseases of the heart and blood vessels, including ischemic heart disease, stroke, congestive heart failure, hypertensive disease and atherosclerosis.
- Modifiable risk factors for CVD include: smoking, poor diet, lack of physical activity, obesity, high blood pressure, high cholesterol and diabetes.
- Georgia recorded 65,016 major cardiovascular deaths during the period from 2005 to 2007, representing one third (32.5%) of all deaths in the state.
- CVD death rate increases with age, however, 1 in 4 persons who died from CVD in 2006 was less than 65 years of age.

Source: Georgia Department of Community Health, Division of Public Health, Office of Vital Records

## Breast and Cervical Cancer Screenings

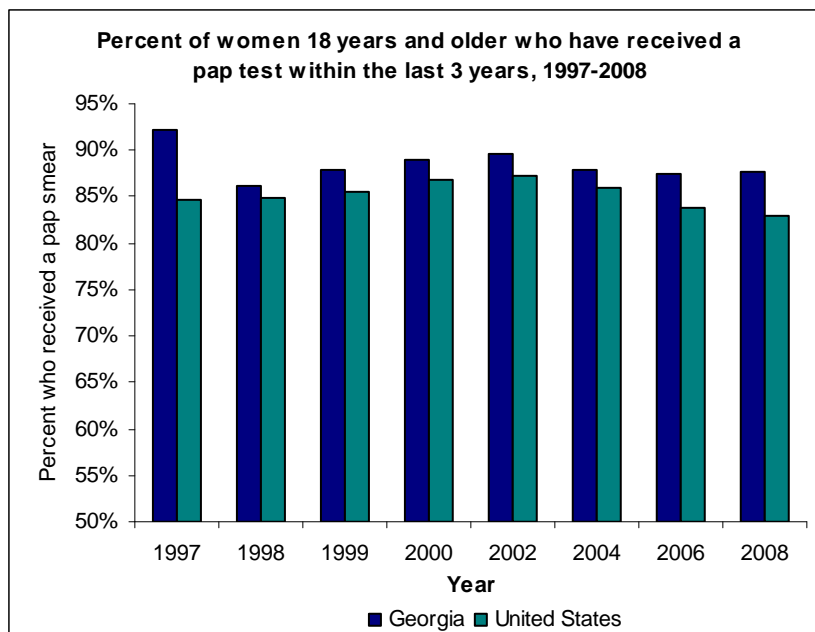
- Mammograms screen for breast cancer and allow for early detection. When detected early, especially when the woman exhibits no other signs or symptoms of the cancer, her survival rate increases by as much as 30%.
- Mammograms are recommended biennially for women over 40 years of age and annually for those over the age of 50.
- Georgia women were screened at a slightly higher rate (78.9%) than the U.S. average (76.0%) in 2008.



Source: CDC Behavioral Risk Factor Surveillance System

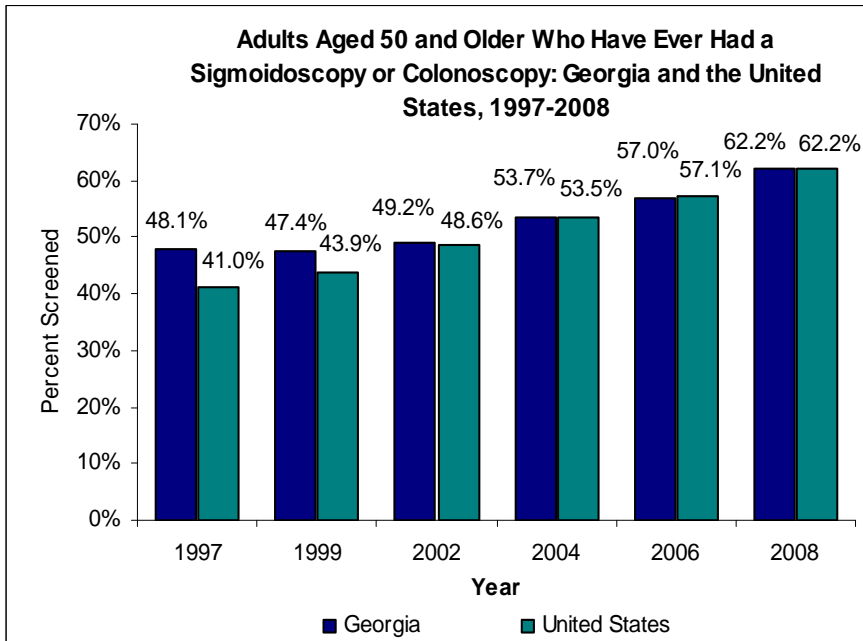
- Breast cancer is the second leading cancer killer of women, after lung cancer.
- The Human Papillomavirus (HPV) is the primary risk factor for cervical cancer, however, a woman's age and genetic factors also play a role. According the Centers for Disease Control, in 2009, 44.3% of 13-17 year olds in the United States had received at least one shot in the three shot series for HPV vaccination.

- Pap tests primarily detect cervical cancer; and like mammograms early detection improves survival rates.
- Nationwide, in 2008, 82.9% of women 18 years and older had a pap test within the last three years.
- Georgia ranked 1<sup>st</sup> among the 50 states with respect to the percentage of women having a pap test within three years in 2008 (87.6%).



Source: CDC Behavioral Risk Factor Surveillance System

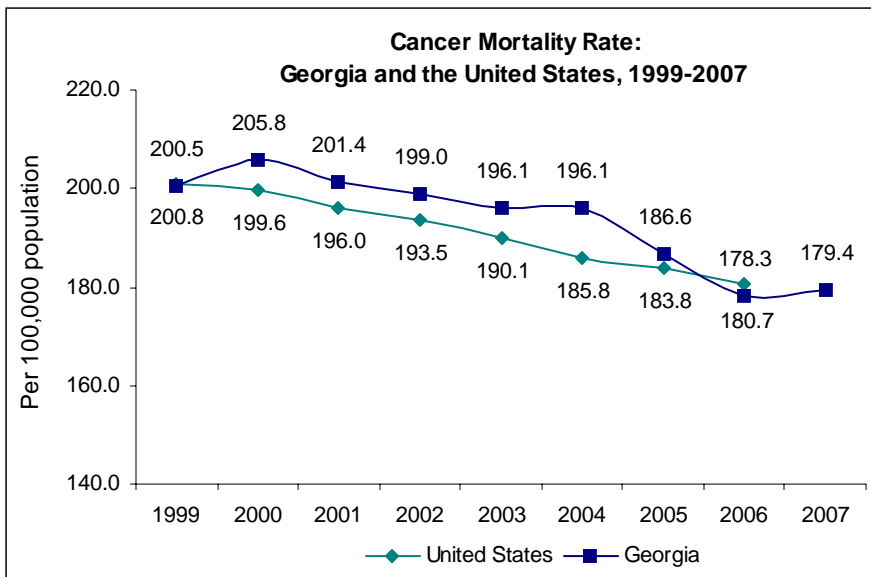
# Colorectal Cancer and Cancer Mortality



- Colorectal cancer screenings are recommended for both men and women over the age of 50.
- Colon cancer is detected through colonoscopy, flexible sigmoidoscopy and fecal occult blood test. Polyps in the colon detected by these tests can be removed and prevent the onset of cancer or allow for earlier, aggressive treatment.
- In men, colorectal cancer is the third most common type of cancer deaths, after lung and prostate cancers.

Source: CDC Behavioral Risk Factor Surveillance System

- It is estimated that as many as 60% of deaths from colorectal cancer could be prevented if all men and women over the age of 50 years were screened routinely for colorectal cancer (CDC).
- Among cancers that affect men and women, colorectal cancer is the second leading cause of cancer-related death in the United States (CDC). In Georgia, cancer is the second leading cause of all deaths; cardiovascular disease is the leading cause.
- The National Institutes of Health estimate that direct medical costs of cancer in 2010 nationwide will be \$20.8 billion.



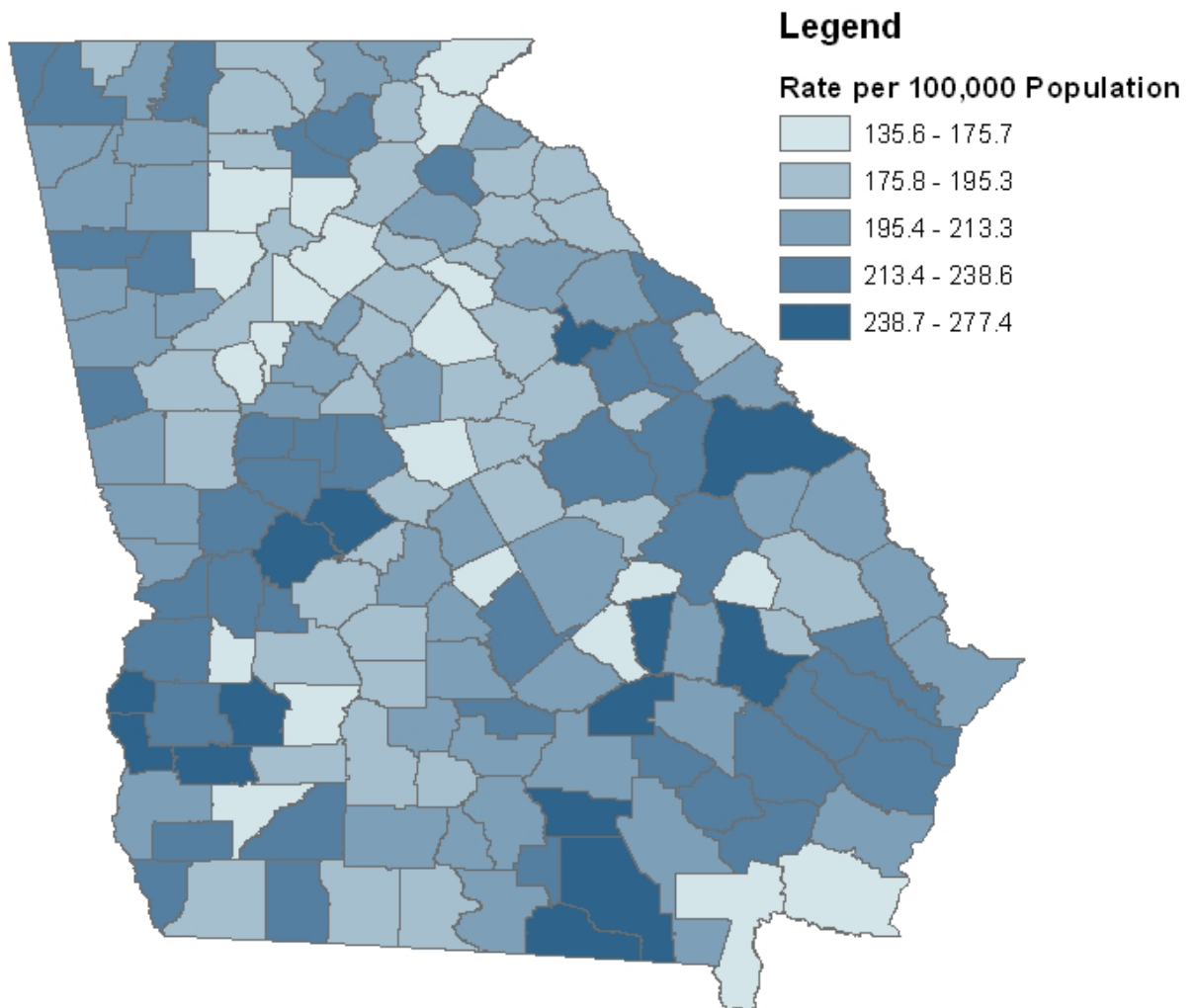
- Cancer mortality rates in Georgia declined each year between 2000 (205.8) and 2006 (178.3).
- The age-adjusted cancer mortality rate among Georgia males (229.2 per 100,000 population) is higher than that for Georgia females (147.5 per 100,000).
- Lung cancer is the leading cause of cancer death among Georgians, with an age-adjusted mortality rate of 53.9 per 100,000 population. This is followed by prostate cancer for males (27.4 per 100,000) and breast cancer for females (22.2 per 100,000).

Source: CDC National Center for Health Statistics and Office of Vital Records

## A HEALTHIER GEORGIA



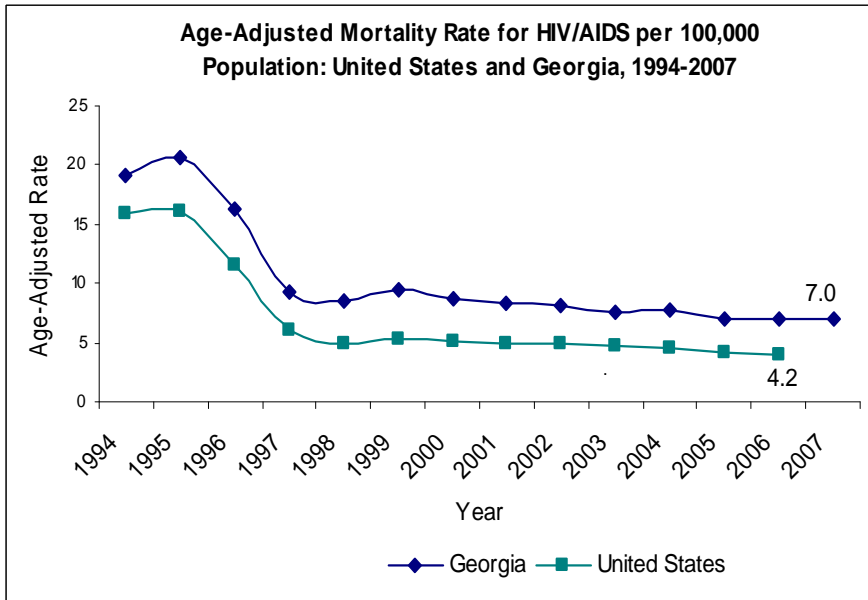
### Five Year Age-Adjusted Cancer Rate Georgia Counties: 2003-2007



Source: Georgia Department of Human Services, Division of Public Health, Office of Vital Records

- During the 5-year period between 2003 and 2007, 71,532 Georgians died of cancer. The cancer mortality rate during this period declined 3.5%, from 161.2 to 155.5 per 100,000 residents (OASIS).
- The highest cancer mortality rates for the period between 2003 and 2007 were recorded in the following counties: Quitman, Taliaferro, Clay, Union, and Townes. Three of the five counties with the highest cancer mortality rates are small communities with fewer than 5,000 residents.

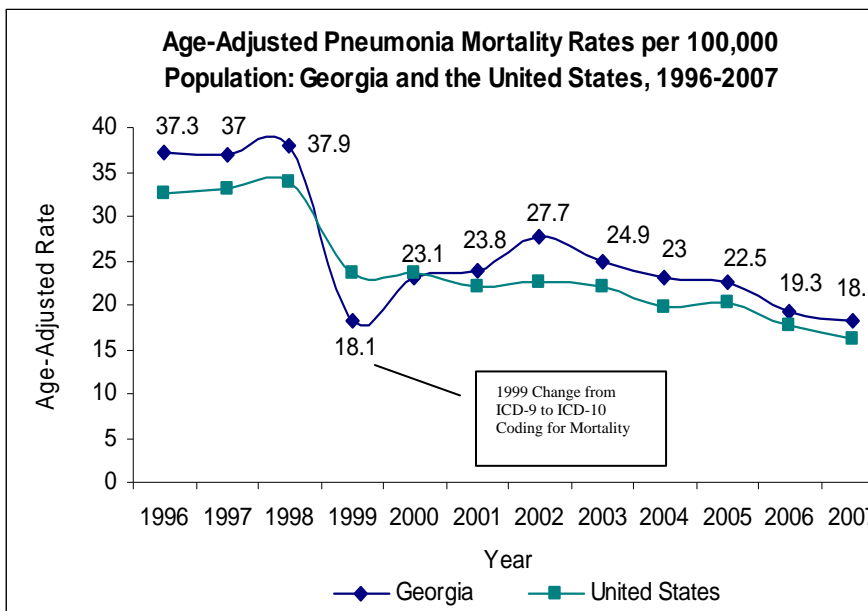
# HIV/AIDS and Pneumonia Mortality



- The human immunodeficiency virus (HIV) affects the immune system, and the acquired immunodeficiency syndrome (AIDS) is the advanced stage of HIV.
- In 2007, there were 20,507 known Georgians living with AIDS. Of those, 76% were male, 24% female. The majority of persons (69%) were 40 years of age and older.
- The number of persons living with AIDS continues to increase each year, resulting in a declining mortality rate. Effective drug treatments and therapies are prolonging the lives of those living with AIDS.

Source: Georgia Department of Community Health, Division of Public Health, Annual Health Status Measures 2008 and CDC WONDER

- Early screening helps detect HIV earlier, prevents the transmission of HIV and allows for initiation of treatment to slow the onset of AIDS.
- High risk behaviors, such as engaging in unprotected sex or intravenous drug use, are associated with the transmission of HIV, along with a host of other sexually transmitted diseases and teen pregnancy.

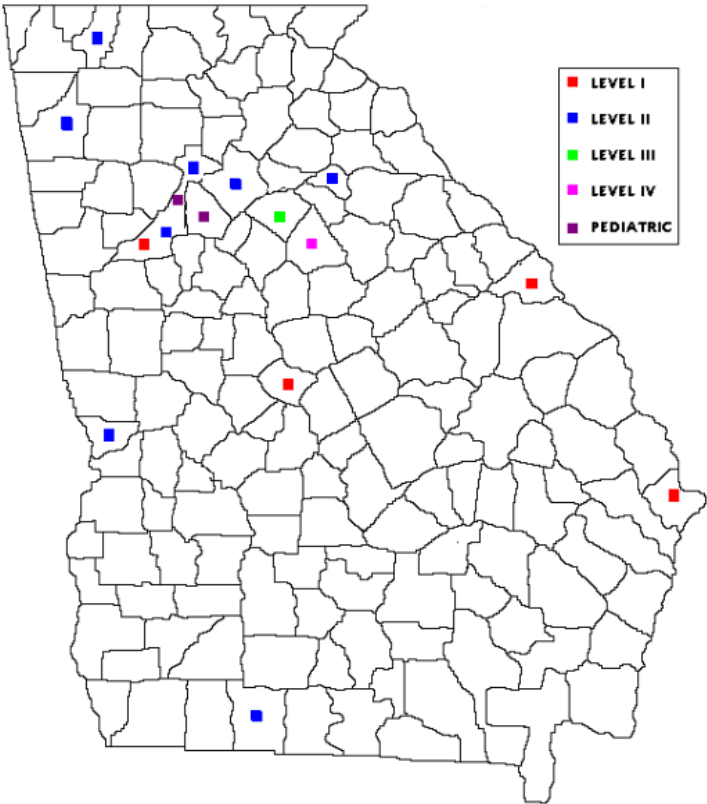


- Georgia's pneumonia mortality rate decreased by 34.7% between 2002 and 2007. During this same period, the flu vaccination coverage rate of elderly Georgians increased by 11%.
- Pneumonia related deaths most often occur among the elderly population, the very young (under the age of 2 years) or in patients with diseases that weaken the immune system, such as AIDS.
- Flu and pneumonia together are the 8<sup>th</sup> leading cause of death in the United States.

Source: Georgia Department of Community Health, Division of Public Health, Annual Health Status Measures 2008 and CDC WONDER

## A HEALTHIER GEORGIA

Georgia Trauma Centers 2010



- Level 1**
- Medical Center of Central Georgia
  - Memorial College of Georgia
  - Memorial Health University Medical Center
  - Grady Memorial Hospital

- Level II**
- Floyd Medical Center
  - North Fulton Regional Hospital
  - Medial Center-Columbus
  - Atlanta Medical Center
  - Athens Regional Center
  - Hamilton Medical Center
  - Gwinnett Medical Center
  - John D. Archbold Memorial Hospital

- Level III**
- Walton Regional Medical Center

- Level IV**
- Morgan Memorial Hospital

- Pediatric**
- Children’s Healthcare of Atlanta-Egleston
  - Children’s Healthcare of Atlanta-Scottish Rite

Trauma Levels	Designation Criteria
I	<ul style="list-style-type: none"> <li>• Full range of clinical services</li> <li>• Specialists on-site 24/7</li> <li>• Trauma education and research</li> <li>• Community outreach</li> <li>• Attached to medical schools</li> </ul>
II	<ul style="list-style-type: none"> <li>• Full range of clinical services</li> <li>• Specialists on-site 24/7</li> </ul>
III	<ul style="list-style-type: none"> <li>• Limited range of clinical services</li> <li>• Specialists on call 24/7; available within 20 minutes</li> </ul>
IV	<ul style="list-style-type: none"> <li>• Ability to stabilize and transfer patients as appropriate</li> </ul>

- In 2007, 45% of traumatic injuries in Georgia were caused by motor vehicle crashes. Other causes include falls (23%), weapons (12%), assault/abuse (6%), and pedestrian accidents (5%). Traumatic injuries include multiple fractures, paralysis, punctured lungs, stab wounds and brain injuries. These types of injuries must be treated at a trauma center as death or the inability to recover may result if not treated within the first hour of injury.
- Georgia’s trauma mortality rate is 20% higher than the national average, which is equivalent to approximately 700 more deaths a year.

