

Top Georgia health care stories of 2018

December 26, 2018 Andy Miller \Georgia Health News

Health care took spotlight in governor's race

Brian Kemp won Georgia's highest office, keeping Republicans in power and supporting the party's longtime opposition to Medicaid expansion in the state. But Democrat Stacey Abrams, who not only endorsed expansion but made it a centerpiece of her campaign, came very close to defeating him. With Georgia's high rate of uninsured, the coverage issue appears far from dead. Kemp supports a proposal to raise the rural hospital tax credit program to \$100 million, though much of his health care agenda remains unknown. Still, there are hints that under his administration, Georgia may develop a "waiver" proposal that could extend coverage to an undetermined number of people without health insurance.

Affordable Care Act: Successes, setbacks and suspense

The year was full of surprises related to the ACA insurance exchange. Two of Georgia's four exchange insurers actually lowered premiums, reversing a trend toward steep increases. And despite the abolition of the Obamacare tax penalty for people who don't get health insurance, as well as a scaled-back federal effort to enroll people, the Georgia exchange almost matched its total enrollment from a year earlier. But just as 2018 wound down, a federal judge in Texas declared that the ACA is unconstitutional now that the tax penalty is gone. (The ACA will continue as usual during the appeals process.) With the long-running battle over the 2010 health law shifting from Congress back to the courts, a quick end seemed far away.

A deadly flu

The influenza season that peaked in early 2018 led to 155 confirmed deaths in Georgia linked to the disease. Yet that figure may not represent the true toll in the state. The CDC said last flu season was the deadliest in at least four decades, with an estimated 80,000 deaths in the nation. It was a worrisome winter for many Georgians, especially those in high-risk categories. Grady Memorial Hospital even opened a mobile ER to handle the overflow at the Atlanta safety-net hospital. And the 2018-2019 flu season has already started with a high incidence rate. In early December 2018, Georgia had the most flu activity of any state.

Rivals braced for battle over regulations

Panels in the Georgia House and Senate studied the state's powerful health care regulatory system, known as certificate of need (CON), and they proposed major changes. Legislation is coming in January 2019 to ease rules around construction of facilities and medical services. CON disputes often pit health system against health system, and community against community, so the stakes are high. The hospital industry is bound to oppose the legislative changes, and the ensuing battle will lead to riveting debate in the General Assembly. In 2018, one major CON conflict was resolved, with Lee County getting the go-ahead to build a new hospital that some in neighboring Dougherty County had opposed.

Rural health care got a shot in the arm

Georgia legislators passed bills to help rural hospitals, including raising the tax credit to 100 percent for donations to these facilities. House Bill 769 eased the creation of "micro-hospitals," with 24/7 care and a small number of beds, to replace full-scale hospitals that close. It also allows grants to help rural physicians afford medical malpractice insurance, as an incentive to practice in rural areas; permits

remote pharmacy prescription orders from outside Georgia; and requires training of rural hospital board and authority members. Despite these measures, many rural hospitals in the state still face formidable financial challenges, with a sizable portion of their patients without health insurance.

GHN report found immigrant doctors all around state

Georgia Health News reported that 17 percent of physicians and medical residents in the state are foreign-born. Many of them work in rural and underserved areas. GHN profiled Indian-born and Muslim doctors working in the state, a clinic for immigrants and refugees, and a medical student who's among the DACA children. More immigrant doctors would help relieve the physician shortage in Georgia, but as we reported, it's a complex problem, and there are various obstacles to bringing them in and getting them certified.

ER violations shown all too common

Our investigation with WebMD found that every year, hundreds of hospitals nationally violate the law that requires emergency rooms to provide timely and appropriate care to patients. Georgia had the sixth-most violations of the Emergency Medical Treatment and Labor Act over a 10-year period, our analysis found.

Hospital systems kept growing

Emory, HCA, Piedmont each added hospitals to their systems in 2018, extending the drive to consolidate and increase market power through mergers and alliances. And the year closed with a deal between North Carolina-based Atrium Health and Navicent Health in Macon. Given the trend, it's no longer a fantasy to envision hospital systems that someday could span most of the state. But in metro Atlanta, the long delay in the big merger between Northside Hospital and Gwinnett Health System got even longer, mystifying observers.

After arm-twisting, Blue Cross and Piedmont settled fight

Most contract disputes between health insurers and hospital systems result in a new agreement before the old one expires. That didn't happen in the faceoff between Georgia's largest insurer and the powerful Atlanta-based Piedmont system. The dispute affected a large segment of state workers with Blue Cross insurance, which made Georgia officials especially concerned. In a rare move, Gov. Nathan Deal publicly pressured the two sides to reach an agreement before the deadline. They didn't, and the contract lapsed, but Deal doubled down on the pressure. Amid speculation that the governor was looking at some kind of state action, the two sides finally reached an agreement in mid-April.

Some laws on health changed . . . and some didn't

A bill to thwart "distracted driving" passed the Georgia General Assembly, tightening rules to promote public safety. The new law prohibits drivers from holding a wireless telecommunication device or a standalone electronic device while operating a vehicle. Also, lawmakers approved adding post-traumatic stress disorder and intractable pain to the list of diagnoses that allow Georgia patients to possess cannabis oil, a form of medical marijuana. But legislation to curb "surprise" medical billing died under the Gold Dome once again. (Surprise billing occurs when consumers have procedures or visit ERs at hospitals in their insurance network, then get separate bills for large sums of money from non-network doctors who helped provide the care. Most legislators oppose surprise billing, but they can't agree on how to end it.) Another bill that failed in 2018 would have limited the insurer practice of "step therapy," requiring patients to try and fail on a series of treatments before they can obtain the medication prescribed by their physician.