

March, 7th 2023

Exempt Organizations (EO) function
Tax Exempt and Government Entities Operating Division
Internal Revenue Service

Re: Complaint Against Wellstar Health System, Inc. under Section 501(r) of the Internal Revenue Code and Related Federal Regulations

Wellstar Health System, Inc. is a Section 501(c)(3) organization.¹ It is registered as a domestic nonprofit corporation with the Georgia Secretary of State.² We ask the Internal Revenue Service to determine whether Wellstar has complied with Section 501(r) of the Internal Revenue Code regarding at least two of its facilities, Atlanta Medical Center (AMC) and Atlanta Medical Center South (AMC South) and, therefore, whether it continues to qualify for tax-exempt status.

Specifically, we ask IRS to investigate whether Wellstar has complied with the requirement to conduct a community health needs assessment (CHNA) and then to adopt an implementation strategy to address community health needs identified in the CHNA.³ While Wellstar did produce a CHNA for the two hospitals, which it considered together, it did not adopt or execute an implementation strategy to meet the many needs it identified, first among them, access to appropriate health care.⁴ In fact, it abruptly closed the two hospitals in 2022, uprooting a system of care that had served the minority community for generations. Meanwhile, it is pursuing a new venture to acquire control of a hospital system in Augusta, GA, and, likely, to build another hospital in a whiter, wealthier county.

Wellstar had bought AMC and AMC South from Tenet Health in 2016, along with several suburban hospitals and 26 medical practices. The suburban hospitals continue to operate. In connection with its shuttering of AMC and AMC South, Wellstar closed or relocated nearer to its other facilities, 15 of the medical practices, leaving a vast hole in the community they had served.

Wellstar's action deprives Black and other minority patients, many with low incomes, of critical services formerly provided directly by Atlanta Medical Center and Atlanta Medical Center South, as well as access to office-based physician services the community had relied on for decades. Patients have lost access to a prime source of inpatient care as well as to one of North Georgia's only two Level I trauma centers. Closing AMC South eliminated the only emergency room in Fulton County South of I-20.

In addition, these patients, who often already experience barriers to care such as lack of transportation and paid leave from work for illness, now must travel many more miles and

hours to see their doctors, doctors who had to close their local practices in response to Wellstar's decision and relocate. Some physicians' primary care and specialty practices are now based in far less diverse, and in some cases wealthier, suburban communities near other Wellstar hospitals. Some doctors retired earlier than they had intended.

It is necessary to review the tax-exempt status of Wellstar Health Systems as an enterprise. Unlike unaffiliated facilities, the hospitals Wellstar owns do not have authority to make decisions about their operations or their futures. A Wellstar board of trustees controls all the facilities.⁵ Each area served by one or more of the individual hospitals has a Regional Health Board, but these boards are only "ambassadors" and "advisors."⁶ Both Wellstar Health System and AMC are registered as domestic nonprofit corporations with the Georgia Secretary of State, but both registrations show the same information for principal office address, registered agent, CFO, CEO and Secretary.⁷

To see how the relationship between the corporation and the facilities operates, consider the letter of March 2, 2021, from the Regional Health Board for AMC and AMC South to the Wellstar corporate board chair. See Attachment 1. The letter outlines the Regional Board's long-term frustration with the corporation's inattention to the needs of their facilities, lack of transparency of the corporation's communications and plans, and the corporation's failure to formulate a coherent strategy to address the community's needs and provide for the hospitals' viability. Further, the Regional Board points out that it had made numerous suggestions to Wellstar on strategies to build its position and to broaden its patient mix toward achieving a firmer financial footing, ideas which Wellstar ignored.

The Atlanta Medical Center and Atlanta Medical Center South service area served a population with proportionately more Black and other minority residents than those of Wellstar's other eight hospitals. None of the seven counties in the AMC/AMC South service area (See the map at Attachment 2) has a majority white population, and some have much lower shares of white residents: Rockdale 31.7%, DeKalb 29.1%, and Clayton 10.1%, for example. The majority of the population in the service area are Black, Hispanic or Asian, predominantly Black. Counties in the other Wellstar service areas (except Douglas which is counted in four service areas)⁸ have populations above 50% white; most are in the 60-80% range.⁹ See Attachment 3 and the CHNA. Almost 70% of the patients at the AMC and AMC South were Black, contrasting sharply with other Wellstar facilities.

Note that the comparative statistics for the several service areas covered by Wellstar hospitals come from the CHNA. Wellstar therefore knew that the hospitals it chose to close were the ones that primarily served minority communities.¹⁰

Closure of AMC and AMC South destroys a significant ecosystem of health care for Black and other minority residents of their service areas. Wellstar's abrupt closure of AMC South in May 2022, and of the 460-bed AMC in October shocked the community, their doctors, and other hospitals alike. A former member of Wellstar's community board for AMC reportedly said,

“Wellstar’s suburban hospital-oriented management approach unfortunately has resulted in large portions of Atlanta’s black and brown communities not having access to proximate and critical health care services,”¹¹

Wellstar announced on August 31, 2022, that it was closing AMC on October 31st, 2022.^{12, 13, 14} Atlanta Medical Center, under several ownerships, had served generations of patients for 120 years and had provided a base for training, recruitment and support for Black and other minority doctors and health professionals practicing in the community.

Abundant research demonstrates that Black communities and other communities of color experience worse health, lower life expectancy, and more preventable deaths and disabilities than white counterparts. The research also shows the great importance of a usual source of care and services delivered by well-trusted and culturally competent providers to changing these outcomes. This applies to both primary and specialty care.^{15, 16, 17, 18, 19, 20, 21, 22, 23, 24}

Wellstar’s hospital closures left already-stressed Grady Health System as the sole Level I trauma center treating the most serious injuries in the northern part of the state. (The remaining ones are in Augusta, Savannah, and Macon.) Likewise, the company assumed Grady would pick up much of the slack for its former hospital admissions.

Wellstar closed, or moved nearer to its other less diverse facilities, 15 medical practices that it owned. See Attachment 4. Reportedly, its actions also caused some independent practitioners to move to other locations or to retire early.²⁵ These physicians served thousands of patients. Wellstar’s own estimate is that 10,000 patients are affected. The local practices Wellstar closed include not only family medicine, but also cardiology, pulmonology, internal medicine, obstetrics/gynecology, and rheumatology.²⁶

Wellstar acknowledges that attachment to a hospital is critical to the functioning of many physician practices because the practices are connected to hospital-based programs or need a hospital’s laboratory and other services. A spokesperson was quoted as saying, “A physician practice out on an island is really not a good functioning practice.”²⁷ An OB/GYN, who had been seeing some patients for 10-15 years at her office adjacent to AMC, told a reporter that was why she had to close her downtown office and now works in the less diverse, wealthier area of Johns Creek.²⁸ Because of its operation as a teaching hospital, Grady does not grant community doctors admitting privileges or access to laboratory or other resources.

Many patients who want to continue to see their own doctors now must travel across the large, traffic-congested metro area to reach them. One woman being treated for diabetes in a downtown Atlanta office says she now must take two buses to travel 20 miles to Austell. Another woman has seen a cardiologist for a heart condition for years. Her cardiologist’s former office in downtown Atlanta was convenient to her work. She says she recently left her home in Stone Mountain at 10:30 a.m. to drive to a 1:15 p.m. appointment at the new office in Austell. She arrived 15 minutes late for the appointment and did not get back home until 7:00 p.m. She

says she can only imagine what happens for people who do not own a car, get paid time off from work, or have the resources she has. Her cardiologist had practiced in the City of Atlanta since the 1980s.

Another result of Wellstar's action with immediate and potentially long-term impact is the loss of AMC's robust maternity care program. Since the closure, Grady Hospital has experienced an unexpected 30% surge in the number of childbirth admissions, with some patients arriving by ambulance. This has strained Grady's labor and delivery capacity as well as their neonatal ICU. Both hospitals had served pregnant women who are at high risk of neonatal complications. Black babies are far more likely than white babies to die or be born with problems, and Black mothers are much more likely to experience birth-related complications or die.²⁹ AMC physicians, midwives and doulas had created a supportive environment where women who are reluctant to trust the medical system because of the history of discriminatory treatment and scientific exploitation could feel comfortable. That environment is gone.

Wellstar had other options than closing the Atlanta Medical Center facilities. While Wellstar cited a loss of \$114 million in FY 2022 at AMC and AMC South as its rationale for closing them, the company had other options that could have allowed it to continue serving the population without discrimination. As an enterprise, Wellstar reported net assets of \$2.67 billion in FY 2021, up from \$1.75 billion in FY 2020.³⁰

Instead of maintaining and enhancing services in the minority community where it already owned hospitals and medical practices, Wellstar has signed a letter of understanding with Medical College of Georgia in Augusta that may result (at unknown costs) in Wellstar's takeover of that hospital system and construction of a new hospital in Columbia County.^{31, 32, 33, 34} The U.S. Census Bureau estimates that Columbia County in 2022 was 71.3% white³⁵ in stark contrast to AMC and AMC South's service area (see above). As it abandons an underserved minority community, leaving it in far worse straits, there is irony in Wellstar's CEO's statement about its current plans, "By bringing Augusta University Health System together with Wellstar Health System and leveraging our respective strengths, we would improve the health of the community, address social determinants of health and expand access to quality care for all Georgians."³⁶

Apart from ignoring the suggestions of its advisory board (Attachment 1), Wellstar apparently chose not to undertake discussions with local governments, community members and leaders, and health care providers to seek ways of improving the financial status of the hospitals. Local officials, including the mayor of Atlanta, Grady Health System and others decried Wellstar's closure decision and expressed dismay that the company had not engaged in efforts to work with the community to identify solutions before taking its drastic action to dismantle critical health care services.³⁷

In light of its actions, should Wellstar retain its tax-exempt status? Instead of devising an implementation plan to address the needs identified in its CHNA for AMC and AMC South, as

required by law and regulations, it has eliminated access to much inpatient care, trauma care and outpatient services in an underserved minority community and relocated physician services to less diverse, in some cases wealthier areas. We request that the Internal Revenue Service investigate Wellstar's conduct in closing AMC and AMC South and related physician practices and determine whether the company's actions and inactions warrant revocation of its tax privileges until such time as it remedies the harm to the community.

March 2, 2021

ATTACHMENT 1

Otis Brumbly III, Chair
Board of Trustees
Wellstar Health System

**RE: FUTURE OF ATLANTA MEDICAL CENTER
Atlanta Downtown and Eastpoint Hospitals**

Dear Mr. Brumbly:

My name is Lisa Medellin and I serve as the Chair for the Regional Health Board for AMC Downtown and Eastpoint hospitals. The Wellstar Health System promotes itself as a champion of equity, community service, and aspires toward being a safe haven for the medically fragile. As a mission driven organization, Wellstar proudly features its' Community Health Needs Assessment and Community Benefits Plan as a roadmap for engaging with the communities in which they reside. However, the evidence of an authentic plan and appropriate strategy appears non-existent for revitalizing the AMC Downtown and East Point hospitals. For the last four years, we have listened patiently to ideas to invest in the two hospitals and witnessed a parade of revolving Atlanta Medical Center (AMC) CEO's and Wellstar corporate headquarters leaders provide the AMC Regional Health Board with a modicum of vague plans to strengthen the capacity of the AMC Downtown and East Point locations to better serve these communities. In December 2020, we were introduced to the third interim CEO since 2019. We are deeply disappointed that Wellstar has been unable to utilize its extensive experience and resources to meet the unrealized potential of these hospitals and the communities they serve over the past several years since it acquired AMC in April 2016. Therefore, on behalf of the AMC Regional Health Board I am requesting an opportunity to meet (virtually) with yourself, Candance Saunders, Wellstar CEO, and Kerry Watson, AMC Interim CEO to discuss our concerns relative to transparency regarding plans for hiring a permanent CEO for AMC and a strategic plan for the hospitals that includes a timeline with clear deliverables consistent with making AMC-Atlanta and Eastpoint viable institutions.

During our most recent board meeting on February 17, 2021 we received more disturbing news outlining ill-conceived random strategies to reduce or eliminate services and heard statistics on the poor financial condition of the hospitals, the slow improvement on safety and quality control metrics and the challenges with employee retention. This presentation was once again missing a coherent plan to address these issues. It is apparent that the current leadership and culture within the Wellstar system relative to its support for AMC Downtown and East Point hospitals is not demonstrating adequate interest in addressing the needs and the bountiful opportunities that exist within each of these communities. Examples of previously presented strategies that never appeared to materialize results include: the development of a women's pavilion at

the main campus; surgical center at the East Point hospital; selling the hospitals; developing partnerships with other institutions to revitalize the hospitals; expanding the physicians network; repurposing all or part of the land at the AMC downtown campus for housing; reducing the footprint of the hospital; rebuilding a new deck at the downtown campus and; closing the operating room at south campus. Additionally, this story was featured on WABE February 24, 2020. <https://www.wabe.org/wellstar-seeking-partnership-to-boost-atlanta-medical-center/>

The submission of this letter and the request for a meeting is directly in response to a long-term lack of vision and clear direction for the AMC hospitals. As Regional Health Board members, we proudly serve as advocates, supporters, donors, and ambassadors for Wellstar. Yet we are struggling in good faith to engage the community with authenticity given Wellstar's lack of interest in developing and implementing a sustainable strategy to serve the patients and their communities. The board roster is comprised of individuals representing both community residents and community stakeholders comprising a cross section of disciplines and expertise. Our membership represents diverse sectors including government, philanthropy, higher-education, information technology, real estate, and other civic entities. The unifying component is our collective passion, commitment and dedication to ensuring the underserved and disenfranchised patients/residents are given a voice that results in them having access to the same quality of healthcare services offered in many of the suburban hospitals that comprise the Wellstar umbrella.

We have provided numerous suggestions on how AMC could become leaders in healthcare for the community and vanguards in how to deliver healthcare effectively and efficiently that seeks to reduce health inequities in partnership with urban communities. These ideas have not been taken seriously nor have any of the opaque plans developed by Wellstar ever transpired. While we are not experienced hospital administrators, it is clear that without a vision and an aligned executable strategic plan adopted by Wellstar leadership related to AMC will result in continued deteriorating conditions at these two hospitals. We are also mindful that these two hospitals are critical to the healthcare safety-net system in Metropolitan Atlanta as Level 1 Trauma facilities. This is especially of concern at this pivotal moment when the COVID-19 pandemic has exacerbated the serious racial and health disparities experienced by the communities these hospitals serve.

The two communities in which the AMC Downtown and East Point hospitals reside are vastly different and stark in comparison, and the demographic changes in the past several years are textbook examples of how the Social Determinants of Health manifest to the detriment of a community without an intentional and authentic community engagement strategy. For example, AMC Downtown is located in the Old Fourth Ward and within two miles of Midtown Atlanta both of which have seen real estate development explode over the last eight years resulting in some of the highest real estate values in the Metropolitan Atlanta area. However, the patient profile doesn't reflect a diversity relative to the residents in the community. The lack of serious investment in building strategic partnerships is concerning especially when there is an

abundance of corporate and business interests in the area surrounding the hospital and/or a genuine reaching out to local community leaders to establish relationships and create a presence among the civic tapestry of Atlanta that is key to garnering a broader patient mix and other support for the hospital. Additionally, AMC East Point resides in a community with an estimated poverty rate of 23% and without its' existence would otherwise become a healthcare desert. Both hospitals serve a predominately low-income African American population that carry the burden of health disparities on almost every chronic disease indicator that is a marker for being at higher risk relative to COVID-19, lower life expectancy and higher health care costs for treatment.

“Where there is no vision, the people perish” [Proverbs 29:18](#) While this proverb was written thousands of years ago for a different people and under a different circumstance, the meaning of each word is relevant today and is aptly applied to the current context. The “**people**” refers to the residents of Metropolitan Atlanta and the employees of Atlanta Medical Center. And the lack of “**vision**” corresponds to the negligence exhibited by Wellstar corporate leadership in its ineffectiveness in developing a cogent vision for AMC. Lastly, “**perish**” metaphorically refers not only to the AMC employees who have been laboring under a system without consistent leadership working to stabilize the AMC hospitals, but also relative to patients being subjected to substandard healthcare service delivery.

In closing, the concerns outlined in this letter are especially disturbing when the public messaging and marketing of the Wellstar system/brand clearly promotes itself as a healthcare provider embracing and championing equity principles, inclusion and working to eradicate health inequities but it doesn't appear the AMC Downtown and Eastpoint hospitals are manifest in this vision. Wellstar has an amazing opportunity to be an shining example of how to run an efficient, safe and profitable urban and suburban hospital system while improving the health equity issues that exist for the AMC communities. But this will require urgent and authentic commitment at every level of leadership responsible for the viability of AMC. We look forward to scheduling a virtual meeting with you, Candance Saunders, and Kerry Watson as soon as your calendar permits. I can be reached directly either by email imedellin48@gmail.com or (770) 355-3130.

Sincerely,

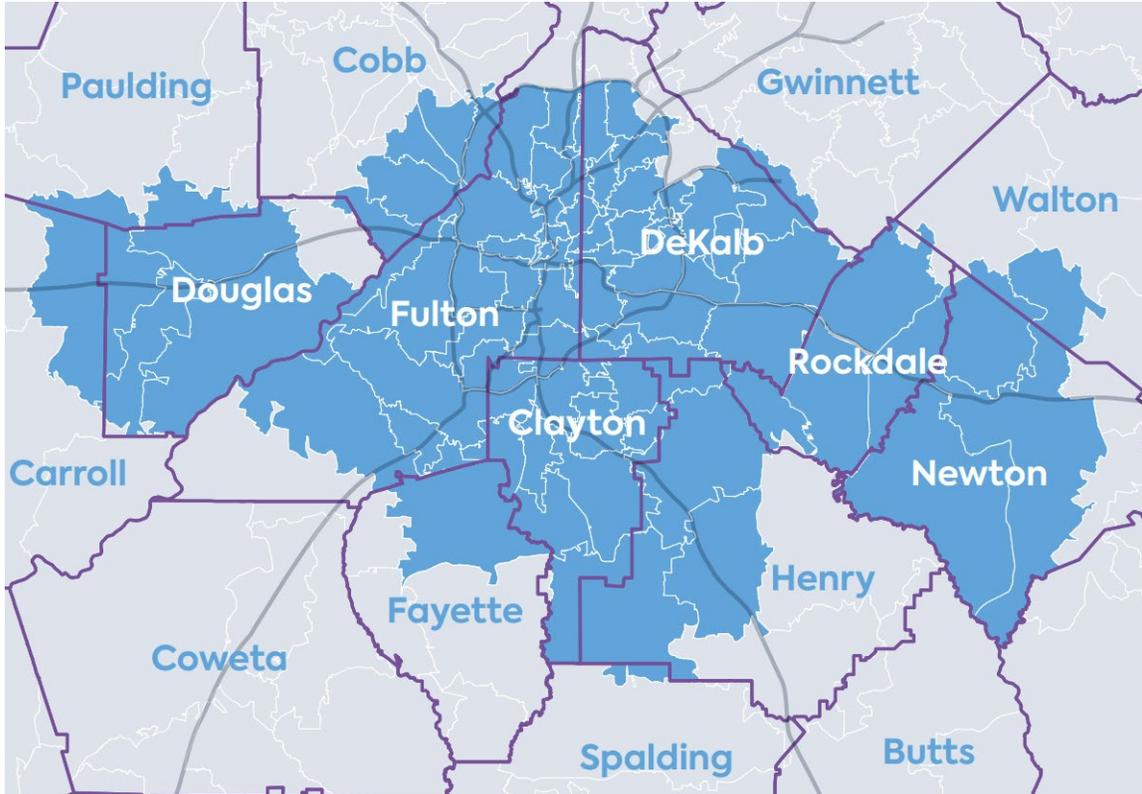
Lisa Medellin, Chair (Regional Health Board-AMC Downtown & East Point)	
John Van Brunt, Vice-Chair (Regional Health Board-AMC Downtown & East Point)	
Todd Greene, Board Member	Mia McDonough, Board Member
Natalie Tyler Martin, Board Member	David Schaefer, Board Member
Lindsay Jonker, Board Member	Albert Shelby, III, Board Member
Reginald Chever, Board Member	Roderick Teachey, Board Member
Joseph Dennis, Board Member	Cherie Wilson, Board Member
Steve Foster, Board Member	Brian Hooker, Board Member
Dymeka Harrison, Board Member	
Patricia Jeter, Board Member	

Tracey Knight, Board Member
Pierluigi Mancini, Board Member

cc: Candance Saunders, CEO Wellstar
Kerry Watson, AMC Interim CEO

ATTACHMENT 2

Atlanta Medical Center and Atlanta Medical Center South Service Area Map



Source: Wellstar 2022 Community Health Needs Assessments. Based on zip codes representing 75% of the hospitals' discharged inpatients for the prior year.

ATTACHMENT 3

Wellstar Hospital Service Area Diversity Comparison

Wellstone Hospital Service Area	Race/Ethnicity %				
	County	Non-Hispanic White	Black	Asian	Hispanic
AMC/AMC South	Clayton	10.1	68.3	5.1	13.2
	DeKalb	29.1	53.4	6.0	8.5
	Douglas*	40.5	45.9	1.6	9.7
	Fulton	39.6	43.7	7.0	7.2
	Henry	43.4	43.4	3.3	2.8
	Newton	46.4	44.3	1.1	2.1
	Rockdale	31.7	53.8	2.0	1.9
Cobb/Kennestone/Windy Hill	Bartow	77.5	10.3	0.9	8.6
	Cherokee	78.7	6.7	1.8	10.5
	Cobb	51.9	26.7	5.3	13.0
	Douglas*	40.5	45.9	1.6	9.7
	Paulding	71.0	18.5	0.8	6.3
Douglas	Carroll	70.3	19.0	0.8	6.9
	Douglas*	40.5	45.9	1.6	9.7
North Fulton	Cherokee	78.7	6.7	1.8	10.5
	Forsyth	71.7	3.3	12.9	9.5
	Fulton**	39.6	43.6	7.0	7.2
Paulding	Douglas*	40.5	45.9	1.6	9.7
	Paulding	71.0	18.5	0.9	6.3
	Polk	72.0	11.9	0.0	13.1
Spalding/Sylvan Grove	Butts	66.0	28.9	0.4	3.3
	Lamar	65.2	29.4	0.5	2.5
	Pike	86.9	8.9	0.5	1.6
	Spalding	58.5	34.1	1.0	4.6
West	Harris	79.2	16.1	1.1	3.6
	Troup	56.3	36.1	2.2	1.3

* Douglas County is included in four service areas.

** Although statistics for all of Fulton County appear in the CHNA analysis for North Fulton Hospital, the service area map shows the zip codes yielding 75% of inpatients are in Fulton County north of I-285. The AMC/AMC South service zip codes cover the larger and more densely populated central part of the county.

Source: Wellstar 2022 Community Health Needs Assessments. The reports calculate overall percentages for some, but not all, of the hospitals. Some of the service areas do not incorporate entire counties, but demographic data are provided for entire counties.

ATTACHMENT 4

Physician Offices Closed or Relocated Due to AMC Closure

The screenshot shows a web browser window displaying the Wellstar website. The address bar shows the URL <https://www.wellstar.org/for-patients/amc-updates>. The page header includes the Wellstar logo and navigation links for 'For Patients & Families', 'Community', 'For Providers', 'About Us', and 'Careers'. A search bar and a 'MyChart' button are also visible. The main content area is titled 'Changes to Physician Offices' and contains the following text:

Changes to Physician Offices
Please note that most Wellstar Medical Group (WMG) physician offices affiliated with Atlanta Medical Center (AMC) will close by November 18, 2022, with the exception of those noted above. With the closure of the inpatient services at AMC, these physician offices are not positioned to provide the integrated care patients need moving forward.

Patients at affected clinician offices will receive a letter from Wellstar about where their physician is moving or how they can find a new clinician at Wellstar or another healthcare provider according to their needs and location.

Offices at AMC Medical Office Buildings

- Wellstar Global Orthopedics at 285 Boulevard NE – Converting to a non-Wellstar private practice on Nov. 30
- Wellstar Internal Medicine at 285 Boulevard NE – Relocating to 1790 Mulkey Rd., Suite 5A, Austell, on Nov. 21
- Wellstar Surgical Specialists of Atlanta at 315 Boulevard NE – Relocating
- Wellstar Orthopedic Surgery at 320 Parkway Dr. NE – Relocating to 55 Whitcher St., Suite 130, Marietta, on Nov. 1
- Wellstar Neurosurgery at 285 Boulevard NE – Closing Nov. 18
- Wellstar OB/GYN at 285 Boulevard NE – Closing Nov. 1
- Wellstar Rheumatology at 285 Boulevard NE – Closing Nov. 18

Offices at Other Locations

- Wellstar Family Medicine at 3355 Cascade Road - Closing on Nov. 18
- Wellstar Family Medicine at 1136 Cleveland Ave. – Closing on Nov. 18
- Wellstar General Surgery at 1136 Cleveland Ave. – Closing Nov. 18
- Wellstar Family Medicine at 560 Amsterdam Ave. – Closing Nov. 18
- Wellstar Cardiovascular Medicine at 229 Peachtree St. NE – Closing Nov. 18
- Wellstar Cardiovascular Medicine at 3886 Princeton Lakes Way SW – Closing Nov. 7
- Wellstar Urogynecology at 3886 Princeton Lakes Way SW – Closing Nov. 18
- Wellstar Urology at 3886 Princeton Lakes Way SW – Closed Sept. 30

The bottom of the screenshot shows a Windows taskbar with various application icons and a system tray on the right displaying the time as 10:30 AM on 2/10/2023.

Source: Wellstar Website

Endnotes

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- ¹ [Wellstar Health System Inc - Nonprofit Explorer - ProPublica](#)
 - ² [Wellstar Health System Registration-GaSOS](#)
 - ³ [Requirements for 501\(c\)\(3\) Hospitals Under the Affordable Care Act – Section 501\(r\) | Internal Revenue Service \(irs.gov\)](#)
 - ⁴ [Community Health Needs Assessment \(wellstar.org\)](#)
 - ⁵ [Wellstar Board of Trustees](#)
 - ⁶ [WAMC Regional Health Board](#)
 - ⁷ [Wellstar Health System Registration-GaSOS; Wellstar Atlanta Medical Center Registration-GaSOS](#)
 - ⁸ Also, see the note about Fulton County on Attachment 3.
 - ⁹ [Community Health Needs Assessment \(wellstar.org\)](#)
 - ¹⁰ [Community Health Needs Assessment \(wellstar.org\)](#)
 - ¹¹ [Impending Hospital Closure Rattles Atlanta Health Care Landscape and Political Races | Kaiser Health News \(khn.org\)](#)
 - ¹² [Community members respond to plans to close Atlanta Medical Center - CW Atlanta \(cbsnews.com\)](#)
 - ¹³ [Wellstar AMC South closes emergency room in South Fulton County | 11alive.com](#)
 - ¹⁴ [Atlanta Medical Center South employees have to relocate | 11alive.com](#)
 - ¹⁵ [Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care | The National Academies Press](#)
 - ¹⁶ [In Focus: Reducing Racial Disparities in Health Care by Confronting Racism | Commonwealth Fund](#)
 - ¹⁷ [Impact of the Doctor-Patient Relationship - PMC \(nih.gov\)](#)
 - ¹⁸ [Good Patient-Provider Relationship Proves to Boost Outcomes \(patientengagementhit.com\)](#)
 - ¹⁹ [Relationships Matter: How Usual is Usual Source of \(Primary\) Care? | Primary Care Collaborative \(pcfcc.org\)](#)
 - ²⁰ [Black Americans' views about health disparities, experiences with health care | Pew Research Center](#)
 - ²¹ [Physician–patient racial concordance and disparities in birthing mortality for newborns \(pnas.org\)](#)
 - ²² [Study: Inequity rampant among metro Atlanta hospitals \(ajc.com\)](#)
 - ²³ [Racial and Ethnic Disparities in Outpatient Visit Rates Across 29 Specialties | Health Disparities | JAMA Internal Medicine | JAMA Network](#)
 - ²⁴ [Assessment of Racial Disparities in Primary Care Physician Specialty Referrals | Health Disparities | JAMA Network Open | JAMA Network](#)
 - ²⁵ [Hospital closure cost Atlanta a rare cluster of highly diverse doctors \(ajc.com\)](#)
 - ²⁶ [Thousands of patients losing Atlanta doctors' offices after AMC closes \(ajc.com\)](#)
 - ²⁷ [Thousands of patients losing Atlanta doctors' offices after AMC closes \(ajc.com\)](#)
 - ²⁸ [Thousands of patients losing Atlanta doctors' offices after AMC closes \(ajc.com\)](#)
 - ²⁹ [2022-MarchofDimes-ReportCard-UnitedStates.pdf](#)
 - ³⁰ [WELLSTAR HEALTH SYSTEM INC - Audit for period ending Jun 2021 - Nonprofit Explorer - ProPublica](#)

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- ³¹ [Group under fire for closing Atlanta Medical Center could take over Augusta hospitals - CW Atlanta \(cbsnews.com\)](#)
- ³² [Augusta University Health System, Wellstar Health System announce letter of intent for statewide health care partnership \(prnewswire.com\)](#)
- ³³ [Wellstar, Augusta University Health in east Georgia developing plan for a partnership \(ajc.com\)](#)
- ³⁴ [What does AU-Wellstar hospital merger mean for me? \(wrwd.com\)](#)
- ³⁵ [U.S. Census Bureau QuickFacts: Columbia County, Georgia](#)
- ³⁶ [Wellstar set to acquire another Georgia health system \(beckershospitalreview.com\)](#)
- ³⁷ [Community members respond to plans to close Atlanta Medical Center - CW Atlanta \(cbsnews.com\)](#)