



E000757

TELEGRAPHIC MESSAGE

NAME OF AGENCY DHEW/PHS/HSMHA/REGIONAL MEDICAL PROGRAMS SERVICE		PRECEDENCE ACTION: INFO:	SECURITY CLASSIFICATION
ACCOUNTING CLASSIFICATION 3-3971015 7530321 236J	DATE PREPARED 4/4/73	TYPE OF MESSAGE <input type="checkbox"/> SINGLE <input type="checkbox"/> BOOK <input checked="" type="checkbox"/> MULTIPLE-ADDRESS	
FOR INFORMATION CALL			
NAME Mrs. Sarah J. Silsbee (Writer)	PHONE NUMBER x31580		

THIS SPACE FOR USE OF COMMUNICATION UNIT

MESSAGE TO BE TRANSMITTED (Use double spacing and all capital letters)

TO: J. GORDON BARROW, M.D.
COORDINATOR
GEORGIA REGIONAL MEDICAL PROGRAM
938 PEACHTREE STREET, N.E.
ATLANTA, GEORGIA 30309

TO: EARNEST C. ATKINS, M.D.
SECRETARY
MEDICAL ASSOCIATION OF GEORGIA
938 PEACHTREE STREET, N.E.
ATLANTA GEORGIA 30309

TO: T.H. GRIFFITH
PROGRAM DIRECTOR, RMP
OFFICE OF THE REGIONAL HEALTH DIRECTOR
DHEW REGION IV
50 SEVENTH STREET, N.E. ROOM 423
ATLANTA, GEORGIA, 30323

THIS IS TO ADVISE YOU OF THE DECISIONS RESULTING FROM REVIEW BY RMPs OF THE PHASE-OUT PLANS SUBMITTED ON MARCH 15 BY THE GEORGIA REGIONAL MEDICAL PROGRAM. THE DECISIONS ARE AS FOLLOWS:

1. THE TERMINATION DATE FOR THE GEORGIA REGIONAL MEDICAL PROGRAM IS FEBRUARY 14, 1974. THIS IS THE DATE BEYOND WHICH NO RMPs GRANT FUNDS MAY BE EXPENDED.
2. THE APPROVED DIRECT COST IS NOW \$1,461,500 PLUS APPROPRIATE INDIRECT COSTS. AN AMENDED AWARD WILL BE ISSUED FOR THE NEW APPROVED BUDGET PERIOD JANUARY 1, 1973 THROUGH FEBRUARY 14, 1974.

SECURITY CLASSIFICATION	
PAGE NO. 1	NO. OF PGS. 3

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TO:

3. FUNDS MAY BE EXPENDED AFTER 6/30/73 FOR ONLY THOSE PROGRAMMATIC ACTIVITIES LISTED BELOW:

CONTRACTS

<u>NUMBER</u>	<u>TITLE</u>
D005	COMMUNITY HEALTH REPRESENTATIVE
D008	PROBLEM ORIENTED MEDICAL RECORD SYSTEM
D012	QUALITY CARE ASSURANCE & CORRECTIVE EDUCATION
38	EMERGENCY CARE FOR SO. GEORGIA & NO. FLORIDA
42	STATEWIDE SYSTEM OF CARE - HIGH RISK MATERNAL/INFANT
55	REGIONAL EMS SYSTEM

ALL OTHER ACTIVITIES NOW ONGOING, INCLUDING THOSE PREVIOUSLY CONTRACTED, MUST BE TERMINATED BETWEEN NOW AND JUNE 30.

4. FUNDS MAY NOT BE REBUDGETED INTO PROGRAM STAFF PERSONNEL. EXPENDITURES FOR EQUIPMENT, CONSULTANTS, TRAVEL, AND MEETINGS SHOULD BE KEPT AT A MINIMUM.

SECURITY CLASSIFICATION

PAGE NO.	NO. OF PGS.
2	3

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TO:

5. IN SUMMARY, THE ABOVE FUNDING LEVEL WAS DERIVED TO PROVIDE SUPPORT BEYOND JUNE 30 FOR THE PROJECTS AND ACTIVITIES LISTED ABOVE AND FOR PROGRAM STAFF NEEDED TO MONITOR PROJECT ACTIVITY AND TO ASSURE COMPLIANCE WITH CLOSEOUT REQUIREMENTS BY FEBRUARY 14, 1974.

THE ABOVE INFORMATION IS NOT INTENDED TO BE AN ALL- INCLUSIVE RESPONSE TO YOUR PROPOSED PLANS FOR EQUIPMENT DISPOSAL, RECORDS RETENTION, USE OF GRANT-RELATED INCOME, ETC. RATHER, IT REPRESENTS OUR JUDGMENT ABOUT THE BASIC DECISIONS NEEDED TO ENABLE YOU TO INITIATE PHASE-OUT OPERATIONS AND NEGOTIATIONS.

WE EXPECT THAT YOU WILL HAVE QUESTIONS AND WE URGE YOU TO CALL THE GRANTS MANAGEMENT BRANCH (301/443-1800) FOR ASSISTANCE AS NEEDED.

THE GRANTS MANAGEMENT STAFF WILL ALSO BE CONTACTING YOU REGARDING SPECIFIC DETAILS ON THE PHASE-OUT OF YOUR PROGRAM AND THE FORMS TO BE PREPARED TO SUPPORT THE AMENDED AWARD NOTICE.

Harold Margulies
 HAROLD MARGULIES, M.D.
 DIRECTOR
 REGIONAL MEDICAL PROGRAMS SERVICE

SECURITY CLASSIFICATION

PAGE NO. NO. OF PGS.

3

3