



HIGHLIGHTS GOVERNING COUNCIL MEETING AHA Section for Metropolitan Hospitals February 22-23, 2007 ★ Phoenix, Arizona

The governing council of the AHA Section for Metropolitan Hospitals met February 22-23, 2007 in Phoenix. Governing council members received reports on AHA legislative, regulatory and policy initiatives. Members discussed AHA's effort to create a vision for a unified health care policy and a report from the AHA Board's Behavioral Health Care Task Force. A roster of the Section's governing council members is at <http://www.aha.org/aha/member-center/constituency-sections/Metropolitan/roster.html>.



Unified Health Care Policy: Over the past few years, AHA's leadership has been working to chart a course to achieve health care reform in America. At the recent governing council meeting, AHA Board liaisons and AHA staff updated members on the recent AHA Board Retreat, which focused on the unified health policy initiative, and specifically on developing a Framework for Improving America's Health.

The AHA's unified health care policy initiative is designed to create a shared vision for our future health care system, build broad-based support for change, outline good ideas for achieving that change, and strategically prioritize and pursue change.

After reviewing the "work in progress" Framework and background materials, members were divided into small discussion groups to share their overall impression of the Framework; whether the right issues, goals and objectives are identified; and discuss which parts of the Framework elicit their strongest support and which make them most uncomfortable. Members were also asked to share changes they would suggest to better capture the issues that need to be addressed in American health care. Members returned to plenary session to share, based on their discussions, what advice they would give to the AHA Board on the Framework and on the strategy for moving ahead.

Members were united in their support of the framework's five pillars and encouraged the AHA to continue its leadership toward a vision of a unified health care policy. They recommended working with stakeholders who share our values to draft a reform message that will inspire and motivate hospitals while addressing access, cost, and outcomes.

A summary of these discussions will be shared with the AHA Board as it moves forward on developing a plan for creating a vision for a unified health care policy in America. For additional information, please visit <http://www.aha.org/aha/nhcp/index.html>.



Washington Update and 2007 Advocacy Agenda: Members were briefed on the current political environment in Washington and given an overview of the AHA's 2007 Advocacy Agenda, which highlighted the overall themes of connecting with the community, demonstrating the value of health care, and addressing issues around health care affordability. Short and long-term strategies within these overarching themes were reviewed as well.

The discussion then moved to a review of the implications of the 2006 elections on political activity in Washington and on health care, as well as efforts regarding the President's FY 2008 budget, regulatory cuts to Medicaid, SCHIP reauthorization, and other immediate priorities. Members were also reminded of the work of the AHA PAC and the Coalition to Protect America's Health Care and their efforts to forestall additional Medicare or Medicaid cuts in the 2008 budget. To learn more about the AHA's current advocacy activities, visit <http://www.aha.org/aha/advocacy-grassroots/advocacy/index.html>.



Behavioral Health Task Force Report: The AHA's Task Force on Behavioral Health sought feedback on a draft report regarding behavioral health challenges in the general hospital. The task force was charged to develop realistic strategies to assist leaders of community general hospitals as they seek to meet the behavioral health needs of their communities, and provide real-world examples of hospitals that are successfully addressing the behavioral health care needs of their communities. Task force members asked the group to review the draft report along with a *TrendWatch*, "Community Hospitals: Addressing Behavioral Health Care Needs," found at <http://www.aha.org/aha/trendwatch/2007/twfeb2007behavhealth.pdf>. The study reviews the role played by community hospitals in delivering behavioral health care services and provides data on demand for care and the efficacy of treatment.

Council and Committee members were asked to discuss whether the report provides a realistic framework for community general hospitals to develop a behavioral health care role for their community. Members were also asked to identify potential barriers in the recommendations and share any successful practices from their own organizations.

Members were very supportive of the task force report and its recommendations. To them the challenge is less about what should be done and more about how to do it given the inadequate funding of behavioral health services. Increasing the supply of qualified clinical professionals is also seen as fundamental to successfully implementing the recommendations of the task force. Members provided examples of successful behavioral health care programs that could serve as models for delivery.

Outcomes of the discussion will be used to finalize the report, which will include a more detailed and extensive list of case examples. More information on behavioral health issues may be found at http://www.aha.org/aha_app/issues/Medicare/Psychiatric-Services/index.jsp

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America's Hospitals: Building Better Lives and Healthier Communities

AHA's Annual Membership Meeting, May 6-9, 2007

The Hilton Washington Hotel, Washington, DC

and

The Metro Hospital Section Annual Breakfast

Monday, May 7, 2007, 7:30 a.m. – 8:45 a.m.

Featured Speaker: David Gregory, chief White House correspondent, NBC News

For more information about the topics covered in these highlights or on the AHA Section for Metro Hospitals, contact John T. Supplitt, senior director, at 312-422-3334 or jsupplitt@aha.org.