American Hospital Association

HIGHLIGHTS
GOVERNING COUNCIL MEETING
AHA Section for Small or Rural Hospitals
September 15-16, 2014 ★ Washington, DC

The Governing Council of the AHA Section for Small or Rural hospitals met September 15-16, 2014 in Washington, DC. Governing Council members were briefed on the current Washington political, legislative, and regulatory policy environment. Members reviewed and discussed several policy issues including principles for payment reform, equity of care, hospital discharge tools, and a two-midnight short stay payment policy. Members also discussed interventions for prescription drug abuse. A **roster of the Section's governing council** is available on our Web site.

American Hospital Association — Fall 2014 Legislative Dashboard

Washington Legislative Update: Members received a briefing on the political environment and the upcoming election. They were oriented to the AHA's fall legislative dashboard and shared our message with their members of Congress. Members endorsed the importance of the **AHAPAC** and the work of the **Coalition to Protect America's Health Care** to communicate our message to the public.

American Hospital Association — Regulatory Advisory

Washington Regulatory and Policy Update: Governing Council members reviewed and discussed recent rule and policy making and AHA's comments on:

- Payment rules for IPPS, LTCHS and IRF
- Meaningful Use Stage 2
- Cybersecurity
- 340 B Drug Discount Program
- Implementing ICD-10
- RACs and Litigation

- Readmissions Penalty Calculator
- Value-Based Purchasing Calculator
- Medicare DSH Payment Calculator
- HAC Calculator

hospitals in pursuit of excellence — Accelerating Performance Improvement

Equity of Care

INSTITUTE FOR DIVERSITY in Health Management — An affiliate of the American Hospital Association

HOSPITALS MAKING PROGRESS ON HEALTH CARE DISPARITIES

Equity of Care (EOC): Members were updated on the work of the AHA's EOC effort and the National Call to Action to Eliminate Health Care Disparities. Member input was provided on how to accelerate progress toward meeting the EOC goals for increasing the collection and use of data on race and ethnicity, increasing cultural competency training, and increasing diversity of leadership and governance.

Principles for Payment Reform: Input and recommendations received from the summer round of governance meetings on payment reform principles were shared with the AHA Board of Trustees in July. Members were asked to discuss a revised set of principles that could serve as a framework for reforming government and private payment systems to achieve the Triple Aim.

Hospital Discharge Tools: The hospital discharge process is the subject of growing attention as hospitals and other stakeholders take steps to improve transitions of care, reduce admissions, and prepare for future reforms such as episode-based payment. Members assessed the range of current hospital discharge practices; how such practices might become more consistent across hospitals; and identified barriers to improving the acute care hospital discharge process. They further discussed changes hospitals are making to improve – and in some cases standardize – the process of discharging patients to post-acute and other settings.

Two Midnights: Short-stay Payment (SSP) Policy: As it exists today, the two-midnight policy does not include a mechanism for accurate and fair reimbursement for medically necessary inpatient stays that span less than two midnights. However, a SSP policy, which would supplement the existing two-midnight policy, could reimburse hospitals more accurately for the resources used to treat beneficiaries alleviate some problems regarding beneficiary cost-sharing. Members were asked to respond to the next steps for creating a short stay payment policy.

Addressing Prescription Drug Abuse: The misuse and abuse of prescription drugs – and in particular, of opioid pain relievers such as oxycodone and hydrocodone – has been called a public health epidemic. According to the Centers for Disease Control and Prevention (CDC), deaths from drug overdose have been rising steadily over the past two decades and have become the leading cause of injury death in the United States. This discussion was an opportunity to learn and share how hospitals and their medical staffs are engaged in addressing prescription drug abuse in the community, and gather advice on actions the AHA can take to help hospitals address this health problem.

AHA Digital Campaigns: The AHA is in the process of launching two digital campaigns to bring attention to the great work happening in hospitals across the country. The first focuses on the continuous improvement in quality and patient safety. The second highlights a digital campaign that shows the new ways we deliver care while working with community partners to keep patients healthy. Members were given a demonstration of AHA's new launch.

For more information about the topics covered in these highlights or on the **AHA Section for Small or Rural Hospitals**, contact John T. Supplitt, senior director, at 312-425-6306 or jsupplitt@aha.org.