Through our representation and advocacy activities, the American Hospital Association (AHA) ensures that members’ perspectives and needs are heard and addressed in national health policy development, legislative and regulatory debates, judicial matters and with the media, academics and thought leaders. We also are shaping the national discussion on the future of health care delivery, and providing thought leadership and resources.

At the heart of our work, always, are our members and the patients and communities they serve. Your involvement makes our success – as an association and a field – possible. We are honored that you have chosen us to represent you, and hope that AHA can rely on your continued support.

The AHA works for you, and with you, to ensure that:

- Policymakers understand what hospitals are doing to advance health;
- Legislators understand the implications of funding cuts to your community;
- Regulators understand the real-world consequences of their decisions for hospitals; and
- Everyone realizes the critical role that hospitals play in communities across the country.

In 2014, AHA made progress on a wide variety of issues important to hospitals and health systems:

- AHA worked to help prepare the field to detect, isolate and safely treat suspected cases of Ebola, acting as a conduit for information from the Centers for Disease Control and Prevention and other government agencies. We continue to work closely with the state, regional and metropolitan hospital associations to coordinate activities, as state and local authorities govern many public health laws.

- AHA continues to work with the regulatory agencies, Congress and the courts to rein in over-zealous Recovery Audit Contractors. Support for AHA-sponsored legislation and our litigation efforts helped force the Centers for Medicare & Medicaid Services (CMS) to offer hospitals settlement terms.

- AHA worked with the Drug Enforcement Administration to ensure that new rules meant to discourage opioid abuse did not conflict with established safety protocols or create new burdens.

- AHA worked with Congress to help provide access to private-sector care for veterans.

- AHA also worked with Congress to delay cuts, including cuts to physicians’ Medicare payments and Medicaid disproportionate share hospital payments, and to extend several programs critical to rural health care, including ambulance add-on payments, the enhanced low-volume adjustment and the Medicare-dependent hospital program.

- In addition, we worked with CMS to adjust regulations in order to provide hospitals with greater flexibility around meeting meaningful use of electronic health records, hospital governing body composition and hospital medical staff structures.

- AHA also has been working to promote the benefits of the 340B Drug Pricing Program and graduate medical education, among other topics.

Communicating with the Media. As the national voice for hospitals, AHA uses a wide range of strategies to promote hospitals in the media. In national and local news, traditional and social media, and print, television and radio, AHA advocates for hospitals on issues important to our members. AHA also equips members with tools and strategies to help respond to media inquiries on difficult and challenging issues.
**Grassroots Advocacy.** As issues of importance to hospital leaders arise, AHA issues alerts urging members to contact their legislators or federal regulators and share the impact of potential cuts or regulatory changes on hospitals, patients and their communities.

In addition, several times a year, at critical flashpoints, we urge members to join us in Washington, D.C., to take the hospital field’s message directly to legislators on Capitol Hill. These Advocacy Days provide opportunities for legislators and their staff to hear firsthand the impact that legislative proposals could have on hospitals, patients and the communities they serve. They also help hospital leaders build and nurture these valuable relationships.

An essential element of our grassroots advocacy is our strong partnership with state, regional and metropolitan hospital associations. By collaborating, we present a strong, unified voice for hospitals and patients.

**Advocacy Alliances.** AHA’s Advocacy Alliances provide members with another way to engage legislators on the specific issue or issues that have a direct impact on their ability to continue providing quality health care services in their communities. Activities include special briefing calls and emails to keep members up-to-date on key developments, special breakout sessions at Advocacy Days, direct member outreach and other issue-specific resources.

**A Role in Governance and Policy-making.** Members play an active role in shaping AHA policies and setting direction for the association. Members can play a formal role in governance and policy formation through AHA’s Board of Trustees, Regional Policy Boards, Governing Councils and committees. Members also take part in AHA’s seven Constituency Sections – a unique blend of forum and network, linking members with shared interests and missions. In addition, each year new short-term advisory groups and task forces are created to provide input on time-sensitive policy issues. Through the Presidents’ Forums, small groups of CEOs meet with AHA’s president to offer guidance.

**AHAPAC’s mission is simple:** AHAPAC allows its qualified members and other eligible hospital leaders to make voluntary donations toward the support of federal candidates of both political parties who support the hospital policy agenda.

AHAPAC is bipartisan, working with state hospital associations and others. In the 2014 cycle, AHAPAC supported more than 360 candidates, attended more than 1,023 campaign events and raised more than $3.7 million from January 2013-September 2014.

**The Coalition to Protect America’s Health Care.** The Coalition, of which AHA is a founding member, is a recognized leader in digital advocacy, forming through social media and online ads a grassroots army of close to 900,000 individuals who communicate directly to Congress about the harm cuts in hospital payments could have on patient care. In addition:

- Coalition ads opposing cuts have been viewed online more than 1.5 billion times.
- More than 3.6 million people engage each week with Coalition social media.
- The Coalition generated more than 360,000 contacts with members of Congress during recent legislative battles.

**Want to learn more?** Contact Etta Fielek efielek@aha.org or (202) 626-2358.
Keeping policymakers and the public aware of emerging trends in America’s hospitals and the broader health care field, AHA’s policy research provides essential facts to educate the public and effectively influence policy.

**Special Reports and Analyses.** These include the TrendWatch series, a periodic AHA publication that reports on the latest trends affecting hospitals and the health care system, as well as other AHA-sponsored studies and Chartbook, a compendium of the latest trends impacting hospitals.

In addition, our in-depth advisories on new regulations and legislation put the information members need at their fingertips.

**A Reliable Source of Data.** The AHA Annual Survey is completed online by most U.S. hospitals and profiles a universe of more than 6,500 hospitals. It has more than 1,000 inputs covering an organization’s structure, service lines, staffing, expenses, physician organization structures, beds and utilization. These data are made available through several electronic and print resources, including the AHA Guide and AHA Healthcare DataView.

**Disseminating Ideas.** AHA keeps members and the greater health care community in the know through its daily newsletter, AHA News Now, and the biweekly AHA News. Publications like Health Forum's Hospitals & Health Networks, Trustee and Health Facilities Management deliver vital and timely information on a monthly basis.

In addition, educational webinars, Town Hall interactive webcasts and programs offer cutting-edge insights to guide health care organizations in the post-reform era. Flagship meetings include the advocacy-focused AHA Annual Membership Meeting and the Health Forum/AHA Leadership Summit, which is attended annually by more than 2,000 health care leaders.

AHA's Committee on Research shapes the association’s research agenda, while the Committee on Performance Improvement provides leadership on cutting-edge ways to raise the bar for performance and patient safety. Their latest report provides a toolkit for engaging communities and trustees in transformation.

Designed to help hospital and health system leaders better understand the health care landscape, the annual Environmental Scan examines the critical issues, key emerging trends and market forces that have a high probability of affecting the health care field.

**In summer 2014, we launched AHA SmartMarket,** a free online social collaboration platform that connects you to other health care professionals. With AHA SmartMarket, you can: discuss challenges with a network of trusted peers and colleagues; engage with vendors offering solutions to help you navigate your improvement journey; and see what others think about products and services to reduce costs and improve performance. Join the conversation at www.ahasmartmarket.com.

**Community Connections: Real Stories, Real Impact.** Community Connections is an initiative to help hospitals reaffirm their important role as a valued and vital community resource that merits broad public support. To date, it has featured more than 800 hospital-based programs from hospitals across the country that work daily to improve community health. It also provides toolkits to help hospitals better understand and connect with the communities they serve. The most recent one focused on tools providers can use to improve price transparency. For more, visit www.ahacommunityconnections.org.
AHA is proud to act as a conduit through which hospitals share best practices and tap into resources and initiatives that advance quality and safety and improve performance through our Hospitals in Pursuit of Excellence (HPOE) initiative and the Health Research & Educational Trust (HRET).

Driving Performance Improvement through Education and Information Sharing. As AHA’s strategic platform to accelerate performance improvement in health care, HPOE regularly releases guides that help inform health care leaders on how to prepare for the changing health care landscape and continually improve quality. A sample of recent guides include:

- Your Hospital’s Path to the Second Curve: Integration and Transformation;
- The Second Curve of Population Health;
- A Framework for Stratifying Race, Ethnicity and Language Data; and
- Integrating Behavioral Health Across the Continuum of Care.

In addition, HPOE hosts monthly webinars that allow experts and health care practitioners an avenue to connect directly with those in the field. These guides, along with case studies on advanced strategies in performance improvement, can be accessed at www.hpoe.org.

HRET leverages research and education to improve the health of all communities. For example, HRET leads the largest of CMS’s Hospital Engagement Networks (HENs), representing 31 state hospital associations and nearly 1,500 hospitals. From January 2012 through November 2014, HRET’s HEN improved hospital quality in several clinical topics areas. Estimated highlights show:

- Nearly 1,000 NICU admissions were prevented via the early elective delivery reduction program;
- More than 4,500 pressure ulcers were prevented;
- More than 65,000 readmissions were prevented; and
- More than 8,600 CAUTI, VAP, CLABSI and SSI infections were prevented.

If you look across all 11 topics, this accounts for more than 92,000 prevented harms with associated cost savings of more than $988 million.*

HRET will continue this work through additional quality improvement projects and offers a quality improvement-focused membership, the Symposium for Leaders in Healthcare Quality, a forum of the AHA, for ongoing support to hospitals on their quality journey.


HRET works with the Agency for Healthcare Research and Quality (AHRQ) to coordinate On the CUSP: Stop CAUTI, which has successfully reduced catheter-associated urinary tract infections (CAUTI). In coordination with AHRQ, participants – 949 hospitals and 1,578 inpatient units located across 40 states, the District of Columbia and Puerto Rico – have seen a 15.2 percent relative reduction in CAUTI rates. Furthermore, 91 percent of participants who started the project with zero CAUTI rates have sustained these zero rates through collection period.

HRET also is a leader in work to eliminate disparities in care and promote diversity. In addition to producing its noted Disparities Toolkit, HRET supports Equity of Care, a joint effort of the AHA, America’s Essential Hospitals, American College of Healthcare Executives, Association of American Medical Colleges and Catholic Health Association of the United States. Resources include guides, best practices, case studies and national collaborative efforts.

HRET also is preparing health care leaders for the challenges ahead through two fellowship programs: the AHA-National Patient Safety Foundation Comprehensive Patient Safety Leadership Fellowship, and the AHA Health Care System Transformation Fellowship.