Community hospitals are the cornerstone of health and healing in America’s communities—large and small, urban and rural. Hospitals are working not just to deliver quality care, but to improve the patient experience and population health, while reducing the per capita cost of care. This work includes inpatient acute care and also extends far beyond the hospital building to include access to primary care, post-acute care, public health and wellness, housing, job training, back-to-school immunizations, literacy programs and many other resources. A community hospital’s efforts are often greeted with little fanfare, as it seamlessly coordinates the community’s health delivery system. However, its role is essential to the health and economic well-being of the people it serves.

Working for Community Hospitals

As the Trump administration and the 115th U.S. Congress take shape, AHA will continue to advocate on behalf of all community hospitals for high-quality, affordable and accessible health care for all Americans. Recent key advocacy and policy initiatives that AHA worked on are highlighted below.

• **Supporting HOPD.** AHA successfully urged CMS to provide fairer and more equitable payment to hospitals for the services they provide when implementing the Bipartisan Budget Act of 2015, which requires site-neutral payments to be made to new off-campus hospital outpatient departments (HOPDs).

• **Improving ‘Two-midnight’ Policy.** AHA helped persuade CMS to finalize several positive changes to its burdensome two-midnight policy. In addition, AHA successfully challenged through the courts CMS’s interpretation of its 0.2% payment reduction for inpatient services, convincing the agency to restore the resources that hospitals are lawfully due, restoring $3.1 billion in unjustified cuts.

• **Eliminating ALJ Appeals Backlog.** A federal judge ordered the Department of Health and Human Services (HHS) to eliminate the backlog of Medicare claims appeals pending at the administrative law judge (ALJ) level within four years, granting summary judgement to AHA and three member hospitals in their case challenging HHS for failing to meet statutory deadlines for processing Medicare claims appeals.

• **Shaping MACRA Implementation.** The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 created a new physician payment and performance measurement system, and AHA is working with CMS to shape implementation by ensuring the regulations make sense, are aligned with other Medicare programs and do not overburden providers. Opportunities remain to further align hospital and clinician performance measurement, and we will work to make that happen. Resources can be found at [www.aha.org/macra](http://www.aha.org/macra).

• **Monitoring New Care Models.** AHA worked with the Centers for Medicare and Medicaid Services (CMS) to shape the mandatory bundling program for hips and knees, as well as the cardiac care model, and is actively monitoring both models to ensure their success.

• **Protecting Consumers from Insurer Consolidation.** At the urging of AHA and others, the Department of Justice (DOJ) took action to stop the mergers of four of the five largest health insurers. AHA worked to ensure that the proposed acquisitions received the highest level of scrutiny.
from regulators and Congress and both mergers were successfully stopped although one insurer is still considering an appeal.

- **Expanding Access to Medicaid.** AHA continues to support state hospital associations in non-expansion states to make the case for Medicaid expansion. Montana and Louisiana expanded their Medicaid programs in 2016.

- **Fighting Escalating Drug Prices.** As a member of the steering committee of the Campaign for Sustainable Rx Pricing, AHA has raised awareness with legislators, policymakers and the media of how rising prescription drug prices are putting a strain on the entire health care system. These efforts have included a report on the impact of high and rising drug prices on the inpatient setting and briefings on Capitol Hill and for the media.

- **Supporting Medical Innovation.** The 21st Century Cures Act is primarily designed to advance the development of medical treatments and cures through investments in research and updates to how new therapies are developed and approved. The major components of the legislation fund new initiatives at the National Institutes of Health (NIH) and the FDA. Specifically, it authorizes $4.8 billion for the NIH to fund new initiatives around precision medicine, cancer, neuroscience, and regenerative medicine.

### Engaging Community Hospital Leaders

AHA fosters dialogue among community hospital CEOs and offers many opportunities to take an active role in shaping AHA policies and setting direction for the association and the field. CEOs may have a formal role in association governance and/or policy formation by serving with other AHA members on AHA’s Board of Trustees, Committee on Health Care Strategy and Innovation or one of nine Regional Policy Boards. In addition, CEOs may participate on:

- **Metropolitan or Small/Rural Hospitals Councils** that advise AHA on policy and advocacy activities of great importance to community hospitals in rural, suburban and urban markets as well as the field as a whole.

- **Committee on Clinical Leadership** where clinical leaders advise on policy and advocacy issues to advance excellence in patient care.

- **Advocacy Alliances** including the Advocacy Alliance for Coordinated Care, the Advocacy Alliance for the 340B Drug Pricing Program, and the Advocacy Alliance for Rural Hospitals.

- **Leadership Briefings** for small groups of executives to discuss care delivery and financing approaches, pilots, demonstrations and initiatives. In addition, CEOs are individually contacted to share their views with AHA several times a year.

### Providing Key Resources for Community Hospitals

Based on member input, AHA, often in partnership with others, develops and offers resources to support community hospital leaders. Examples include:

- **Task Force on Ensuring Access in Vulnerable Communities Report.** This November 2016 AHA taskforce report outlines nine emerging strategies that can help preserve access to health care services in vulnerable communities.

- **Trends in Hospital Inpatient Drug Costs: Issues and Challenges.** This October 2016 study was commissioned by the AHA and the Federation of American Hospitals to better understand how drug prices are changing in the inpatient hospital setting and to inform policymakers and stakeholders.

- **Cybersecurity Resources.** AHA offers cybersecurity resources for hospitals, including cybersecurity alerts, links to tools to assist with risk assessment and gap analysis, and connections to opportunities for information sharing. For more, visit www.aha.org/cybersecurity.

For information about the overall value of membership at AHA, please see http://www.aha.org/about/membership/value.shtml.