Academic medical centers and teaching hospitals fulfill critical social missions, including educating and training future medical professionals; conducting state-of-the-art research; caring for the poor and uninsured; and optimizing services to provide highly specialized clinical care to the most severely ill and injured patients. There are over 1,000 teaching hospitals that directly employ 2.7 million people and are among the largest employers in their communities.

Working for Academic Medical Centers and Teaching Hospitals

As the president-elect’s administration and the 115th U.S. Congress take shape, AHA will continue to advocate on behalf of all health care providers, including academic medical centers and teaching 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 HOPDs.** The AHA-supported 21st Century Cures Act, signed into law on December 13, 2016, includes exceptions from the OPPS site-neutral payments for certain off-campus hospital outpatient departments (HOPDs) that were under construction at the time the site-neutral statutory provisions were passed in November 2015. The legislation also includes adjustments to the Hospital Readmissions Reduction Program to account for socioeconomic status.

- **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).

- **Backing 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.

- **Combating the Opioid Epidemic.** The 21st Century Cures Act provides $1 billion in grants to states to help address the opioid epidemic. AHA also worked with the Centers for Disease Control and Prevention to develop and distribute a new patient education resource on prescription opioids that outlines evidence-based information about the risks and side effects of the powerful painkillers. Resources are available at [www.aha.org/opioidepidemic](http://www.aha.org/opioidepidemic).

- **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 briefings on Capitol Hill and for the media.

- **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.
Maintaining Viable Health Insurance Marketplaces. The Health Insurance Marketplaces authorized by the Affordable Care Act have not yet stabilized, threatening access to coverage for millions of Americans. AHA has proactively promoted policy and operational changes to CMS that would encourage robust consumer and plan participation.

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.

Collaborating with National Medical and Nursing Education Organizations. AHA works closely with the Association of American Medical Colleges, the Accreditation Council for Graduate Medical Education, America’s Essential Hospitals and Vizient.

Engaging Academic Medical Center and Teaching Hospital Leaders

AHA fosters dialogue among academic medical center and teaching hospital leaders and offers many opportunities to take an active role in shaping AHA policies and setting direction for the association and the field. They may have a formal role in association governance and/or policy formation by serving on AHA’s Board of Trustees, Committee on Health Strategy and Innovation, Regional Policy Boards, or Councils and Committees. In addition, academic medical center and teaching hospital leaders can participate on:

- **Academic Medical Center Strategic Leadership Group** that drives the AHA academic medical center and teaching hospital strategy and advocacy agenda and addresses graduate medical education funding, workforce issues, the 340B drug pricing program, site neutral payments and rising drug prices.
- **Committee on Clinical Leadership** which offers hospital-based physicians a unique opportunity to participate in AHA’s broader policy and advocacy activities and to more specifically weigh in on clinical and quality policy issues.
- **Metropolitan Hospitals Council** which advises AHA on policy and advocacy issues impacting academic medical centers, teaching hospitals, public and urban hospitals.
- **Advocacy Alliances** including the Advocacy Alliance for Graduate Medical Education, the Advocacy Alliance for the 340B Drug Discount Program and the Advocacy Alliance for Coordinated Care.
- **Leadership Briefings** for small groups of executives to discuss care delivery and financing approaches, demonstrations, pilots and initiatives.

Providing Key Resources for Academic Medical Centers and Teaching Hospitals

Based on member input, AHA, often in partnership with others, develops and offers resources to support academic medical centers and teaching hospitals. Examples include:

- **Task Force on Ensuring Access in Vulnerable Communities.** 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.
- **Teaching Hospitals: Preparing Tomorrow’s Physicians Today.** This AHA June 2015 TrendWatch explores policy issues related to preserving the unique role teaching hospitals play in education, research and patient care.