

Call for Content

May 12-14 Dallas, TX

The American Hospital Association is bringing together leaders from hospitals, health systems, public health and community-based organizations for the **2026 AHA Healthier Together** conference, May 12-14 in Dallas. This dynamic event will showcase real-world, data-driven strategies and innovative approaches to expand access to care, advance person-centered interventions and strengthen hospital-community partnerships. Attendees will explore collaborative solutions to address disparities in health outcomes and social drivers of health, as well as reimagine how to build more resilient health ecosystems across the country.

If you are among those driving this work and leading these important conversations around the country, share your knowledge by submitting a content proposal by September 16, 2025, at 11:59pm CT.

Contact us with questions at healthiertogether@aha.org.

SUBMIT PROPOSAL

Attendee Overview

The Healthier Together Conference is geared for leaders (e.g., directors, vice presidents, senior vice presidents, etc.) who work to improve health outcomes and address health disparities. Proposals should provide tactical solutions and case examples for those who hold positions in the following fields:

- Access and opportunity
- Community and patient engagement
- Community benefit
- Community health
- Health care administration
- Population health management
- Population level data collection and analytics
- Public health

Why Submit a Proposal

Speakers accepted to the AHA Healthier Together Conference receive the following benefits:

- Share your organization's success and inspire others by presenting your data and tactics to your peers.
- Take advantage of opportunities to network with peers and learn about the most recent advances to address disparities in health outcomes and improve health and well-being for your patients and communities.
- Recognition of your organization's work on a national stage.
- Enjoy a discounted registration rate to attend the full conference.

CONTENT AREAS

The Conference welcomes proposals that feature leading-edge tactics, thought leadership and experts in the field, particularly in the content areas listed below.

Reducing Disparities in Health Outcomes

Recognizes efforts aimed at reducing disparities in health outcomes to drive better health for all.

Leveraging Data to Drive Health Impact

Focuses on leading practices in data assessment, integration, and analytics to prioritize population and community health needs, uncover disparities, and guide targeted interventions.

Care Delivery Transformation

Covers the work being done to redesign care models to address health and social needs – including for maternal, child, and older adult populations – by delivering services where people live and thrive.

Strengthening Cross-Sector Partnerships

Highlights strategies for building and sustaining effective partnerships between health care systems, public health agencies and community-based organizations to support the health and well-being of patients and community members.

Centering Communities in Health Solutions

Actively engage patients and communities in the co-design of health programs and interventions to ensure solutions are responsive, accessible and sustainable.

PRESENTATION FORMATS

The AHA is committed to highlighting content of the highest caliber that expands conference attendees' knowledge base and fosters peer learning. We are seeking presenters who can transfer their organization's experience, demonstrate actionable tools and engage conference participants in discussion. Successful proposals will:

- Address practical needs of attendees from diverse professional backgrounds and organizations.
- Highlight key takeaways and how-to strategies for advancing health.
- Focus on evidence-based, replicable models.
- Demonstrate value and measurable impact.
- Encourage engagement and interaction from attendees.

Breakout Sessions

Concurrent breakout sessions provide an opportunity to share successful strategies with a broad audience.

Presenters will deliver informative and practical content, convey knowledge, demonstrate actionable tools, highlight key takeaways and focus on replicable models and measurable impact. These sessions will be organized by common themes and may be combined with an additional proposal into a panel-style presentation or discussion. If submitted proposals are combined, a member of the conference education committee will facilitate an introductory meeting and support the combined session as needed until the conference. Each breakout session will last 60 minutes with at least 15 minutes reserved for attendee Q&A and interaction.

Pre-Conference Workshops

A limited number of workshops, scheduled to occur immediately before the start of conference, allow attendees to actively learn, discuss and participate in practical activities focused on a specific topic area. Workshops should be interactive and include group exercises, hands-on demonstrations and facilitated discussions. Creative learning strategies should be employed to engage participants actively. This might include interactive elements, group activities or audience polls to foster engagement. The session should encourage discussion and questions, involving participants in meaningful conversations related to the topic. This type of session is designed to provide participants

with practical knowledge, tools, and strategies that they can apply directly in their health care organizations or community. Each workshop will last 2-3 hours.

Quick Bites

We are seeking original content about your organization's initiatives to improve community and population health and address disparities in health outcomes to present "story slam" style in lieu of a traditional poster session.

Accepted proposals will be grouped into topic clusters and provided with guidance on how to structure their story. Quick bite presenters will provide a short (5 – 7 minute) overview of an issue your organization has addressed through innovative approaches, specifically addressing the issue, along with the intervention and lessons learned.

SELECTION CRITERIA

Submitted proposals will be evaluated by a panel of experts according to the following criteria:

- 1. **Demonstrated impact** Highlights the collection and use of data to drive action and measure results. Shows the outcomes or impact on improving health and reducing disparities in health outcomes, both in terms of successes and failures.
- 2. **Collaborative** Integrates the patient and/or community voice in codesign and showcases the effectiveness of working with different organizations to reach a common goal.
- 3. **Application to practice/transferable –** Showcases models and tools that can be adapted to audience members' own hospitals, organizations or community settings. Focus on the "how" vs. the "why."
- 4. **Innovative** Extent to which the program or initiative displays innovation or originality.
- 5. **Sustainable and scalable –** Highlights sustainable and measurable practices that can be scaled for impact.
- 6. **Relevance** Extent to which the proposal addresses the focus and selected content area and is applicable to the work of conference attendees.
- 7. **Clarity –** Extent to which the proposal offers a clear description of the proposed session and practice-oriented learning objectives.

PLEASE NOTE: To preserve the integrity of the conference experience, AHA has a policy of **not selling** services, products or future consulting assignments during presentations. All accepted breakout session speakers will be asked to sign a speaker agreement that includes this policy.

All proposals must include at least one presenter from a health care (hospital/health system or similar entity), public health or community health organization. AHA membership is not required to present. Submissions that feature vendors, technical assistance providers or consultants as presenters will not be included in the submission review process. If your organization is interested in designing a breakout session or pre-conference workshop, please visit https://www.aha.org/healthiertogether to learn more, or send an email to healthiertogether@aha.org to reach the business development team.

SUBMISSION INSTRUCTIONS

Proposals must be submitted electronically. Proposals that are incomplete or do not follow the submission guidelines will not be considered for selection.

Step 1 – Presenter Information

You will first need to sign into or create a profile.

If you are submitting on behalf of someone else and are not a presenter, please indicate this by entering "SUBMITTER ONLY" in the "Title" field and leave the rest of the fields empty. Then add the presenter(s) via the blue "Add Another Presenter" button.

All presenters will receive a confirmation email upon submission. Please notify any individual you are adding as an additional presenter about their involvement in this submission before adding their name.

Information needed for all presenters (*Required)

*First Name

*Last Name

*Email Address

*Title

Credentials

*Company

Biography (200 words, please do not submit a CV)

Step 2 – Session Information

1. **Session title** (up to 70 characters)

2. **Goal:** (250 characters) Briefly summarize the primary goal or outcome of your session. What will attendees learn or be better equipped to do after attending your session?

Example: This session will provide a model for the integration of community and patient data to prioritize areas of focus for community health improvement planning and track impact for evidence-based interventions.

3. **Short description** (up to 2,500 characters) Provide a compelling and thorough description of your proposed session. Focus on practical insights and key takeaways for the audience. Submissions should address the following:

a. Topic & Relevance

- i. What specific health issues, challenges, or innovations will your session address?
- ii. Why is this topic timely or important for this conference's attendees?

b. Evidence and Lessons Learned

- i. What insights, approaches, or outcomes will you share?
- ii. What barriers or failures did you encounter? How were they addressed?
- iii. How might your experience inform or inspire replication, adaptation, or further innovation?

c. Audience Takeaways & Practical Value

- i. What specific tools or frameworks will attendees gain?
- ii. How can they apply these insights to their organization or community?
- 4. **Demonstrated impact** (up to 500 characters) Describe how the collection and use of data was used to drive action and measure results, including impact on addressing disparities in health, both in terms of successes and failures.
- 5. **Identify Collaborator** (up to 500 characters) What different organizations or teams did you work with externally and internally to reach this goal? How did you engage community members in codesign?
- 6. **Vendors and Solution Providers** (up to 250 characters) Please list any vendors or solution providers who participated in this initiative.
- 7. **Application to practice/transferable** (up to 500 characters) Describe how models and tools that can be adapted and presented.

You are encouraged to use Bloom's Taxonomy in your learning objectives.

- 8. **Learning Objectives (3)** for the audience from the presentation (up to 300 characters): These should emphasize the information or tools that attendees can apply to their work.
- 9. **Preferred presentation format:** Breakout session only, breakout session preferred, Quick Bite only, preconference workshop, or no preference.
- 10. Content area to which the presentation best relates (choose one):

| | □ Leveraging Data to Improve Health □ Care Delivery Transformation □ Strengthening Cross-Sector Partnerships □ Centering Communities in Health Solutions ving questions will help conference planners ensure that a variety of sessions d and create a robust agenda for attendees. Please choose one that best fits |
|----------------------------|---|
| | ry topic of your proposal. |
| 11. To _l | pics of Focus |
| | Behavioral health |
| | Care delivery transformation |
| | , |
| | Community health and environment |
| | Community health assessment |
| | Community investment |
| | Community partnerships |
| | Complex care |
| | Advanced data and analytics |
| | Digital health |
| | Education |
| | Employment Food inaccurity/Food is modicine |
| | Food insecurity/Food is medicine |
| | Health related social needs screening and intervention Homelessness/housing security |
| | Person-centered care |
| | Social isolation |
| | Transportation |
| | Trauma-informed care |
| | Violence prevention |
| П | Workforce development |
| | Other (please list) |
| 12. Po | pulation of Focus |
| | . □ Older Adults |
| | ☐ Children/Adolescents |
| | ☐ Disabled Individuals |
| | □ Veterans |
| | □ Women/Maternal |
| | □ Other (please list) |
| | |

- 13. Choose the primary **state** represented in the session.
- 14. Choose the primary **geographic environment** (select one)

| Urban |
|---|
| Rural |
| Suburban |
| VA Medical Centers and Outpatient Clinics |
| Tribal Health |
| Other (please list) |

Step 3 – Review and Submit

You have the option to save and edit or submit later. Edits can be made until the deadline. The presenters will receive a confirmation email once submitted.

NOTIFICATION

All submissions will be evaluated by AHA, and presenters will be notified of their acceptance status in December 2025. If selected, your name, biography, presentation title and session details will be made available on the Healthier Together Conference website and conference mobile app by March 2026. Conference attendees will receive your presentation via the mobile app.

We anticipate receiving more high-quality proposals than we can include in the conference agenda. We may contact you about featuring the proposed content through another component of the conference or share the proposal with AHA colleagues seeking additional educational content for 2026.

CONFERENCE FEES

All presenters are responsible for their own travel, accommodation expenses, and registration fees for the conference. Confirmed presenters will receive a discount code to register for the conference at a discounted rate.

Please note: if you are submitting on behalf of a group, please inform the selected speakers about the discounted rate.

TIMELINE

| PRESENTER TIMELINE | | | |
|---|--------------------------------------|--|--|
| PROPOSAL SUBMISSIONS DUE | Tuesday, September 16, at 11:59pm CT | | |
| All proposals must be submitted electronically. NOTIFICATIONS SENT | December 2025 | | |
| AHA will notify all applicants of their application status via email. | 2 3 3 3 1 1 2 2 3 | | |
| SPEAKER AGREEMENT DUE | January 16, 2026 | | |
| All accepted session presenters must fill out the speaker agreement form via | | | |
| Cvent to confirm conference participation. | | | |
| SESSION FACILITATION | January/February 2026 | | |
| AHA staff and/or the conference education committee will connect with | | | |
| session speakers and provide any needed support and answer logistical | | | |
| questions. SESSION DETAILS CONFIRMED | Fobruary 22, 2026 | | |
| The conference agenda is scheduled to go live in March 2026. Therefore, one presenter will need to approve and finalize session details (title, description, speaker names, etc.) via Cvent. Changes <i>can</i> be made after this date due to emergency speaker changes or additions, but we recommend presenters finalize all changes in Cvent up until a week before the conference. | February 23, 2026 | | |
| SESSION MATERIALS DUE Presenters must submit final slides and other materials via Cvent. Presentations will be available to conference attendees via the conference mobile app. Materials mentioned during the session that were not included originally can be added after the event. | April 23, 2026 | | |
| AHA HEALTHIER TOGETHER CONFERENCE | May 12-14, 2026 | | |

Please note that this document is only meant to prepare you for the online application process.

The actual application must be submitted via the <u>online</u> <u>platform</u> by

Tuesday, September 16, 2025, at 11:59 p.m. CT.