



# AMERICA'S ESSENTIAL HOSPITALS

## Membership Committee Webinar Minutes May 21, 2015

<b>Committee Members Present (5):</b> <ul style="list-style-type: none"><li>• Stan Hammack (Chair)</li><li>• Stephen McKernan</li><li>• Santiago Muñoz, III</li><li>• Jim Nathan</li><li>• Tom Traylor</li></ul>	<b>Committee Members Absent (3):</b> <ul style="list-style-type: none"><li>• LaRay Brown</li><li>• Jim Valenti</li><li>• Tim Goldfarb</li></ul>	<b>Staff Present (4):</b> <ul style="list-style-type: none"><li>• Kristine Metter</li><li>• Bruce Siegel</li><li>• Kristin Sinko</li><li>• Katie Zimmerman (dialed-in)</li></ul>
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Agenda Items	Minutes
Welcome and roll call (Hammack)	<ul style="list-style-type: none"><li>• Bruce Siegel called roll and noted which committee members were absent.</li></ul>
Policy Update (Siegel)	<ul style="list-style-type: none"><li>• Siegel gave a brief policy update which focused on the recent 340B advocacy win. Association staff was alerted to inclusion in upcoming legislation of an overhaul in the 340B program. The association had extreme concerns regarding the language as it changed the patient definition, created draconian penalties for noncompliance, etc. and was not always specific in those changes.</li><li>• As of the morning of May 21, all 340B overhaul language was dropped, but staff will remain vigilant on this topic.</li></ul>
Update on dues rollout (Siegel)	<ul style="list-style-type: none"><li>• Siegel reported that members are renewing ahead of pace from last year, and no institutions have dropped membership as a result of the dues increase. Only one member, Memorial Hospital in Gulfport, Mississippi, has decided not to renew in 2015, but the decision was not related to increased dues.</li><li>• There are some outstanding dues from members, but these should be coming in shortly.</li></ul>
Discuss update to membership plan (Metter)	<ul style="list-style-type: none"><li>• Kristine Metter began by briefly overviewing the membership plan implemented in 2012.</li><li>• The three main focuses of this plan were recruitment, retention, and governance. The plan has been very successful, and the association has seen strong growth since 2012. Over the last few years, the association recaptured lapsed members, formalized the onboarding process, and established a robust committee structure. The new membership plan for 2015-2018 will take stock of how the association delivered on those goals and how to move forward.</li><li>• Metter detailed how the membership looks today versus three years ago, as highlighted in the charts and maps at the back of the draft plan.</li><li>• Metter then detailed the new membership plan, which will focus on recruitment, retention and member engagement.</li></ul>

	<ul style="list-style-type: none"> <li>• Recruitment activities will continue to include both direct mail and personal outreach.</li> <li>• Retention activities will focus on communications with newer members and expanding the points of contact within each member hospital or system.</li> <li>• Member Engagement will include short-term or ad-hoc activities that are more project-oriented and do not require lengthy time commitments.</li> <li>• Metter asked for approval from the committee on the plan and recommendation to bring it to the board in June. All committee members approved the plan and the motion was carried.</li> </ul>
<b>Discuss relationship with alliances (Metter)</b>	<ul style="list-style-type: none"> <li>• Metter explained the different categories of the association's members: full, associate, and affiliate. Metter told the committee that certain members do not fit within the descriptions in the bylaws, which is an issue the committee will need to address. These members include the Georgia Hospital Safety Net Coalition (GHSNC) and the Safety Net Hospital Alliance of Florida (SNHAF).</li> <li>• <i>Committee question: Will GHSNC and SNHAF have a reason to exist in the membership when we move them into a new category?</i></li> <li>• Siegel explained that the category would change, but the close-working relationships with the organizations would not change.</li> <li>• Metter explained additional relationships America's Essential Hospitals has with other associations that are not as formal. These include California Association of Public Hospitals (CAPH), Teaching Hospitals of Texas (THOT), and the Hospital Alliance of New Jersey.</li> <li>• Metter spoke to the considerations for the allied affiliate members. Committee members agreed that the questions regarding the categories were well laid out and a good start. Staff were asked to bring a detailed proposal to the committee for consideration in August.</li> <li>• A committee member suggested the possibility of individual memberships. This would be a limited membership, but could help spread the association's reach and visibility. Siegel and Metter agreed this is a valuable idea to consider.</li> </ul>
<b>New member recruitment (Siegel)</b>	<ul style="list-style-type: none"> <li>• Siegel thanked the committee for their efforts with new member recruitment.</li> <li>• Siegel mentioned two institutions he hopes will be joining shortly: University of Vermont and Memorial Health System in Savannah, GA.</li> </ul>
<b>New business (Hammack)</b>	<ul style="list-style-type: none"> <li>• Hammack confirmed that the next membership committee call will occur on August 3, from 3:30–4:30 pm ET.</li> <li>• Hammack expressed appreciation to all committee members for their work on America's Essential Hospitals' issues and willingness to share.</li> </ul>
<b>Adjournment (Hammack)</b>	<ul style="list-style-type: none"> <li>• The meeting was adjourned at 11:11 am ET.</li> </ul>