

Membership Committee Conference Call Minutes August 22, 2013

Committee Members	Committee Members Absent	External	Staff Present (3):
Present (3):	(4):	Consultant (1):	Kristine
David Lopez (chair)	 Stan Hammack 	• Sherri	Metter
LaRay Brown	 Gary Marchand 	Jacobs	Bruce Siegel
• Joe Orlando	 Jim Nathan 		 Katherine
	 James Valenti 		Susman

Agenda Items Minutes

Membership Status Update Recap Previous Dues Discussions	 Seven new members: University of Arkansas (UAMS), University of Arizona Health Network, Swedish Covenant, University of Illinois, Henry Ford, Temple, Norwegian American Others in the pipeline: University of Missouri, Bon Secours Two losses: Cooper Green, LSU Dues are currently a flat fee regardless of hospital size at \$55,125 (\$27,600 for Associate Members). Need to look at this structure and see if this is conducive to the varying sizes of our members, take into consideration equity. Current flat rate is potentially a barrier for small hospitals to join. There is a desire for a rational approach to pricing.
	Should pricing be contingent on another factor, size, resources used etc.?
Introduce Sheri Jacobs, CAE, and Avenue M Group	 Extensive experience with this process over several years. Worked on dues projects with a variety of associations, especially a number in health care. Will be working closely with the organization to get all of the necessary information and context to make this a smooth and productive transition.
Discuss Common Challenges in Restructuring Membership Dues	 Member retention, making sure that members understand the new structure and are comfortable with the change. Weighing the pros and cons of the possibility that America's Essential Hospitals may lose some members but have a more efficient and productive dues system. How does one decide what the right structure is? Size may not be an entirely comprehensive measuring stick as some smaller hospitals may still use a lot of the association's resources. There is a need to balance equity with resources used. This change should reflect the strategic goals of the organization. The process may be a good platform to consider who we "have at the table" in

Review Project	terms of membership – what role do different members play and are they necessary/a good fit as part of this organization? Are there prospective members we want based on the political landscape? • Members need to feel that price is worth the value, there is competition with other organizations in which hospitals participate (for example, state associations are a necessity). • Members will typically look at the following: price, perceived value, affinity with the group, and bandwidth to participate. • Emphasis that there needs to be a gradual, phased approach so as to make any changes, especially potentially large increases, palatable for members. Members must be able to budget for their dues paid and become acclimated to a new structure. • This is an 18 month project with a target of Board approval in March 2014 and
Scope and Explain Each Stage of the Project	 Inis is an 18 month project with a target of Board approval in March 2014 and implementation in January 2015. Project Phases: 1 – "Deep dive" into looking at the structure in place, looking at the competitive market and best practices, seeing the current and past research in this field
Discuss Project Goals and Objectives Adjourn	 Analyze the current dues structure and determine the change(s) that needs to be made. Establish the best pricing model and financial plan. Avoid the problems that can arise with a dues restructuring. Link to the association's strategic plan. Execute a gradual but efficient timeline for any changes to take effect. Reminder that the Membership Committee will meet in-person on September 30. Hotel information, travel policy, etc. have been sent to all members via email. Agenda and materials will be sent closer to the date of the meeting. There will likely be 2-3 additional calls between the September meeting and early March