



2014 MHA President's Report to the Membership



★ LEADING THE NATION IN HEALTHCARE ★

Introduction



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2015

For me, this year's President's Report is a time of reflection, as it will be the last such report before my official retirement June 30, 2015.

My professional career has revolved around politics and health policy, beginning in Washington, DC, and Albany, NY, and finally in Lansing, MI, with the MHA. I have only been in capital cities, as that has been where the action is. Coming to Michigan, I was asked by the search committee to make a commitment to the MHA for a minimum number of years — I chose seven, which was my tenure in the previous cities. It's been a little more than that.

The purpose of the MHA President's Report is to provide an annual snapshot of the association's accomplishments on behalf of our members. As you can see, similar to past years, there have been many in 2014.

One way that I have measured my time here is to look back on our significant accomplishments over the years, including medical liability reform, creating the MHA Keystone Center, becoming the "Trusted Voice in Healthcare," establishing the first hospital public data efforts in 1996 and developing the Quality Assurance Assessment Program, which secures more than a billion dollars annually for our hospitals and health systems.

It would not be fair if I didn't also disclose our biggest disappointment — the failure of a ballot proposal to win back Michigan's tobacco settlement funds for healthcare. But we were well respected in the state for our efforts to do what was right for the health needs of Michigan's population, and those initial efforts ultimately helped lead to the creation of a smoke-free Michigan.

An even better measure of the MHA's value is our talented and innovative staff. The MHA is the best in the country at what we do and that is what has allowed us to achieve the outstanding results in public policy and politics that are the hallmark of the association. Our work is replicated across the country and even across the globe.

Two quotes that I have always felt were a good characterization of the MHA's efforts include:

About change: "There is no single defining action, no grand program, no one killer innovation, no solitary lucky break, no miracle moment. Rather the process resembles relentlessly pushing a giant heavy flywheel, turn upon turn, building momentum until a point of breakthrough, and beyond." — Jim Collins

There is no single defining action, no grand program, no one killer innovation, no solitary lucky break, no miracle moment. Rather the process resembles relentlessly pushing a giant heavy flywheel, turn upon turn, building momentum until a point of breakthrough, and beyond.

— Jim Collins

“There are known knowns: the things you know you know. There are known unknowns: the things you know you don’t know. But there are also unknown unknowns: the things you don’t know you don’t know.”

— Donald Rumsfeld

Dealing with uncertainty: “There are known knowns: the things you know you know. There are known unknowns: the things you know you don’t know. But there are also unknown unknowns: the things you don’t know you don’t know.”
— Donald Rumsfeld

For the MHA, persistence has been important. Reflecting on the Collins quote, it took 10 years from the time that the goal was initially set in 1985 before we were successful in achieving medical liability reform, the results of which our members continue to benefit from even today. Health reform certainly applies to the Rumsfeld quote and the impact on hospitals, where unknowns are significant. And it is in this area where the MHA seeks out the many unknowns and has a bias toward action to serve the members.

While the policy issues and regulatory achievements vary greatly, the legacy I am most proud of is the development of the “MHA family” culture that consistently drives our high-performing staff. The MHA has been designated by *Modern Healthcare* as one of the 100 best healthcare organizations in the country in which to work. Within Michigan we are also well recognized, and there is never any shortage of applications for jobs at the MHA. And yet it is because of the stability and continuity of our talented team that we have been able to achieve so much in Lansing and Washington, DC.

In closing, I thank the MHA members for the opportunity to spend the best years of my professional and family life here in Michigan.

I encourage you to read this report so you can appreciate the value the MHA provides to its members and the citizens of Michigan.

Sincerely,



MHA President Spencer Johnson and his wife, Julianne, during the dedication of the Spencer C. Johnson Building, the MHA’s headquarters in Okemos, in September 2013.



Advocacy

As part of the MHA's mission to become the most effective healthcare advocate in Michigan, the MHA worked on a number of issues impacting hospitals and the patients and communities they serve. In 2014, the MHA tracked 300 healthcare-related bills that were introduced in the Michigan Legislature. The MHA and its members also took their advocacy efforts to Washington, DC, numerous times in 2014.

Supporting Medicaid Expansion

The MHA spent much of early 2014 in close collaboration with the governor's office, Michigan Department of Community Health (MDCH) and healthcare stakeholders working to implement the Healthy Michigan Plan, Michigan's unique version of the Affordable Care Act's Medicaid expansion. The association helped lead a robust and coordinated process to prepare healthcare providers, community outreach agencies and others for enrollment. Efforts included educational webinars and trainings, media toolkits, and paid and social media advertising campaigns. On April 1, 2014, the state opened enrollment for the Healthy Michigan Plan. **As a result of these collaborative outreach and enrollment efforts, more than 500,000 individuals were covered by the Healthy Michigan Plan by the end of 2014.**



Protecting Michigan's Auto No-fault Law

Michigan's auto no-fault insurance law ensures needed medical and rehabilitation benefits for survivors of traumatic auto accidents, yet the system is constantly under attack by auto insurers seeking to reduce benefits to accident victims and impose government fee schedules on healthcare providers. The MHA works closely with the Coalition Protecting Auto No-Fault (CPAN) and other partners to make sure the public, the healthcare community and accident victims stay informed and engaged on this issue.

The MHA opposed a proposal from then-House Speaker Jase Bolger (R-Marshall) that would have permanently reduced healthcare coverage for catastrophically injured auto accident survivors in exchange for a two-year, 10 percent reduction in auto insurance rates and the imposition of a government-mandated fee schedule that would limit payments to healthcare providers to 125 percent of workers' compensation rates. With support from the MHA Board of Trustees, the MHA prepared and proposed an alternative reform plan for auto no-fault.

Connecting Hospitals and Lawmakers



Parag Amin, DO (right) and Steve Minnick, MD (center) from St. John Hospital and Medical Center, Detroit, meet with Sen. Roger Kahn (R-Saginaw Twp.), then-chairman of the Senate Appropriations Committee, to thank him for his support of graduate medical education (GME). More than 40 physician residents and hospital representatives met with lawmakers in April to discuss how the state's investment in GME is critical to providing access to care for Medicare, Medicaid and uninsured patients who do not have a medical home.



Detroit's WJR news talk radio host Paul W. Smith (left) discusses House Bill 4714, which launched the Healthy Michigan Plan to expand Medicaid coverage, with MHA Executive Vice President David Seaman (far right). The MHA sponsored Smith's "Live in Lansing" broadcast in January and gave the MHA the opportunity to share insights on several key political issues of importance throughout the state.

While Bolger's proposal failed to gain support in the House, Sen. Arlan Meekhof (R-West Olive) introduced another proposal in the weeks leading up to December's lame-duck session and this bill is expected to surface again in the new legislative session.

Your Vote is Vital

The MHA kicked off the 2014 election season under the theme Your Vote is Vital. The association offered members complimentary promotional and informational materials to encourage staff, volunteers, patients and visitors to vote in the Nov. 4 general election. Additionally, the MHA activated a dedicated election page on the MHA website for election updates, the Race of the Week series, an election snapshot, candidate listing and other resources. In the weeks leading up to the general election, the MHA used Facebook and Twitter to encourage participation in the election and promote the Race of the Week series, which focused on five key races during the election. Collectively, these election-related posts had more than 8,000 views.

The 2014 MHA Health Political Action Committee (PAC) campaign received a record \$378,000 in contributions to help develop and support healthcare champions for state and federal offices. During the 2014 general election, 94 percent of MHA Health PAC-supported candidates won their bids for public office.



Senior State Capitol Correspondent Tim Skubick (left) quizzes a participant at the Healthcare Advocacy Day in April about the 2014 election. More than 200 volunteers, 23 hospital chief executive officers (CEOs) and staff from MHA-member hospitals and health systems attended the event, which focused on the importance of grassroots advocacy in local communities and in Lansing. Nearly 70 state legislators joined attendees for lunch at the event, giving healthcare advocates the opportunity to discuss legislative issues with their elected officials.



(Left to right) Sen. Mark Jansen (R-Gaines Twp.) accepts the Michigan Organization of Nurse Executives (MONE) Lamplighter Award from MONE Past President Michael Markel, vice president of patient care services and chief nursing officer, Henry Ford Macomb Hospitals, Clinton Township. MONE is an MHA affiliate that is comprised of registered nurses in leadership roles at Michigan health systems and hospitals. More than 40 members of MONE attended the sixth annual MONE Advocacy Day, which allowed attendees to inform state lawmakers about the vital role nursing, nursing education and nursing professionals play in the health and well-being of the state and its residents.



Mission-driven Funding

The MHA's mission-driven funding efforts are dedicated to bringing together hospital and health system employees, trustees, volunteers and the public to deliver healthcare public policy and advocacy messages that support Michigan hospitals in providing the most efficient, affordable care possible.

Fixing the Health Insurance Claims Assessment Revenue Shortfall

The MHA was instrumental in successfully advocating for legislative approval of solutions to the Health Insurance Claims Assessment (HICA) revenue shortfall, a problem that has plagued the state since the assessment was introduced in 2011. In finding a short-term fix, the Legislature approved the use of surplus state revenue to address the shortfall of \$114.5 million.

The MHA Board of Trustees identified achieving a longer-term solution to the HICA revenue insufficiency as a key priority of the MHA. The fix reduced the 1 percent HICA rate to 0.75 percent and reinstated the 6 percent use tax for Medicaid managed care organizations, which cover the majority of the Medicaid population. According to the House Fiscal Agency, the legislation reduced the HICA shortfall for FY 2014 to \$32.1 million and eliminates the projected shortfall for FY 2015.

Presenting Findings of MHA Task Force on Future Health Insurance Markets

As part of the MHA Board of Trustees' request to explore strategies for the future relationship with Blue Cross Blue Shield of Michigan (BCBSM) and other insurers, the MHA Task Force on Future Health Insurance Markets published a report summarizing a year of work with Kaufman Hall, a consulting firm selected for its national perspective. The task force included members from both the BCBSM Participating Hospital Agreement Advisory Committee and the MHA Board.

Ensuring Patient Access to Healthcare; Protecting Hospital Funding

Gov. Rick Snyder signed the fiscal year (FY) 2015 MDCH budget June 30 and the new budget took effect Oct. 1. Throughout the budget process, the MHA plays an important role in educating elected officials and public policymakers about how proposed legislation will financially impact Michigan hospitals and the healthcare community. As a result of this year's advocacy efforts, the FY 2015 MDCH budget directed more than **\$95 million** in additional funding to Michigan hospitals to help serve patients and communities. Highlights of the budget include the following provisions:

- An **\$85 million** provider tax-funded outpatient disproportionate share hospital pool expansion (\$46 million net to hospitals after tax and state retention).
- An **\$11 million** pool (General Fund (GF)-funded) for a small and rural hospital obstetrics stabilization fund.
- A **\$36 million** small and rural hospital pool (GF-funded), restored after the governor's original budget recommendation completely eliminated this funding.
- Restoration of **\$4.3 million** (GF-funded) to support GME. Michigan is a nationwide leader in preparing future physicians, and these funds help provide patients with access to physician care, attract federal and private research funding and maintain a steady supply of physicians who live and work permanently in Michigan.

In addition, the MHA successfully advocated for a **\$19 million** (\$10 million net) increase to the FY 2013 tax-funded disproportionate share hospital quality assurance assessment program.

The report outlines key recommendations and next steps based on programs provided to the MHA Board and members that examined public and private exchanges nationally and in Michigan. Alternative strategies for providers and health plans on new payment models were evaluated and discussed. Models included in the strategic discussion were narrow-provider networks, high-deductible plans and value-based contracts. Kaufman Hall also provided analysis on BCBSM's value-based contracting program. Additionally, strategic scenarios were identified to evaluate value-based readiness, consumerism and patient behavior changes, and potential paths to move forward.

Providing Financial Impact Analyses to Hospitals

In 2014, the MHA provided hospitals with statewide and hospital-specific financial reports and impact analyses for Medicare's proposed and final rules for inpatient, outpatient, home health, long-term acute-care, skilled nursing facility, inpatient rehabilitation facility, inpatient psychiatric facility, value-based purchasing and readmission reduction programs. Additional information included communications about the two-midnight rule, the administrative law judge backlog on pending Medicare administrative appeals and a Medical Services Administration claims processing issue that impacted critical access, cancer and children's hospitals.

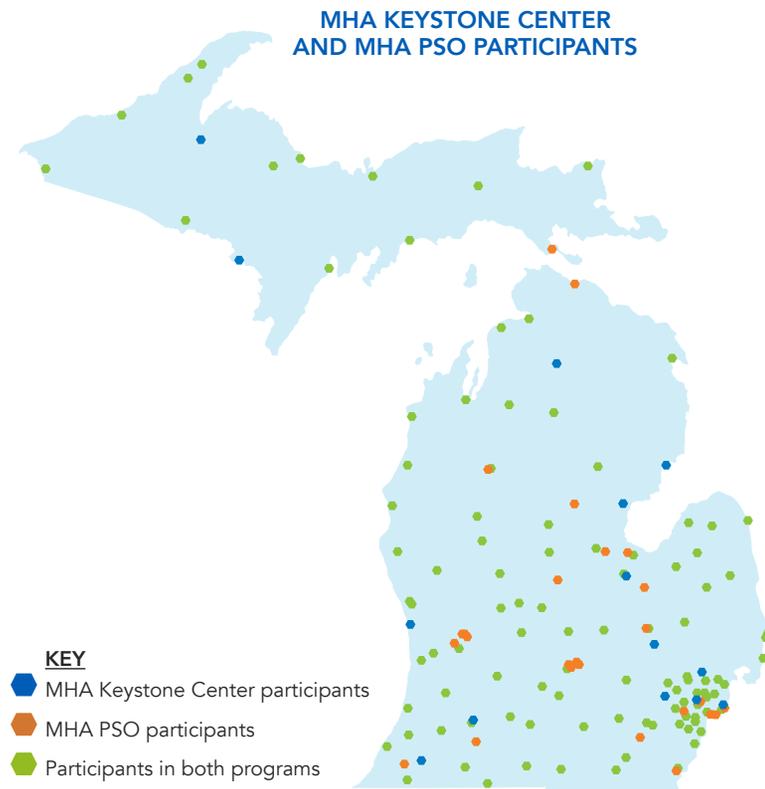
Helping Members Prepare Healthcare Consumers

To address healthcare consumers' growing demand for healthcare cost information, the MHA Board of Trustees authorized a workgroup to provide input on media-sensitive charges and "shoppable" services, in addition to developing educational materials to assist hospitals with implementing the payment limitations section of Public Act 107 of 2013. The result of the member input is the MHA Payment Limitations Toolkit, a resource designed to help Michigan hospitals prepare to answer healthcare consumers' questions about the cost of services and procedures. The Web-based kit is divided into three sections: informational resources, hospital staff resources and patient communications resources.

Quality of Care

For more than a decade, Michigan hospitals have voluntarily implemented evidence-based best practices that save lives, reduce harm and lower costs. New data demonstrated that:

- Michigan hospitals reduced the incidence of central-line-associated bloodstream infections by 66 percent from 2004 through 2013.
- From 2010 through 2013, participating hospitals reduced the number of babies admitted to the neonatal intensive care unit by nearly 60 percent.
- Participating hospitals reduced hospital-acquired pressure ulcers by 32 percent from first quarter 2011 through fourth quarter 2013.
- Michigan hospitals reduced the mortality rate for septic patients by 36 percent and increased the rate of compliance for care of a septic patient by nearly 40 percent from second quarter 2011 through fourth quarter 2013.
- MHA Keystone: Surgery hospitals reduced the surgical specimen defect rate by 84 percent from first quarter 2010 through fourth quarter 2013.



MHA Keystone HEN

Nearly 100 Michigan hospitals participated in the MHA Keystone Hospital Engagement Network (HEN), a three-year effort under the federally funded Partnership for Patients that concluded in December 2014. The effort aimed to reduce 10 hospital-acquired conditions and lower readmissions. As a result, MHA Keystone HEN hospitals prevented mortality and harm to patients and avoided \$40 million in excess healthcare costs. Lessons learned from the MHA Keystone HEN are being used to influence the future direction of the MHA Keystone Center.

MHA PSO

The MHA Patient Safety Organization (PSO) continues to collect and analyze patient safety events occurring in Michigan and translates that information into actionable improvement efforts.



MHA

Patient Safety Organization

The most notable categories of serious adverse events reported by MHA PSO members are medication errors; falls; device, medical/surgical supply or health information technology; and surgery or anesthesia. The MHA PSO works with the MHA Keystone Center to address these and other issues.

The MHA PSO regularly hosts members-only Safe Tables to encourage shared learning among healthcare peers to exchange patient safety experiences, discuss best practices and learn in an open and uninhibited environment. In 2014, as a direct result of a discussion at the MHA PSO Safe Table on children's and neonatal care, the University of Michigan Health System and the University of Michigan College of Pharmacy, in collaboration with the Michigan Pharmacists Association, the Food and Drug Administration and the MHA PSO, issued standards for compounded oral liquids for children.



Member Achievements

Michigan hospital leaders continually show the necessary acumen and vision to ensure their facilities are prepared to care. The following leaders were honored with awards that recognize the difference they make in the state's healthcare.



The **MHA Meritorious Service Award** is the highest achievement recognition bestowed upon Michigan hospital leaders. Winning the 2014 award were (top to bottom) Garry C. Faja, president and CEO, Saint Joseph Mercy Health System, Ann Arbor, with his wife, Barbara; John MacLeod, CEO, Mercy Hospital Cadillac, with his wife Freda; and Spencer Maidlow, CEO, Covenant HealthCare, Saginaw, with his wife, Kathy.

The **MHA Ludwig Community Benefit Award** honors collaborative hospital programs that serve local residents and improve their well-being. The 2014 winners are programs run by Alpena Regional Medical Center; Oakwood Healthcare Inc., Dearborn; Spectrum Health Gerber Memorial, Fremont; and War Memorial Hospital, Sault Ste. Marie. The programs addressed cancer patients' transportation issues to receive care, childhood obesity and chronic disease prevention. (Top left photo) Oakwood Healthcare was represented by (left to right) President and CEO Brian Connolly; Betty Priskorn, corporate director, Community Outreach; and Mary Zatina, senior vice president, Government Relations and Corporate Communications. (Top right photo) The award for the Alpena Cancer Center was presented to (left to right) Alpena Regional Medical Center CEO Karmon Bjella; T. Anthony Denton, acting CEO and chief operating officer, University of Michigan Hospitals and Health Centers, Ann Arbor; and Linda Ross, partner, Honigman Miller Schwartz & Cohn LLP, Detroit. (Bottom right photo) Randall J. Stasik, president, Spectrum Health Gerber Memorial, Fremont, accepted the award on behalf of the Tamarac Center. (Bottom left photo) War Memorial Hospital President & CEO David Jahn (left) accepted the award, joined by (left to right) Teresa Armstrong, program coordinator; Marla Bunker, chief nursing and operating officer; volunteer driver Jeff Moran; and longtime program supporter Craig Froggett of DeVere Construction.



Paul LaCasse, president and CEO, Botsford Hospital, Farmington Hills, was named a **2014 Grassroots Champion** by the American Hospital Association (AHA) for his exceptional leadership in generating grassroots and community activity in support of Botsford's mission.



The MHA Health PAC raises funds to help elect healthcare champions. Nine Michigan hospitals and health systems received **Health PAC awards** for their exceptional fundraising performance during the 2014 campaign. Hospital representatives accepting awards included (left to right) Tina Freese-Decker, senior vice president, chief strategy officer, Spectrum Health, Grand Rapids; Edward Bruff, executive vice president and chief operating officer, Covenant HealthCare, Saginaw; Diane Postler-Slattey, president and CEO, MidMichigan Health, Midland; Greg Lane, senior vice president & chief administrative officer, McLaren Health Care, Flint; Orvil Beecher, chairman-board of trustees, Hills & Dales General Hospital, Cass City; Sheryl Lewis Blake, CEO, Pennock Health Services, Hastings; Loren Hamel, MD, president & CEO, Lakeland Healthcare, St. Joseph; Danny Haag, vice chairman-board of trustees, Hills & Dales General Hospital; and Karmon Bjella, CEO, Alpena Regional Medical Center. (Not pictured are representatives from Mercy Memorial Hospital System, Monroe).



Hospital programs that improved their communities also received well-deserved awards. Sparrow Hospital, Lansing, received the **AHA's Hospital Award for Volunteer Excellence** in the fundraising program category for its Women Working Wonders (W3) volunteer group. Representatives from Sparrow Hospital accepted the award for W3's dedication to providing the best health education and preventive medicine possible to mid-Michigan women.



The **MHA Healthcare Leadership Award** honors outstanding individuals who provided exceptional leadership to healthcare organizations and the health and well-being of the community. The 2014 recipients of the award were (left to right) Loren B. Hamel, MD, president and CEO, Lakeland HealthCare, St. Joseph; Alice Gerard, RN, MSN, then-president and CEO, McLaren Bay Region, Bay City; and Al Deering, chairman, Board of Directors, Spectrum Health Ludington Hospital (not pictured).



The **MHA Keystone Center Patient Safety & Quality Leadership Award** recognizes those who promote efforts to improve patient safety and quality. The 2014 award in the executive leadership category went to (left to right) Cheryl Knapp, vice president of quality at Bronson Healthcare, Kalamazoo, and chief quality officer at Bronson Battle Creek. In the category of clinician leadership, the award was jointly given to Robert Prodinge, DO, medical director of emergency medicine, and Penny Rathburn, DO, medical director of Bronson Internal Medicine Hospital Specialists.

Education and Membership Services

The MHA and MHA Health Foundation offer a variety of education and membership services to its members. Frequent seminars, workshops, webinars and conferences help members understand current and evolving healthcare regulations, discover and embrace new efficiencies, and fulfill their community missions as healthcare providers. The MHA also aims to educate and engage members and the general public on social networks. Additionally, the MHA Service Corporation helps members manage unemployment liability costs.

Healthcare Leadership Academy

Healthcare Leadership Academy: Business Strategy for a Changing Landscape is an educational program for healthcare leaders, including physicians and clinicians, that will be offered in 2015. Developed by the MHA, the Michigan State University (MSU) Eli Broad College of Business, the MSU College of Osteopathic Medicine and the Michigan Osteopathic Association (MOA), the academy will cultivate physicians' leadership skills and provide information on innovative care delivery and financing models that will give them an advantage in the future.



MHA Health Foundation Webinars

The MHA Health Foundation partnered with other state hospital associations to provide nearly a dozen educational webinars to members, including topics focusing on The Joint Commission federal laws and regulations, board of trustees' collaboration, improving patient outcomes, medication management protocols, legal compliance and more.

Excellence in Governance Fellowship

Eleven individuals graduated from the Excellence in Governance Fellowship, a nine-month program that focuses on enhancing board member knowledge, skills and value. With the graduation of this class, there are more than 135 alumni fellows in Michigan hospitals working to move their boards from simply effective to exceptional. Additionally, 12 individuals make up the 2014-2015 class, which held its first session in October.

Major Membership Meetings

Winter Leadership Conference

Designed for small and rural hospital executives, the MHA Health Foundation *Winter Leadership Conference* brought together nearly 130 individuals and focused on strategies to create a transformed healthcare delivery system based on population health, pay-for-performance and a culture of innovation.

Patient Safety & Quality Symposium

Titled *Patient Safety: Changing the Rules, Creating the Vision*, the MHA Patient Safety & Quality Symposium drew more than 300 clinical and executive leaders to explore ways providers can improve patient care through patient and family engagement while increasing reliability and creating system-level change.





The 2013-2014 graduates include (left to right, back row) David Keyes, McLaren Port Huron; Patrick Shannon, Mackinac Straits Health System, St. Ignace; Cyril White, St. Joseph Mercy Chelsea; Nathan Tagg, Pennock Health Services, Hastings; Charles Squires, Scheurer Hospital, Pigeon; Steven Hufford, Charlevoix Area Hospital; (left to right, front row) Nancy Goodin, Pennock Health Services; Kimberly Norris, MD, Pennock Health Services; Deborah Lamm, Botsford Hospital, Farmington Hills; Pamela Myler, McLaren Central Michigan, Mt. Pleasant; Gordon Gallagher, North Ottawa Community Hospital, Grand Haven.

Social Media Accomplishments

To keep up with the ever-changing, fast-paced digital world, last summer the MHA ramped up its presence on social media with the goal of taking a more strategic approach to when, where and how content is posted. So far, efforts to establish the MHA as the “Trusted Voice in Healthcare” and the source for healthcare information online have resulted in the average monthly reach growing from approximately 7,000 to 25,000 total views. Future goals include using social media to promote member successes, increase public healthcare literacy, and provide professional, shareable content for MHA members and followers.

 [facebook.com/Michiganhospitals](https://www.facebook.com/Michiganhospitals)

 [@Mihospitalassoc](https://twitter.com/Mihospitalassoc)

Keeping Unemployment Liability Low

The MHA Service Corporation Unemployment Compensation Program (UCP) saved valuable resources for Michigan hospitals by helping them manage the significant cost of unemployment liability. In 2014, the UCP:

- Represented more than 300 healthcare employers across Michigan and several other states
- Processed nearly 7,000 claims
- Held actual liability to about \$9.8 million, compared to potential liability of \$28 million
- Identified fraudulent claims and recovered improper charges assessed against Michigan hospitals



Annual Membership Meeting

The Annual Membership Meeting, *Transforming the Culture of Healthcare*, brought together more than 700 healthcare leaders and their families at the Grand Hotel on Mackinac Island. Participants celebrated the year's accomplishments while learning from nationally renowned speakers and each other on how to best prepare for the changing healthcare landscape.



Governance Leadership Forum

The MHA Health Foundation *Governance Leadership Forum* created an ideal environment for top national and state experts in healthcare policy, economics and leadership to help formulate an answer to what healthcare should be and how healthcare governing board members and executives, community stakeholders and consumers can create a healthcare delivery system that fulfills that vision.

Collaboration

Partnerships are crucial to the success of the MHA in ensuring all Michigan residents have access to the resources they need to live healthy lives. In addition to the collaborative efforts mentioned below, the MHA also partners with organizations including the MOA, Michigan State Medical Society, Small Business Association of Michigan and MSU, among others.

Protecting Patients from Infectious Diseases

Hospitals are routinely on alert for infectious diseases that could compromise the health of their patients, employees and communities. Nothing highlighted that more than the diagnosis of the first case of Ebola in the U.S. in October. The MHA worked closely with state government through the existing emergency preparedness regional network to understand the readiness of member hospitals and identify the potential need for additional supplies and training. In addition, the MHA joined the governor and the MDCH at a media roundtable to discuss the preparedness of Michigan hospitals to treat and control the virus.

As Ebola appeared in media headlines, the MHA continued to partner with the MDCH to reduce the risk of the much more prevalent and easily transmitted viruses that cause influenza and pertussis. Since 2011, the MHA and the MDCH have jointly urged hospital CEOs to review their facilities' vaccination policies and ensure their healthcare personnel have received up-to-date vaccines for flu and pertussis. Vaccination information available on the MHA website is updated annually in collaboration with the MDCH.

Fighting Hunger

For 16 years, the MHA and its member hospitals have served as a primary sponsor of the Michigan Harvest Gathering, a statewide effort to stock the shelves of Food Bank Council of Michigan food banks across the state. About 60 hospitals and health systems conducted food and fund drives at their facilities in 2014, contributing a combined donation of nearly 70,000 pounds of food and more than \$60,000 to provide nutritious meals for Michigan's hungry citizens.

David Seaman (left) presented the MHA's \$30,000 corporate donation during the campaign kickoff at the state Capitol. Joining him (left to right) are Wal-Mart Foundation representative Dawn Nolan, Food Bank Council of Michigan Board Chair Kenneth Estelle, Secretary of State Ruth Johnson, Michigan Department of Agriculture and Rural Development Deputy Director Gordon Wenk, and Attorney General Bill Schuette.



Encouraging Sustainability

For the past seven years, the MHA's Michigan Green Healthcare Committee (MGHC) has worked to reduce the healthcare industry's ecological footprint by partnering with the Michigan Department of Environmental Quality to host the Michigan Green Healthcare Conference. The 2014 event included the inaugural Michigan Green Healthcare Awards presented to an organization and individual who have reduced energy consumption, promoted responsible waste management, and made healthy and sustainable foods available in their communities. Recipients of this year's awards were Beaumont Health System, Royal Oak, and Colin Murphy, building systems and energy manager, University of Michigan Hospitals & Health Centers, Ann Arbor.



In addition to the annual conference, the MGHC has engaged Michigan hospitals in the Healthier Hospitals Initiative (HHI), a national campaign consisting of six challenges that aim to improve environmental health and sustainability in the healthcare sector. The MGHC created a goal to have 60 percent of Michigan hospitals enrolled in at least one HHI challenge by the end of 2015. To date, 46 percent of Michigan hospitals have enrolled.

Conclusion

This past program year has been one of the most challenging yet for hospitals, as the healthcare delivery system grows increasingly complex and providers are challenged to move outside the acute-care setting into the community to support population health. Despite numerous hurdles, the MHA and its united membership have ensured that hospital funding is protected, coverage to the uninsured is expanded, and caregivers are working together to make care safer — all impressive feats. Yet, the MHA is greater than the sum of these parts. In this difficult environment, the MHA serves as the trusted voice and provides unmatched value to its members by simplifying what is complex, convening key stakeholders, providing the best information and setting the healthcare agenda in Michigan. In 2015 and beyond, as pressures on hospitals increase, these qualities will only become more important. With visionary leadership and a dedicated staff, the MHA looks forward to continuing to lead its members and the nation in healthcare.





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