The only constant in healthcare seems to be change — for patients, for providers and for advocates. As a result of catalysts like the Affordable Care Act, new payer and delivery models, and the rise of consumerism, a greater need for leadership has arisen — and health systems and hospitals are filling this space.

As your roles and footprints expand and evolve, the MHA must adapt and lead to provide you with exceptional value. Michigan has been a leader in terms of healthcare quality and cost. However, we at the association must continually evaluate what is driving change. Doing so ensures we are positioning ourselves so that others continue to look to us as an example of what our healthcare delivery system can do when we break down silos, collaborate, embrace transparency, and meet patients and communities where they are in their health journey.

In the past 12 months, the MHA has taken significant steps to modernize its structure and strategies so we can do just that: lead our members and lead healthcare. The following report provides members with highlights of the 2015-2016 program year, including how the MHA worked to meet and exceed the priorities identified by our governing board and deliver value to our members at every turn. We look forward to continuing our partnership to lead Michigan to better health in the coming year.

Sincerely,

MHA CEO Brian Peters

2015-2016 MHA Board of Trustees Chair Rob Casalou
Member Priorities

PROTECT AUTO NO-FAULT
The MHA successfully protected the auto no-fault insurance system despite aggressive tactics of opponents, including attempts to create a second-class insurance program for Detroit residents called D-Insurance. Doing so prevented a loss of up to $1 billion for Michigan hospitals.

PROTECT STATE BUDGET HEALTHCARE FUNDING
The MHA negotiated early in 2016 with the Snyder administration and legislative leadership to ensure full protection of three critical hospital funding pools: graduate medical education, the small and rural access pool, and the obstetrics stabilization fund. At a time when state officials are faced with serious budget challenges, the value of the MHA’s early budget deal provides even greater value to members. The MHA also helped secure an extension of the Health Insurance Claims Assessment, without which hundreds of millions of dollars supporting Medicaid would have been jeopardized.

PROTECT ACCESS TO CARE
The MHA and members engaged in numerous activities to protect the Healthy Michigan Plan as part of a collective effort focused on maintaining coverage and program funding for 600,000 Michiganders. This included submitting formal comments to the Centers for Medicare & Medicaid Services encouraging the federal
government to approve state waivers that continued the program and MHA-led federal lobbying efforts of members of Congress.

The MHA also continued work on legislative issues such as scope of practice and nursing shortages and worked to protect the Certificate of Need program to help ensure adequate access to high-quality, cost-effective care now and in the future across Michigan.

**PROTECT PROVIDER TAX PROGRAMS**

Michigan's hospital tax program has delivered **$1.1 billion in healthcare funding** this program year, every dollar of which has been critical to maintaining access to care amid state budget challenges. As the federal government’s focus on provider tax programs increases, this funding is no longer a given — and they must be protected against use for nonhealthcare agendas. This year, the MHA was successful in advocating for the continuation of Michigan’s provider tax program.

**MODERNIZE PAYER RELATIONSHIPS**

In 2015, the MHA began evaluating and modernizing our relationships with private payers. Amid continued uncertainty in the insurance market and the increase in provider-owned insurance entities, the MHA, with Board participation, is carefully evaluating historical relationships with key insurers and taking steps to ensure those relationships continue to provide high value for hospitals and health systems and the patients they serve.
ADVANCE HEALTHCARE QUALITY AND SAFETY

The MHA Keystone Center this year sought to maximize Michigan hospitals’ ability to provide safe, effective and efficient care through the implementation of a high-reliability initiative, in partnership with the Joint Commission Center for Transforming Healthcare, to reduce variation in patient safety and operational metrics.

The MHA Keystone Center launched its Hospital Engagement Network (HEN) 2.0 in the fall of 2015. Working in conjunction with the Illinois Health & Hospital Association, dozens of Illinois hospitals joined the project, expanding Michigan’s leadership in quality improvement into new geographic territory.

The MHA also embarked on efforts to address the opioid epidemic by launching a Pain Management collaborative to identify best practices for pain management and help hospitals manage patients’ pain appropriately; participating in the Michigan Prescription Drug and Opioid Abuse Task Force chaired by Lt. Gov. Brian Calley; launching a pain management social media campaign; and working with organized medicine to advocate for improved access to lifesaving treatments for opioid addicts. Efforts also included an MHA Twitter chat on the topic of opioids, the association’s first use of this medium.

SOCIAL MEDIA SNAPSHOT
#MHAHealthChat

ESTIMATED REACH

92,131

EXPOSURE

1,571,350 IMPRESSIONS

ACCOUNTS REACHED

180

< 10

386

< 100k

150

< 1k

13

< 100

55

< 10k

0

< 100k+

4 DAYS

ACTIVITY

729 TWEETS

55 CONTRIBUTORS

13 REPLIES

800

600

400

200

0

Mar 9

Mar 10

Mar 11

Mar 12

513 RETWEETS

203 TWEETS

Bars show number of tweets sent by users with that many followers.

See a recap of our 10 day #SocialMedia #PainManagement campaign here: storify.com/MIHospitalAsso ... #MHAKeystone
Modernizing the Association

As the MHA membership adapts and grows in this changing healthcare environment, so must the association. The MHA this year began examining ways to improve upon existing business practices, services and programs to help modernize the organization. As part of this effort, our executive leadership began executing a series of changes to ensure the MHA’s continued ability to successfully lead its members into the future of healthcare delivery, beginning with our core mission. Effective July 1, 2016, the MHA’s mission, vision and tagline have been updated to better reflect an evolved, more integrated healthcare system.

UPDATE THE MHA DUES AND GOVERNANCE STRUCTURES

In recent decades, the membership has evolved from more than 220 hospitals to fewer than 140 today. Yet, the MHA’s dues and governance principles remained unchanged. This program year, the MHA Board of Trustees appointed a Task Force on Dues and Governance that was charged with modernizing both structures. The task force created a contemporary governance structure that ensures opportunities for all members to participate, while recognizing the connection between governance and financial contribution. These updated structures took effect July 1, 2016.

SEEK GREATER OPERATING EFFICIENCIES

This year, the MHA sought — and will continue to seek — greater operating efficiencies, including adopting a strategic vetting process for corporate sponsorships, reducing its rent costs, renegotiating vendor contracts, modernizing executive and employee benefit plans, and streamlining administrative functions.
DIGITAL AND VISUAL COMMUNICATIONS

Based on the results of a 2014 communications audit (including member feedback collected as part of the audit), the association is working on a number of initiatives to enhance communication with MHA members and reinforce the MHA brand with key audiences. To date, these efforts include a cohesive branding campaign to modernize the look and feel of the MHA’s communications and a complete rebuild of the MHA website (underway). The MHA also adopted video and visual infographics under the “Leading Michigan to Better Health” banner as a primary storytelling tool and dramatically increased its use of social media vehicles to educate and engage key audiences.

LEADING MICHIGAN TO BETTER HEALTH

PRODUCTS AND SERVICES

Nondues revenue sources are a critical component of the MHA’s financial health. This year, the MHA embarked on a review of the MHA Service Corporation and its products and services to establish a process for evaluating new opportunities and exploring business opportunities outside Michigan. The MHA has also enhanced its sales efforts related to the association’s print shop and graphic design departments to increase the external customer base.

ORGANIZATIONAL ALIGNMENT

Recognizing the increase in hospital-employed physicians and the need to further integrate care, the MHA has continued its collaboration with organized medicine via the Partnership for Michigan’s Health. The partnership includes the MHA, the Michigan State Medical Society and the Michigan Osteopathic Association and has focused this year on coordinating efforts on opioid abuse, the Flint water crisis and the release of the latest Economic Impact of Healthcare in Michigan report. The MHA has also developed a new, strategic partnership with the MOA this year, providing additional visibility and access to the MOA membership. The MHA hired its first chief medical officer, Gary Roth, DO, to help strengthen the association’s engagement with physicians and organized medicine.

Through a new strategic partnership, the MHA is able to provide members that are Coverys customers with a 3 percent savings in their risk management premiums simply by using the MHA Keystone Center’s ReAdmetrix readmissions analytics tool.
Strategic Roadmap and Best Information

DATA TRANSPARENCY

The desire for greater transparency in healthcare — from consumers and the media — is growing, and the MHA continues to seek ways to improve the availability of high-quality, consumer-friendly information to help people make better healthcare decisions.

- The MHA Keystone Center recently empaneled a task force to develop a transparency road map to accelerate quality improvement through the use of shared data.

- The MHA Keystone Center is helping hospitals reduce readmissions by creating data submission efficiencies with the Michigan Health Information Network (MiHIN). Specifically, the MHA is working — with members’ permission — to access hospitals’ automated data transfer information so that admissions, discharges and transfers can be reviewed in the context of other hospital quality data.

- The MHA has rebuilt and rebranded its hospital cost and quality transparency website to provide for an easy user experience, better information for patients, and the ability to verify cost, quality and one’s personal benefit information all in one place. The site, www.verifyMIcare.org, is scheduled to go live in the summer of 2016.

In the past 12 months, the MHA has taken significant steps to modernize its structure and strategies.
Strengthening our Unified Voice

The MHA launched several new initiatives that bring together hospital professionals to learn, advocate and network. The MHA held six forums to educate members’ finance professionals on key state budget issues and held a successful inaugural summer conference for hospital communications and public relations staff. The MHA also continued its Excellence in Governance Fellowship program, which provides hospital trustees with the tools necessary to be a successful board member.

In response to ongoing issues in the public policy and health delivery arenas, the MHA is launching the MHA Task Force on Behavioral Health Integration and the MHA Council on Children’s Healthcare Issues.

The MHA also continued its tradition of bringing members, trustees, payers, legislators and others together at its four yearly, major membership meetings. Photo highlights of these events are available at www.mha.org.
A Forecast for the Year Ahead

In the coming MHA program year, Michigan healthcare will continue to become more integrated, more value-driven, and more transparent. The integration is not just hospital-to-hospital, but throughout the continuum of care; the volume-to-value drumbeat can be heard from the federal government in their evolving payment models just as loudly as it can be heard from private insurers; and the demand for greater transparency with respect to both cost and quality is moving from media headlines to the halls of Congress and the state Legislature. Public policy and advocacy continue to be profoundly important, as the decisions that are made in Lansing and in Washington, DC, directly impact healthcare for more people than ever before. In that respect, the November election could significantly impact the political landscape and our future efforts on Medicare and Medicaid funding, hospital and physician payment reform, medical liability, auto no-fault insurance, Affordable Care Act implementation, and many other key issues. At the end of the day, you can count on the MHA to be your trusted partner and advocate as we work together on “Leading Healthcare.”

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2016-2017 Program Year

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REFERENCES
Please visit our 2015-2016 online photo album showcasing the highlights of the 2015-2016 program year! You can find the album at www.mha.org

Find the entire MHA team online at http://www.mha.org/about/staff.htm

Find and engage with the MHA and MHA Keystone Center on social media:

@MIHospitalAssoc and @MHAKeystoneCtr

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Get news, resources and more at www.mha.org and www.mhakeystonecenter.org or call us at (517) 323-3443.