PUTTING PEOPLE FIRST
AS HOSPITAL LEADERS, IT IS INCUMBENT UPON US TO HELP OUR HOSPITALS survive in these tenuous financial and heavily regulated times. Membership in the Arkansas Hospital Association is one of the best tools for keeping us abreast of the constant changes in healthcare legislation and regulation. It also allows us a venue in which to work with one another as we seek best practices, collaborate on national and state health issues, and identify resources that will help us keep our community hospitals alive.

The Arkansas Hospital Association seeks to give its member hospitals the best value for their membership dollars. This year, some of those dollars were reinvested into a new educational wing joined to the association’s headquarters building. This educational center will allow hundreds of people each year to participate in workshops and classes designed to help Arkansas’ hospitals keep in sync with federal mandates. It will also serve as a learning center for administrative leaders, department managers, coders, compliance officers and many others who keep our hospitals running smoothly. The knowledge gained at the AHA education center helps assure that our hospitals are exposed to the latest in healthcare system management.

This year, I have been particularly proud to be a part of the AHA’s diligent work toward both a statewide trauma care system and its ongoing participation in regional emergency and disaster planning efforts. As we have seen in the past, the AHA so often takes the lead in overarching healthcare programming efforts and encourages our state to move forward, often the lone voice that eventually brings needed change – and better healthcare – for all of the citizens in our state.

We will continue to advocate for quality care and excellence in patient service for the communities we serve. You, as a member of this important association, can rest assured that your AHA Board of Directors and Staff will continue to diligently focus on your issues, concerns, and priorities toward putting people first.

Ray Montgomery
Chairman, AHA Board of Directors

AS I LOOK BACK AT THE ARKANSAS HOSPITAL ASSOCIATION’S PAST YEAR, there are several items I would like to highlight:

• We have completed the expansion project/education center that our board has been planning and discussing for the past seven years. Not only is the expansion complete, it is totally paid for. The board set money aside for many years in order to fund the education center’s construction, and worked with AHA Services, Inc. to fund the addition to our building. It offers a state-of-the-art learning facility that will immediately become the hub of AHA workshops, discussion sessions, meetings and classes.

• We are very fortunate to have an outstanding board of directors. They are involved, they give us direction, yet trust the AHA staff to do what needs to be done. They hold us accountable, yet allow us to do what is necessary day to day. When many hospital association boards are asked to meet only three or four times a year, our board is committed to meeting 10 times annually. It is a dedicated group, and one that works with an eye both to the present and the future as healthcare reform in America moves forward.

• Our staff is a very hardworking group. Each person cares about the job they do, and the way in which it is done. They like working with our members and our board, and likewise enjoy working with each other. During the admitted chaos of the construction, moving, re-networking of the computer system and all that goes with completion of a new building, the staff stood together and kept a positive attitude. We have an excellent team. I am proud to be a part of it!

Phil E. Matthews
President and CEO
The Arkansas Hospital Association each year sets forth strategies for the coming fiscal year, focusing on its four major foundational tenets: Advocacy, Education, Data Collection and Analysis, and Communication. **Strategies for Fiscal year 2008-2009 include:**

### Advocate

**Actively Advocate for Arkansas’ Hospitals**

- Ensure that legislation aimed at securing adequate funds to implement the plan for a statewide trauma care network remains a priority of the Governor, legislators, Department of Health officials and others and will be pursued during the 2009 General Assembly.

- Develop, in conjunction with the AHA Council on Government Relations, a legislative package designed to benefit the association’s member organizations and an advocacy agenda for accomplishing those goals during the 2009 legislative session.

- Build on the current positive relationships with officials of the state Departments of Health, Human Services and Insurance to ensure that hospitals’ concerns are heard and addressed in relation to programs, rules and regulations proposed and implemented under their authority.

- Work with state Medicaid officials to finalize and implement the Arkansas Medicaid Plan provision for an increase in payment rates for hospital outpatient services retroactive to January 1, 2008.

- Ensure that future expansions of Medicaid-specific quality measures for use in the state’s Quality Incentive Payment Program are reasonable and subject to input and agreement by the state’s hospitals.

- Continue to advocate for state and national legislative, regulatory and judicial actions in support of accessible, cost-effective, high-quality healthcare.

- Meet directly with members of the state’s congressional delegation and/or their chief health aides as needed, but at least two times during the year to discuss issues important to Arkansas hospitals.

- Maintain positive relationships and communications with the members of Arkansas’ congressional delegation to continue their near 100% support for legislative and regulatory issues that are developed and pursued during the 11th Congress as part of hospitals’ national advocacy agenda.

- Actively oppose any attempts by the Centers for Medicare & Medicaid Services to effect changes in federal rules and regulations that would adversely affect the state’s Medicaid UPL program.

- Increase contributions to the AHAPAC over the 2007-08 total.

### Educate

**Provide Education Resources and Opportunities**

- Publish an electronic version of Arkansas healthcare laws and regulations.

- Provide educational programming and opportunities designed to assist members with marketplace challenges and compliance with constantly changing regulatory requirements in the healthcare arena. Many of these educational events will be held in the AHA’s new classroom.

- Assist member hospitals to better equip them to respond to natural and/or man-made emergency situations related to weather, disease outbreaks, chemical/nuclear/biological terrorist attacks and other forms of emergency situations.

- Intensify efforts to educate members on potential union activities in the state.

- Create an online manual for hospital governance leaders.

- Encourage Arkansas hospitals to continue 100% participation with the Institute for Healthcare Improvement’s 5 Million Lives Campaign as a way to improve patient safety and quality of care.

- Continue to design, facilitate and support projects to improve the quality of hospital care delivered in member institutions.

- Complete the implementation of a statewide wristband standardization quality and patient safety initiative.

- Provide in-state educational opportunities for member hospitals, their employees and trustees covering such issues as quality reporting, medication errors, patient safety, EMTALA, compliance, governance, emergency readiness, HIPAA, reimbursement, coding and other topics.

- Educate the public on the importance of their local community hospitals and the medical and support staff members who serve their health needs.
Anticipate Data Needs
Seek, Explain and Provide Healthcare Data; Address Data Reporting Issues

- Continue active participation in the development of Department of Health rules and regulations implementing the Arkansas Health Facility Infection Disclosure Act to ensure that appropriate national guidelines are followed in establishing the voluntary reporting of hospital infection data, and promote hospital compliance with those reporting standards.

- Develop and implement a membership survey to be conducted during the October 2008 annual meeting.

- Enhance the value of AHA membership by creating new services, expanding the types of and access to information on issues including, but not limited to, reimbursement, quality and outcomes measures, and increasing the political power of the association.

- Monitor, address and resolve ongoing legislative, regulatory and policy issues concerning requirements for public reporting of hospital data. Communicate results to member hospitals.

Communicate
Inform, Communicate, Provide Networking Opportunities

- Expand and improve AHA’s relationships with private third-party payors in the state in order to facilitate better communication between AHA’s members and private payors, and provide education to member hospitals to assist them in their individual negotiations with private payors.

- Continue to improve ongoing communications with officials of CMS’ Dallas Regional Office and develop a positive relationship with the newly designated Medicare Administrative Contractor, as well as the state’s new Medicare Recovery Audit Contractor and assist hospitals in preparing for and managing RAC audits.

- Improve relationships with the state’s business community and reposition hospitals as large employers that pay excellent wages and strongly influence economic development.

- Revise and update the AHA Bylaws to better assist the AHA board and staff in carrying out their respective duties, and revise AHA policies in order to address the requirements of the new IRS Form 990.

- Continue to work with AHA Services to provide and develop programs and services to benefit Arkansas hospitals.

- Inform all AHA member hospitals on an ongoing basis about issues, concerns, activities and actions affecting hospitals and healthcare at the state and federal levels, to ensure their knowledge about and involvement with those matters.

- Provide printed, online, and face-to-face resources for AHA member hospitals so they may keep abreast of current issues, legislation, and communication needs in the hospital field.

- Promote networking and communication through sponsorship of 13 Affiliated and Allied Healthcare organizations.

Arkansas Hospitals: A NUMBER OF IMPORTANT FACTS

108
Hospitals of all types are located in cities, towns and communities across Arkansas. They include 47 general acute care community hospitals, 28 Critical Access Hospitals, 10 long term care hospitals, eight psychiatric hospitals, seven rehabilitation hospitals, three specialty surgical hospitals, two Veterans Affairs hospitals, as well as a pediatric hospital, a cardiac hospital and a women’s hospital.

101
Member organizations belong to the Arkansas Hospital Association. They include 95 Arkansas hospitals, two out-of-state, border city hospitals (Memphis and Texarkana), two outpatient cancer treatment facilities, one inpatient hospice and a United States Air Force medical clinic.

46
Arkansas counties are served by a single hospital.

43
Arkansas community hospitals have fewer than 100 beds. Twenty-eight of them are designated by the federal government as Critical Access Hospitals, having no more than 25 acute care beds.

21
Arkansas counties – almost 30% of all counties in the state – do not have ready access to a local hospital.

Those counties are:

- Calhoun
- Clay
- Cleveland
- Grant
- Lafayette
- Lee
- Lincoln
- Lonoke
- Madison
- Marion
- Miller
- Monroe
- Montgomery
- Nevada
- Newton
- Perry
- Poinsett
- Prairie
- Searcy
- Sharp
- Woodruff
Arkansas community hospitals have closed their doors since January 2004. 46% Of AHA member hospitals are charitable, not-for-profit organizations, while 32% of the hospitals are owned and operated by private, for-profit companies, and 21% are public hospitals owned and operated by a city, county, state or federal government. 14,955 Arkansans sought inpatient or outpatient care from Arkansas’ hospitals each day in 2006 for illnesses, injuries and other conditions requiring medical attention. 39,232 Babies were delivered in Arkansas hospitals in 2006. About 60% were covered by the state Medicaid program. 43,000 Arkansans are employed by hospitals across the state, which have a combined annual payroll of $1.7 billion that helps to support about 7.7% of all non-farm jobs in the state through direct and indirect purchases of goods and services. $126 Million The cost of charity care provided in 2006 through Arkansas hospitals for patients without health insurance coverage. $9.3 Billion The estimated overall economic impact that Arkansas hospitals provided for the state in 2006, based on direct spending on goods and services, their impact on other businesses throughout the economy, jobs, and employees’ spending.

<table>
<thead>
<tr>
<th>Utilization and Financial Indicators, Community Hospitals, 2006</th>
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<td>Admissions</td>
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<td>Inpatient Days</td>
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<td>Cost of Charity Care Provided</td>
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<td>Patient Service Margin</td>
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<td>Other Operating Revenues</td>
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<td>Operating Margin</td>
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Source: American Hospital Association, 2006 Annual Survey

Total Hospitals Licensed in Arkansas                                108
Total AHA Member Organizations                                    101
AHA Member Hospitals (Arkansas)                                    95
AHA Member Border Hospitals (TX, TN)                               2
AHA Member Non-Hospitals (Arkansas)                                4

Arkansas Hospitals by Classification

<table>
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<th>AHA Members by Congressional District Total = 99</th>
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(AHA members only) 95

- Urban General Hospitals 25
- Rural General Hospitals 22
- Critical Access Hospitals 26
- Specialty Hospitals 6
- Psychiatric Hospitals 7
- Long Term Care Hospitals 4
- Rehabilitation Hospitals 3
- VA Hospitals 2

Arkansas Hospitals (Non-AHA Members) 13

- Critical Access Hospitals 2
- Rehab Hospitals 4
- Psychiatric Hospitals 1
- LTAC Hospitals 6

( Including non-hospitals, excluding border hospitals)
A VALUABLE MEMBER BENEFIT

Whether through your PDA or cell phone, email or mailbox, AHA members have at their fingertips many valuable and varied resources for keeping on top of the latest in healthcare. Each is designed to provide accurate, timely and helpful information on issues impacting the hospital field. Current resources available to members are:

**The Notebook**  
This weekly publication, which is available online, includes timely updates on regulatory rules and policies, upcoming legislative activity, current healthcare survey information and other news pertinent to the healthcare audience. Also included are a look at what’s happening at Arkansas hospitals, upcoming AHA events and editorial commentaries from AHA staff members.

**Legislative Bulletin**  
Published throughout the Arkansas Legislative Session, this bulletin updates readers on current healthcare issues under debate in the Arkansas General Assembly. At times, the bulletin serves as a call to members to communicate directly with their elected officials.

**HOTLINE**  
Issued as a quick-action, electronic communication tool, the HOTLINE is from AHA president Phil Matthews, and always concerns issues of breaking news important to hospital stakeholders.

**Arkansas Hospitals**  
This quarterly magazine features articles on federal and state healthcare policies, as well as updates on topics in the arenas of Quality, Patient Safety, Electronic Medical Recordkeeping and Disaster Preparedness. Also covered are healthcare events occurring across the state. The summer issue focuses on detailed statistical information pertinent to healthcare in Arkansas.

**The Arkansas Trustee**  
Formulated with the hospital trustee in mind, this informative newsletter not only keeps officials updated on healthcare policy, but also looks at ways to improve the trustee/hospital/community relationship.

**www.arkhospitals.org**  
The AHA Web site is a great resource for both current and archived information. Here, you’ll find online copies of all AHA printed publications, daily news bulletins from the healthcare field, information on all AHA workshops and events, and important updates from the American Hospital Association.

**www.hospitalconsumerassist.com**  
This new Web site offers quality and pricing information concerning Arkansas hospitals, and is meant to serve as a factual starting point for consumers who seek more informed discussion with their hospital, physician or insurance company.

**Facts & Features**  
Published by AHA Services, Inc., this quarterly publication includes articles by AHA Services’ providers and showcases member benefits.

**Strategies Newsletter**  
This new monthly risk management newsletter addresses risk management issues specific to physician practices and hospitals. It is available on the AHA Web site; click on “Publications.”

**eBulletin**  
Published and emailed monthly by the AHA education department, this publication works for the betterment of healthcare education for AHA members. It offers a monthly rundown of available conferences, workshops, classes, meetings and Webinars, including careLearning Web courses. Also included is a list of the national healthcare-related special observances for the month, with Web links to the organizations sponsoring them.

**careLearning.com**  
This monthly online newsletter keeps hospitals up-to-date on new courses offered to healthcare professionals via the careLearning.com network. New Webinars, designed to keep training and recertification costs down, are listed every month.

**AHA Databank**  
This free data and information program is an online database of hospital utilization and financial performance indicators. It makes available a series of management reports hospitals may use internally, as well as offering the opportunity for hospitals to obtain benchmarking information on key operating indicators.

To access the Databank for your hospital’s use, contact Paul Cunningham at 501-224-7878 or email him at pcunningham@arkhospitals.org.
AFTER YEARS OF PLANNING and saving (and months of construction) the new 4,500 square foot wing of the Arkansas Hospital Association was completed in the summer of 2008.

The original AHA building (on the current site) was completed in 1989, after a capital campaign that allowed it to be built debt-free. The 2008 expansion is also completely paid for. 60% of the funding came from the AHA and 40% from AHA Services, Inc., the wholly owned subsidiary of the AHA that provides group purchasing options to save member hospitals money.

The expansion was designed by the architectural firm The Wilcox Group; Nabholz Construction served as contractor for the project.

The new wing has a large meeting/educational classroom that comfortably seats 60, as well as a pre-meeting gathering area, a designated kitchen for preparation of workshop-goers’ snacks and lunches, and offices for AHA and AHA Services, Inc. staff. The boardroom and additional offices, including an office where AHA members can check phone messages and email or have privacy for physician and/or personnel interviews, are also housed in the new wing.

Both the classroom and the AHA boardroom have been equipped with state-of-the-art audio and visual systems.

The AHA bought land for its original building and this expansion in the 1970s. The long-range plan was to first build the original building, and later add an educational wing. The original building served the AHA well for nearly 20 years, but with the number of workshops and meetings sponsored by the association, it was long known that the educational wing would be a welcome addition.

In its first week, the classroom hosted four workshops and meetings. The facility will continue to host an average of three to four events each week.

Also a part of the expansion is a tiered parking lot that accommodates 65 vehicles, up from the original lot’s 20 spaces.
It has always been a primary focus of the Arkansas Hospital Association to represent Arkansas’ hospitals at the state and federal levels, working to achieve fair treatment on legislative, regulatory and payment matters. Advocacy continues to be a vital part of the AHA’s strategic work and, in today’s volatile political environment, is perhaps more necessary than ever before. While carrying the message of how pending legislation or newly proposed rules and regulations could impact the way that Arkansas hospitals operate, the AHA’s advocacy role has expanded to include educating community leaders and the general public about the unique issues related to healthcare and the value that hospitals add to communities across Arkansas.

What follows are some of the accomplishments the AHA has achieved in fiscal year 2007-2008 on behalf of Arkansas’ hospitals:

Medicare/Medicaid

■ Succeeded in gaining support from all or most of the state’s congressional delegation on issues including:
  1) Opposing CMS’ proposed across-the-board behavioral offset Medicare cuts
  2) Including Medicare bad debt as part of the full value of community benefits on the new IRS 990 form
  3) Opposing the President’s proposed Medicare/Medicaid cuts for FY 2009
  4) Lowering the inpatient rehab facility threshold from 75% to 60%
  5) Delaying implementation of the Medicare Recovery Audit Contractor program
  6) Increasing the Medicare GME caps
  7) Supporting and improving the SCHIP program
  8) Continuing the moratorium on Medicaid rules affecting the use of intergovernmental transfers
  9) Working to provide mental health parity
  10) Limiting the growth of physician-owned specialty hospitals

■ Updated the AHA’s previous studies concerning Medicaid and found that in 2006, the state’s hospitals lost $100 million on inadequate Medicaid payments.

■ Negotiated with representatives of the Arkansas Department of Human Services and the Arkansas Medicaid Program for a $20 million annual increase in hospital outpatient reimbursement.

■ Worked to educate the Arkansas State Chamber of Commerce about the impact of Medicare cuts on employers’ healthcare premiums and succeeded in getting a letter from the group opposing the behavioral offset and other Medicare cuts being proposed by CMS for FY 2008.

■ Worked in conjunction with the Arkansas Medicaid program to get a six-month delay for Arkansas’ implementation of a new Medicaid policy requiring the submission of National Drug Code information of Medicaid claims involving administered drugs.

■ Worked with the state Insurance Commissioner to resolve problems related to dishonest advertising and solicitation practices of Medicare Advantage plans.

■ Provided critical analyses of the impact of federal reimbursement changes and continued to work closely with the state’s congressional delegation to prevent reductions in Medicare/Medicaid reimbursement and to advocate for Medicare and Medicaid payments at levels adequate to cover hospitals’ costs of providing patient care services.

Disaster Preparedness/Response

■ Coordinated the expansion of hospital communication capabilities for use in the event of a flu pandemic or other situations requiring their participation in response to disasters or emergencies.
Quality Initiatives

- Initiated preliminary discussions with Governor Mike Beebe to build support for legislation in the 2009 Legislative session to fund a statewide trauma system.
- Supported hospitals’ participation in the national Hospital Quality Alliance and continued to work in conjunction with the Arkansas Foundation for Medical Care, the CMS-designated Quality Improvement Organization, on quality improvement projects aimed at enhancing outcomes for patients treated in Arkansas hospitals.
- Updated the AHA’s price/quality Web site www.hospitalconsumerassist.com to include all-payer data.

Rural Medicine

- Monitored the development of rules covering dispute resolution procedures for the Arkansas Rural Medical Practice Student Loan and Scholarship Board to ensure hospitals’ concerns were addressed.

Insurance Issues

- Intervened in a hearing before the state Insurance Commissioner to ensure that hospitals’ rights to negotiate individual payment rates with private health plans are safeguarded.

Washington, DC Communication

- Strengthened relationships between the AHA and offices of members of the state’s congressional delegation and their chief health aides, ensuring that they were continually updated and briefed on hospitals’ issues and concerns.
- Provided up to $1,000 to help defray expenses for hospital CEOs who attended the American Hospital Association’s 2008 Annual Membership Meeting.

Reimbursement

- Coordinated separate meetings with Arkansas Blue Cross Blue Shield for psychiatric hospitals and for Critical Access Hospitals to discuss the opportunity for individual hospitals to negotiate with the insurer on reimbursement issues.

Member Services/Benefits

- Intervened on behalf of the state’s hospitals in a litigation matter involving the confidential nature of occurrence reports relating to in-hospital accidents.
- Finalized plans and implemented construction of an expansion to the AHA Headquarters Building.
- Sponsored a program recognizing hospitals for their excellence in advertising.

AHAPAC Mission Statement

Our hospitals’ revenue streams are heavily dependent on Medicare and Medicaid reimbursements, decisions about which are made by elected leaders at the federal and state levels. Our direct communication with these leaders is, therefore, critical. Every healthcare worker (not just those in administrative positions) has a vested interest in these communication lines remaining open and strong.

Contributions to the AHAPAC help in these vital communication efforts. When you and your co-workers in the healthcare field contribute to the AHAPAC, you are providing one means for the AHA to directly support political candidates sensitive to healthcare issues and concerns.

The AHAPAC helps support candidates at the state level. Through its participation with the PAC of the American Hospital Association, candidates at the federal level are also supported. PAC participation means taking an active role in government, and this year helped open communication lines which resulted in favorable legislation for the healthcare field.

AHA Executive Vice President Bo Ryall, left, represented the Arkansas Hospital Association when North Arkansas Regional Medical Center’s CEO, Tim Hill, was awarded the 2008 Arkansas Grassroots Champion Award in Washington, D.C. The award is given by the American Hospital Association to those who provide leadership in generating grassroots and community activity in support of a hospital’s mission.
Keeping our member hospitals informed and “on top” of breaking hospital news and issues, as well as providing opportunities for those employed in the hospital field to network and share best practices are two more of the valuable services offered by the AHA. In the fiscal year just completed, communication, education, legal and networking highlights include:

- Educated and prepared member hospitals for the arrival of new Medicare Recovery Audit Contractors in late summer of 2009.
- Regained approved provider status for continuing education from the Arkansas Nurses Association.
- Continued to push for improvements in hospital quality and patient safety by joining with the Arkansas Foundation for Medical Care as a participating organization with the Institute for Healthcare Improvement’s 5 Million Lives Campaign.
- Added a Vice President and General Counsel to the executive staff in order to provide in-house legal services to the association and legal information and assistance as a value-added service to members.
- Provided legal information guidance for members in com-
Conducted an in-state Mid-Management Certificate Series of eight workshops conducted throughout the year to help groom hospitals' employees for advancement into mid-level management positions and awarded certificates to 30 individuals who participated in at least five courses in the eight-course series.

Provided in-state education for more than 4,000 hospital employees through workshops and Web-based instruction on subjects including compliance, revenue cycle improvement, CPT and ICD-9 coding, supervisory skills, chargemaster maintenance, ambulatory payment classifications, JCAHO standards updates, quality and patient safety, legal issues, emergency readiness, governance matters, information technology and Medicare updates.

Communicated on an ongoing basis with the AHA membership, trustees, state legislators and government leaders, and the Arkansas congressional delegation on issues impacting the state's hospitals and healthcare systems through the weekly newsletter, The Notebook, the quarterly Arkansas Hospitals magazine, and the quarterly The Arkansas Trustee, as well as special “HOTLINEs.”

Offered a summer leadership conference and annual membership meeting to educate hospital CEOs and management teams about federal issues, healthcare trends, diversity and inclusion, making informed healthcare choices, improving health, understanding and influencing physician behavior, leadership skills, nursing workforce trends, patient safety and accountability, health disparities, healthcare marketing challenges, national politics, and preparedness.

Offered specialized education targeted toward hospital governance leaders through a 12-month Webinar series, a Trustee College workshop and a series of five regional meetings to discuss hospital trustees’ role in maintaining and improving quality and patient safety in their hospitals.

Offered a new publication, Strategies, to assist hospitals with risk management issues and concerns.

2007-2008 Data/Research Accomplishments

Seeking, evaluating and distributing important data and research results to our member hospitals is a primary service of the AHA. In the fiscal year just completed, we highlight these accomplishments in the area of data/information research and sharing:

Conducted a comprehensive wage and salary survey covering more than 115 jobs/positions typically found in hospitals and made the report available at no charge as a member service to participating hospitals.

Expanded use and knowledge of the AHA’s new information management system for improving, tracking and managing its financial and member-related activities.

Published an annual summary of Arkansas hospital financial and utilization indicators and other statistical data.

Sponsored a study and an updated report documenting losses accruing to Arkansas hospitals due to Medicaid underpayments.

Surveyed membership to collect information on a variety of topics and issues.

Dr. Peter Buerhaus of Vanderbilt University Medical School explains trends and implications from national nursing workforce study.
AHA ORGANIZATIONS

MEMBER BENEFITS THROUGH NETWORKING

Arkansas Association for Healthcare Engineering, Inc. (AAHE) was organized to assist its members in gaining and maintaining leadership in their profession and, through collective efforts, to advance the professional standards of this branch of engineering.

Arkansas Association for Healthcare Quality (AAHQ) seeks to improve the quality of healthcare in Arkansas by providing opportunities for professional growth and education, providing the most current information available, and facilitating communication and cooperation among members and healthcare professionals.

Arkansas Association for Medical Staff Services (AAMSS) provides opportunities for continuing education and promotes the improvement of professional knowledge and skills by uniting those engaged in medical staff service activities in Arkansas.

Arkansas Association of Hospital Trustees (AAHT) is dedicated to helping individual hospital trustees become more informed and effective board members through education and communication; and promotes the hospitals of Arkansas.

Arkansas Health Executives Forum (AHEF) is an independent chapter of the American College of Healthcare Executives charged to meet its members’ professional, educational, and leadership needs; promotes high ethical standards and conduct; advances healthcare leadership and management excellence; and promotes the mission of ACHE.

Arkansas Healthcare Human Resources Association (AHHRA) advances the professional standards of this specialized branch of human resources management by disseminating relevant data, providing opportunities for idea exchange, and promoting viable human resources training.

Arkansas Hospital Auxiliary Association (AHAA) seeks to improve patient care in Arkansas hospitals by assisting in the organization of local hospital auxiliaries, promoting the development of existing hospital auxiliaries, providing services and acting as a coordinating body for its members, and by supporting the Arkansas Hospital Association and the American Hospital Association.

Arkansas Organization for Nurse Executives (AONE) provides a medium for the interchange of ideas and dissemination of information and materials relative to nursing administration, and promotes professional education and provides a platform within healthcare for those involved in nursing administration.

Arkansas Society for Directors of Volunteer Services (ASDVS) stimulates and promotes the growth of volunteer services through developing standards, seeking new areas of service and exchanging ideas to increase members’ knowledge of their particular field and its relationship to the total healthcare institution. It may serve as a stimulus and encourage administrators to recognize the need for a paid Director of Volunteer Services.

Arkansas Society for Healthcare Marketing and Public Relations (ASHMPR) improves the quality of health facility marketing and public relations by raising the professional knowledge and standards of practitioners, and by promoting understanding of the field among health facilities.

Arkansas Social Workers in Health Care (ASWHC) advances the development of effective social work administration and leadership in healthcare by promoting improvement and extension of adequate health services for all persons, stimulating exchange of ideas and materials relative to social work administration and leadership, and promoting professional development opportunities.

Healthcare Financial Management Association (HFMA) provides professional development through education, certification, peer interaction, and leadership training; influences healthcare financial management and accounting policy decisions, principles and practices through advocacy and dissemination of information; and establishes and promotes the highest standards of professional and ethical conduct.

Society for Arkansas Healthcare Purchasing and Materials Management (SAHPMM) brings about close cooperation among healthcare purchasing managers in order to promote efficiency in healthcare purchasing, and promotes both idea exchange among and professional development opportunities for its members.
AHA Services, Inc. directly links your hospital to money-saving management and purchasing resources. It is your best resource for finding the best services and vendors at the least cost.

AHASI negotiates group discounts for participating hospitals as a service to Arkansas Hospital Association members. There is no cost to member hospitals for negotiating these services.

Examples of Cost Reductions

In the past year, AHASI-endorsed companies provided 37 Arkansas hospitals with their general liability, malpractice, property and casualty insurance; 35 Arkansas hospitals with workers’ compensation coverage (through the AHA Workers’ Compensation Self-Insured Trust); 34 Arkansas hospitals with employee benefits and retirement plans; 30 with satisfaction measurement services; and 24 with vision care coverage.

In addition, 18 hospitals utilized the training and re-certification courses offered through the careLearning program and nine hospitals enrolled in its Health and Safety Compliance Series.

In fiscal year 2007-2008, AHASI returned $531,761 to the AHA for assistance in its operations. $359,230 of that sum reflects expenditures for the AHA building expansion, representing 40% of the cost of construction for the project. AHASI, now in its 23rd year, is a wholly owned subsidiary of the Arkansas Hospital Association.

THROUGH AHASI, AHA MEMBER HOSPITALS CAN NOW UTILIZE MONEY-SAVING OPTIONS IN THESE AREAS:

- Employee Benefit Programs
- Volunteer Insurance Plans
- Health and Safety Compliance Education
- Permanent/Temporary Staffing Solutions
- Group Purchasing Services
- Workers Compensation
- Contract Management
- Liability, Property and Malpractice Insurance
- Satisfaction Measurement
- Employee Uniforms
- Online Education/Webinars
- Natural Gas and Power Management Services
- Finance/Investment
- Patient Lift and Transfer Systems
- Operational and Business Consulting
ARKANSAS HOSPITAL ASSOCIATION

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Chairman (2009)

James L. Magee
Piggott
Chairman-Elect (2009)

Robert Atkinson FACHE
Pine Bluff
Past-Chairman (2009)
Alternate Delegate, American Hospital Association (2010)

Luther Lewis FACHE
El Dorado
Treasurer (2011)

Herbert K. "Kirk" Reamey, III FACHE
Clinton
Director, At-Large (2009)

Larry Morse
Clarksville
Arkansas Valley District (2008)

Douglas Weeks FACHE
Little Rock
Metropolitan District (2008)

James R. Carter, Jr.
West Memphis
Northeast District (2011)

Kristy Noble FACHE
Berryville
Northwest District (2010)
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North Central District (2009)

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DeWitt  
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Camden  
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Delegate, American Hospital Association (2010)

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Crossett  
Trustee, Arkansas Board of Health (2011)

Peter D. Banko  FACHE  
Little Rock  
Representative, QIO Arkansas Foundation for Medical Care (2011)

Pat Heinz  
Little Rock  
President, Arkansas Hospital Auxiliary Association (2008)

Les Frensley  
Batesville  
President, Arkansas Association of Hospital Trustees (2008)
The Arkansas Hospital Association is greatly appreciative of the work its auxilians do each year in support of our local hospitals.

Auxiliaries’ volunteer hours make the difference each and every day to every person who walks through the hospital doors. Patients, their families, medical staff members, and employees all benefit from our auxilians’ kind smiles, friendly voices, listening ears and compassionate hearts.

And never underestimate the value those volunteer hours add to a hospital’s bottom line: the hundreds of volunteer hours Arkansas Hospital Association Auxilians provide at the local level truly save each hospital thousands of dollars each year.

In addition, as the economy tightens and every dollar is stretched to its maximum, the dollars auxilians contribute by way of AHAA fundraisers can and do make the difference in many hospitals’ abilities to purchase needed, new equipment and provide services that might otherwise go unfunded.

This year, as always, auxilians have continued the important tradition of keeping our elected officials informed. No voice is as important as the local voice when describing the health of healthcare in the local community, at the local hospital level.

In this time of healthcare reform and change we are grateful as our auxilians continue to help Arkansas’ hospitals, its patients and the entire hospital family remain calm, informed and dedicated to offering the best service and care possible, truly putting people first.

From the AHA and all our hospital CEOs, we thank you!
AHA MEMBERSHIP

A-B
Advance Care Hospital Fort Smith
Advance Care Hospital, Hot Springs
Allegiance Specialty Hospital of Little Rock
Arkansas Children’s Hospital, Little Rock
Arkansas Heart Hospital, Little Rock
Arkansas Hospice, Little Rock
Arkansas Methodist Medical Center, Paragould
Arkansas State Hospital, Little Rock
Ashley County Medical Center, Crossett

Baptist Health Extended Care Hospital, Little Rock
Baptist Health Medical Center-Arkadelphia
Baptist Health Medical Center-Heber Springs
Baptist Health Medical Center-Little Rock
Baptist Health Medical Center-North Little Rock
Baptist Health Rehabilitation Institute, Little Rock
Baxter Regional Medical Center, Mountain Home
Booneville Community Hospital
Bradley County Medical Center, Warren
The BridgeWay, North Little Rock

CrossRidge Community Hospital, Wynne
Dallas County Medical Center, Fordyce
Delta Memorial Hospital, Dumas
DeWitt Hospital
Drew Memorial Hospital, Monticello

E-F
Eureka Springs Hospital

Five Rivers Medical Center, Pocahontas
Forrest City Medical Center
Fulton County Hospital, Salem

G-H
Great River Medical Center, Blytheville

Harris Hospital, Newport
HealthPark Hospital, Hot Springs
HEALTHSOUTH Rehabilitation Hospital, Fayetteville
Helena Regional Medical Center
Howard Memorial Hospital, Nashville
HSC Medical Center, Malvern

I-J
Jefferson Regional Medical Center, Pine Bluff
Johnson Regional Medical Center, Clarksville

K-L
Lawrence Memorial Hospital, Walnut Ridge
Levi Hospital, Hot Springs
Little River Memorial Hospital, Ashdown
**AHA MEMBERSHIP**

**M-N**
- Magnolia Hospital
- McGehee Desha County Hospital
- Medical Center of South Arkansas, El Dorado
- Medical Park Hospital, Hope
- Mena Regional Health System
- Mercy Health System of Northwest Arkansas, Rogers
- Mercy Hospital of Scott County, Waldran
- Mercy Hospital/Turner Memorial, Ozark
- Methodist Behavioral Hospital, Maumelle

National Park Medical Center, Hot Springs
- NEA Baptist Memorial Hospital, Jonesboro
- North Arkansas Regional Medical Center, Harrison
- North Logan Mercy Hospital, Paris
- North Metro Medical Center, Jacksonville
- Northwest Arkansas Radiation Therapy Institute (NARTI), Springdale
- Northwest Medical Center - Bentonville
- Northwest Medical Center, Springdale

**O-P**
- Ouachita County Medical Center, Camden
- Ozark Health Medical Center, Clinton

Piggott Community Hospital
- Pike County Memorial Hospital, Murfreesboro
- Pinnacle Pointe Behavioral Health System, Little Rock

**Q-R**
- Regional Medical Center at Memphis, Memphis, TN
- Rivendell Behavioral Health Services, Benton
- River Valley Medical Center, Dardanelle

**S-T**
- Saint Mary’s Regional Medical Center, Russellville
- Saline Memorial Hospital, Benton
- Siloam Springs Memorial Hospital
- SMC Regional Medical Center, Osceola
- Sparks Health System, Fort Smith
- St. Anthony’s Medical Center, Morrilton
- St. Bernards Medical Center, Jonesboro
- St. Edward Mercy Medical Center, Fort Smith
- St. John’s Hospital - Berryville
- St. Joseph’s Mercy Health Center, Hot Springs
- St. Vincent Doctors Hospital, Little Rock
- St. Vincent Infirmary Medical Center, Little Rock
- St. Vincent Medical Center/North, Sherwood
- St. Vincent Rehabilitation Hospital, Sherwood
- Stone County Medical Center, Mountain View
- Stuttgart Regional Medical Center
- Summit Medical Center, Van Buren
- Surgical Hospital of Jonesboro

**U-V**
- UAMS Medical Center, Little Rock

VA Medical Center, Fayetteville
- Vista Health Fayetteville
- Vista Health Fort Smith

**W-Z**
- Washington Regional Medical System, Fayetteville
- White County Medical Center, Searcy
- White River Health System, Batesville
- Willow Creek Women’s Hospital, Johnson
- 314th Medical Group, Little Rock Air Force Base
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*deceased
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