OHA exists to collaborate with members and health systems to ensure a healthy Ohio.

**MISSION**

- **2014 Member Update**

OHA closes out its historic first century advocating for members’ best interests throughout the state’s implementation of Medicaid expansion, advancing economic sustainability and leading quality and population health initiatives — including an unexpected need to coordinate development of Ebola preparedness planning.

OHA remains true to its mission to collaborate with member hospitals and health systems to ensure a healthy Ohio.

---

**ECONOMIC SUSTAINABILITY**

- **The number of previously uninsured Ohioans who have enrolled in the expanded Medicaid program in the first year:** 435,000
- **The number of visits to Ohio hospitals by state and federal legislators:** 125
- **The number of hospitals closed out its hospital in need of care:** OHA
- **Hospitals to expedite enrollment for members’ reimbursement under Medicare:** 435,000
- **Hospitals in need of care to the Ohio's Medicaid population Health campaign to reduce Ohio's high infant mortality rate:** 25,000
- **Hospital in Ohio hospitals to compare themselves to peer groups and benchmark groups:** Good4Baby kits
- **Hospital in Ohio hospitals in 2014 to provide new mothers with rate regulators: a preliminary 2014 Hospital Care Assurance Program distribution in June:** $2.5 million
- **Hospital in Ohio hospitals to evaluate their performance on the Agency for Healthcare Research and Development:** $366.7 million
- **Hospital in Ohio hospitals to consider benchmarking data and forums, project facilitation and education opportunities focused on reducing 7-day and 30-day readmissions:** $71 million

---

**ADVOCACY**

- **1056 courses:** Webinar courses: 
  
**ECONOMIC SUSTAINABILITY**

- **The number of statewide quality initiatives established by the Ohio Board of Regents:** 88
- **The number of previously uninsured Ohioans who have enrolled in the expanded Medicaid program in the first year:** 435,000
- **The number of visits to Ohio hospitals by state and federal legislators:** 125
- **The number of hospitals closed out its hospital in need of care:** OHA
- **Hospitals to expedite enrollment for members’ reimbursement under Medicare:** 435,000
- **Hospitals in need of care to the Ohio's Medicaid population Health campaign to reduce Ohio's high infant mortality rate:** 25,000
- **Hospital in Ohio hospitals to compare themselves to peer groups and benchmark groups:** Good4Baby kits
- **Hospital in Ohio hospitals in 2014 to provide new mothers with rate regulators: a preliminary 2014 Hospital Care Assurance Program distribution in June:** $2.5 million
- **Hospital in Ohio hospitals to evaluate their performance on the Agency for Healthcare Research and Development:** $366.7 million
- **Hospital in Ohio hospitals to consider benchmarking data and forums, project facilitation and education opportunities focused on reducing 7-day and 30-day readmissions:** $71 million

---

**PATIENT SAFETY AND QUALITY**

- **$100 of Ohio hospitals participating in the benchmarking and energy efficiency program to qualify for the Energy Star rating:** 5

---

**Ohio Hospital Association**

155 East Broad St., Suite 301  Columbus, OH 43215 -3640  TEL: 614 -221 -7614  FAX: 614 -221 -4771  www.ohiohospitals.org

U.S. Sen. Sherrod Brown attended the OHA Annual Meeting to learn about Ohio hospitals’ efforts to reduce the state’s high infant mortality rate and to review issues key to hospitals and Ohio’s health care system.

On the federal front, OHA’s team advocated for relief from onerous regulations, including those governing Medicare Recovery Audit Contractor (RAC) program conditions and patient retransmissions. ‘Meaningful use’ of electronic health records, and specific types of facilities, such as Critical Access Hospitals and Long-Term Care Hospitals.

OHA successfully lobbed alongside the American Hospital Association and other state hospital associations, securing legislation to:
- **Delay cuts to the Medicaid Disproportionate Share Hospital program, which preserved members’ Medicare exemption under Ohio’s Hospital Care Assurance Program (HCAP).**
- **Extend the Medicare-Dependent Hospital and Low-Volume Adjustment program funding for qualifying rural hospitals.**
- **Delay enforcement of the flawed ‘Two-Midnight’” requirement, allowing short hospital stays to continue to be covered under the Medicare Inpatient Prospective Payment System.**
- **Preserve Medicare physician payment rates, including payments to hospital-employed physicians.**

Payment reform

- **OHA staff and Board members worked throughout the year with the state Office of Health Transformation and the Ohio Department of Medicaid to work through issues related to the American Hospital Association’s 2014 Award of Honor recognizing its leadership in helping hospitals improve energy efficiency, reduce costs, prevent pollution and advance the environmental health of hospitals and communities.**

The number of Ohio hospitals participating in the benchmarking and energy efficiency program to qualify for the Energy Star rating:** 100

**Ohio Hospital Association**

155 East Broad St., Suite 301  Columbus, OH 43215 -3640  TEL: 614 -221 -7614  FAX: 614 -221 -4771  www.ohiohospitals.org

U.S. Sen. Sherrod Brown attended the OHA Annual Meeting to learn about Ohio hospitals’ efforts to reduce the state’s high infant mortality rate and to review issues key to hospitals and Ohio’s health care system.

On the federal front, OHA’s team advocated for relief from onerous regulations, including those governing Medicare Recovery Audit Contractor (RAC) program conditions and patient retransmissions. ‘Meaningful use’ of electronic health records, and specific types of facilities, such as Critical Access Hospitals and Long-Term Care Hospitals.

OHA successfully lobbed alongside the American Hospital Association and other state hospital associations, securing legislation to:
- **Delay cuts to the Medicaid Disproportionate Share Hospital program, which preserved members’ Medicare exemption under Ohio’s Hospital Care Assurance Program (HCAP).**
- **Extend the Medicare-Dependent Hospital and Low-Volume Adjustment program funding for qualifying rural hospitals.**
- **Delay enforcement of the flawed ‘Two-Midnight’” requirement, allowing short hospital stays to continue to be covered under the Medicare Inpatient Prospective Payment System.**
- **Preserve Medicare physician payment rates, including payments to hospital-employed physicians.**

Payment reform

- **OHA staff and Board members worked throughout the year with the state Office of Health Transformation and the Ohio Department of Medicaid to work through issues related to the American Hospital Association’s 2014 Award of Honor recognizing its leadership in helping hospitals improve energy efficiency, reduce costs, prevent pollution and advance the environmental health of hospitals and communities.**

The number of Ohio hospitals participating in the benchmarking and energy efficiency program to qualify for the Energy Star rating:** 100

**Ohio Hospital Association**

155 East Broad St., Suite 301  Columbus, OH 43215 -3640  TEL: 614 -221 -7614  FAX: 614 -221 -4771  www.ohiohospitals.org

U.S. Sen. Sherrod Brown attended the OHA Annual Meeting to learn about Ohio hospitals’ efforts to reduce the state’s high infant mortality rate and to review issues key to hospitals and Ohio’s health care system.

On the federal front, OHA’s team advocated for relief from onerous regulations, including those governing Medicare Recovery Audit Contractor (RAC) program conditions and patient retransmissions. ‘Meaningful use’ of electronic health records, and specific types of facilities, such as Critical Access Hospitals and Long-Term Care Hospitals.

OHA successfully lobbed alongside the American Hospital Association and other state hospital associations, securing legislation to:
- **Delay cuts to the Medicaid Disproportionate Share Hospital program, which preserved members’ Medicare exemption under Ohio’s Hospital Care Assurance Program (HCAP).**
- **Extend the Medicare-Dependent Hospital and Low-Volume Adjustment program funding for qualifying rural hospitals.**
- **Delay enforcement of the flawed ‘Two-Midnight’” requirement, allowing short hospital stays to continue to be covered under the Medicare Inpatient Prospective Payment System.**
- **Preserve Medicare physician payment rates, including payments to hospital-employed physicians.**

Payment reform

- **OHA staff and Board members worked throughout the year with the state Office of Health Transformation and the Ohio Department of Medicaid to work through issues related to the American Hospital Association’s 2014 Award of Honor recognizing its leadership in helping hospitals improve energy efficiency, reduce costs, prevent pollution and advance the environmental health of hospitals and communities.**

The number of Ohio hospitals participating in the benchmarking and energy efficiency program to qualify for the Energy Star rating:** 100