



Note from MHA President and CEO

Jon D. Doolittle

MHA's work focuses on shaping and sustaining an environment that allows Missouri's hospitals to fulfill their missions — today and into the future. That means, just like you, we're always adapting. We examine the landscape, drill into the data, identify your pain points and emerging opportunities, and develop solutions that help you succeed.

A core function of MHA's work is advocacy. We engage with lawmakers and regulators — in Missouri and Washington, D.C. — to give a voice to Missouri's hospitals and the communities they serve. In addition, we leverage grassroots advocates throughout the state to build support for issues that matter to their health and hospitals. To shape policy, we tell MHA members' stories. We prepare and mobilize hospital leaders to explain the influence of policy on Missouri communities and the hospitals that serve them.

In addition to shaping the policy environment, MHA is deeply engaged in supporting hospitals' work to improve the health of patients and communities. We provide resources and thought leadership to support hospitals' work in delivering care that is accessible, reliable, equitable, and of excellent quality and value. In addition, MHA's data resources and analytical capabilities provide opportunities to align with your hospital's mission.

As the health care system and policy environments evolve, MHA is committed to providing world-class, forward-focused services in support of your hospital's success. Our dedication to delivering value and stewardship of the resources you provide drives our commitment to excellence for our members.

This year's MHA Report of Accomplishments demonstrates the strength of our partnership. Thank you for allowing us to serve alongside your organization in strengthening hospitals and working toward better care and better health in Missouri.

Jon D. Doolittle President and CEO Missouri Hospital Association

Advocacy to help hospitals thrive

MHA produces public policy that helps hospitals and health systems thrive. To that end, we work to influence legislation and regulations through engagement with stakeholders, delivery of data and expert input, and public education and advocacy about how policy shapes hospitals' ability to serve. MHA executes advocacy strategies that maximize legislative and regulatory outcomes for hospitals and the patients they serve. Equally important, we work to block initiatives that create barriers to your work.

In 2024, a toxic legislative environment resulted in 28 substantive bills (compared to an annual average of 100 or more) being adopted and approved — and two were MHA priorities. Senate Bill 751, which protects against contract pharmacy limitations in the 340B Drug Pricing Program, was a major victory for hospitals and other 340B program participants. MHA mobilized hospital leaders — executives and hospital pharmacy experts — to support advocacy in the state Capitol. Their work helped explain and localize the issue for lawmakers. Patients also testified at legislative hearings and shared their stories in videos through MHA's grassroots advocacy program. During the six-month highly targeted campaign supporting pharmacy reforms, ads in support of 340B legislation were viewed nearly 8 million times and patient-story videos were viewed 2.8 million times by influencers. This one-two punch of advocacy shaped the story for lawmakers and their constituents and helped hold fast against dozens of lobbyists and a half-million-dollar media buy by Big Pharma.

Missouri's **Federal Reimbursement Allowance**, a public-private partnership which is a major funding stream of MO HealthNet, **was extended for five years**, and problematic amendments were held at bay. MHA also was successful in advocating for a continuation of the **\$20 million general revenue contribution** to the FRA budget line, easing pressure on hospitals' finances.

Additional legislation supporting hospitals was adopted during the legislative session, including **SB 1111**, creating a licensure category for pediatric extended care facilities, and **SB 1359**, enhancing cancer coverage under Medicaid.

MHA helped secure significant funding to support hospitals, workforce development and behavioral health programs in 2025. MHA advocacy efforts to strengthen the workforce resulted in a \$5 million increase in Nurse Education Incentive Program funding. The 2025 budget includes significant investments in behavioral health support, including an increase in psychiatric payments of \$25 million, reimbursement for boarding of \$2 million for the developmentally disabled and \$2 million for general behavioral health. In addition, the Missouri Department of Mental Health received an appropriation of \$6 million to pilot a wraparound services program to reduce boarding. Led and coordinated through MHA, the Engaging Patients in Coordinated Care (EPICC) program received an additional \$500,000 in appropriations in 2025.

MHA defeated numerous bills harmful to hospitals in 2024, including legislation to:

- » penalize federal price transparency non-compliance with individual and class-action litigation options,
- » require physician staffing in the emergency department 24/7/365,
- » impose billing requirements supporting commercial payers' implementation of site-neutral payment practices,
- » impose minimum nurse staffing requirements,
- » restrict the authority of hospital districts to enter contractual partnerships and
- » impede care for difficult patients while limiting staff training.

MHA's engagement on regulations shapes policy and delivers results. Throughout 2024, MHA monitored and assisted with the implementation of the state's Transformation of Rural Community Health (ToRCH) program. Working with member-participants and state Medicaid leaders, MHA convened stakeholders, delivered analysis, and provided formal comments to identify and address implementation issues.

At the state level, MHA's engagement with regulators resulted in the:

» Missouri Board of Nursing adopting changes to allow licensed practical nurses to deliver IV medication,

» MO HealthNet's agreement to reimburse for behavioral health integration through collaborative care codes,

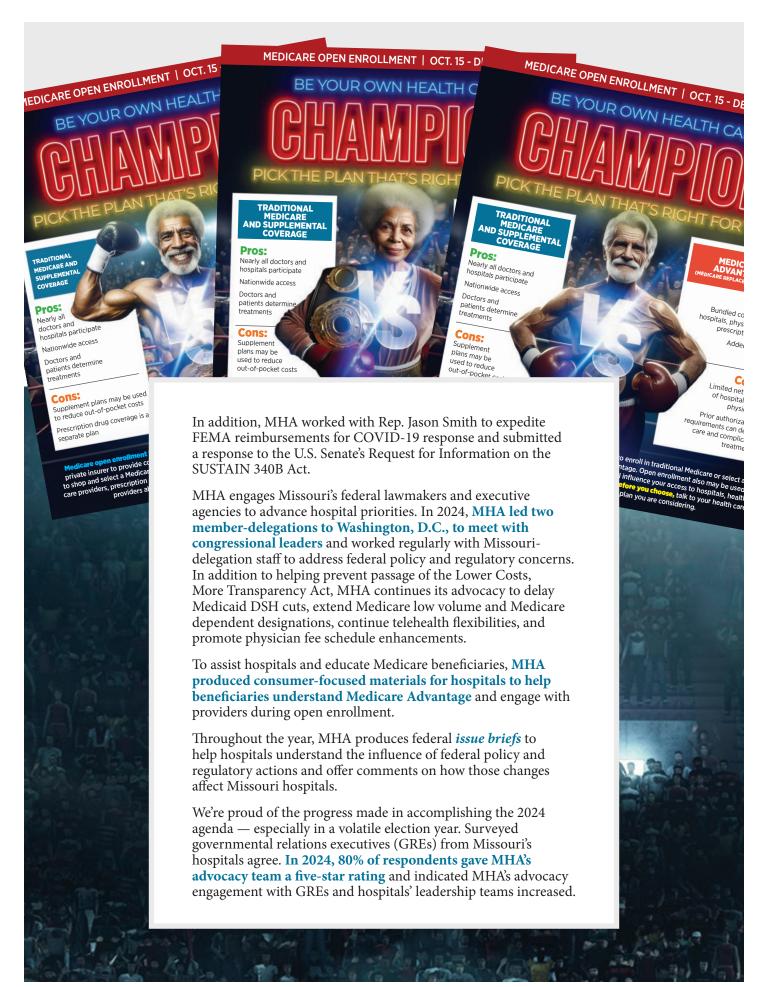
» rules for doulas in the maternal health system and

» Missouri Department of Health and Senior Services regulations on nonhospital EMS transport.

At the federal level, MHA supported changes in federal rules and practices. This included:

- » a new Medicare Advantage complaint tracking process and
- » Drug Enforcement Administration extension of telehealth prescribing flexibilities for controlled substances.





Advancing with a unified voice and shared values

When we work together as a community of hospitals, we remove barriers and improve patient outcomes. When Missouri's hospitals leverage MHA, they open new opportunities to advance.

Worker Retention and Workforce Development

Every hospital is experiencing challenges within the workforce. Although these challenges and the strategies to mitigate them differ, every hospital has a stake in a strong workforce today and investments in the workforce of tomorrow.

MHA's 2024 Workforce Report provides a foundation for understanding the scope of the challenges Missouri's hospitals are experiencing. Using the report as a framework for unified action and investment, MHA engages with partners — including state government — to expand investments in health career pipelines.

MHA worked this year to extend the state's appropriation for **NEIP**, **authorizing \$5 million in state fiscal year 2025**. In addition, the budget includes investments in primary care and psychiatry residency programs. To increase the number of health professionals practicing in underserved areas, MHA supported health professional loan repayment programs within the Office of Rural and Primary Care and the expansion of rural training sites to provide clinical training for MU Rural Scholar Program participants.

To support incumbent workers, MHA helped 779 health care employees level up their skills across 26 workshops. These offerings included MHA's Preceptor Academy, Crucial Learning coursework and Clinical Faculty Academy programs. These programs support retention and provide clinicians a bridge to serve as adjunct clinical faculty.

MHA's educational offerings and Professional Membership Groups provide opportunities to grow and engage within health professions. The MHA Health Institute coordinated 95 educational events, encompassing a total of 185 sessions/days of content. MHA's educational programming produces workforce value at low cost — 11 grant-funded events were delivered at low or no cost to participants. Through October 2024, the MHA Health Institute educated 5,720 individuals, including 1,254 complimentary registrations.

MHA supports 10 Professional Membership Groups with 1,300 members representing subject matter experts from 77% of Missouri's hospitals. PMGs offer networking opportunities, professional development and foster collaboration. The Missouri Chapter of the American Chapter of Healthcare Executives (MO-ACHE) provided its 854 members access to 18 hours of valuable educational programming and additional networking opportunities

45 leaders from 22 hospitals and health care organizations graduated from the MHA Health Care Leadership Series.

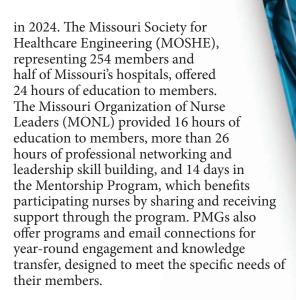
19 leaders from 17 hospitals participated in the Emergency Preparedness Orientation.

16 leaders from 14 hospitals participated in the New Quality Directors Orientation.

64 leaders from 22 hospitals participated in the Infection Prevention Professionals Orientation.

31 leaders from 16 hospitals participated in MHA's Lean Six Sigma program, with 26 receiving Green Belt and five receiving Black Belt certifications.

324 maternal health
leaders participated in the
inaugural convening of
Missouri's Perinatal Quality
Collaborative, a grantfunded complimentary
offering in collaboration with
Uplift Connection to bring
community voice.



Identifying, educating and engaging with the next generation of workers is essential to build tomorrow's workforce. This year, MHA

distributed nearly 14,000 career guides, reached 13,000 students and more than 450 counselors and educators through Virtual Health Care Career Day 2024 (in partnership with the Missouri Chamber of Commerce and Industry). In addition, MHA significantly increased digital engagement through MHA's health career portal, MissouriHealthCareers.com.

MHA convened 125 hospitals with the state's academic partners to streamline access for high school students to seek job shadowing opportunities and nursing students to access clinical rotations. The collaboration produced:

- » 80 educators who participated in an externship on Hidden Careers in Health Care
- » 300 students who fast-tracked their futures through high school hiring events
- » 500 students who explored their future with hands-on activities and interactive demonstrations

MHA's efforts are multidisciplinary. Through the lens of workforce development, safety and security, and within the regulatory systems that govern hospitals, MHA provides context, engages with the media and broadly shapes public conversation about the issue. Workforce stability and development are embedded within each of MHA's strategic goals. In addition, the 2024 MHA Convention included a significant emphasis on workforce issues — including a Workforce Resiliency Institute.

A Common Voice in Advocacy

MHA's engagement grows in value when the hospital community's diverse members provide a unified voice for initiatives that strengthen all hospitals and builds trust with policymakers and the public. In 2024, MHA facilitated 26 members providing testimony before the Missouri General Assembly — an increase of more than 50% over 2023. In addition, 55 members visited Jefferson City to meet with legislators, including visits during MHA's New CEO Orientation, and members of the Missouri Organization of Nurse Leaders provided a hospital-specific briefing on MHA services. These visits represent a 400% increase in direct contacts between MHA members and lawmakers, year over year. In-district engagement and connections to HEALTHPAC contributions have increased as well. Federal engagement continues, aligned with MHA's annual visits to Washington, D.C.

MHA sought and received approval to publicly endorse candidates for governor and lieutenant governor in the Aug. 6, 2024, primary election. MHA supported Lt. Gov. Mike Kehoe in his successful race for the nomination for governor and Sen. Lincoln Hough in his campaign for lieutenant governor — who did not advance to the general election. The digitally focused, multichannel campaign included paid media, and public and MHA member engagement, through MHA and the Missouri Health Matters advocacy platform. The effort reached hundreds of thousands of screens, email inboxes and social media accounts. MHA also shared messages and a Get Out The Vote (GOTV) digital toolkit for hospitals to use in advance of the general election.

Shaping the public's understanding of hospitals' missions and values is essential to the hospital community's success. MHA supports transparency through the FocusOnHospitals.com website, which allows the public to understand Missouri hospitals' prices for services, quality of care and community investments. The annual Community Investment Report — which features videos of how hospitals are serving their community and demonstrating their values — illuminates the data.





Advancing Health Improvement and Promoting Patient-Centered Care

Poor health status is a common challenge Missouri providers face when delivering care. The prevalence of social factors beyond the clinical environment requires strong partnerships with community stakeholders to recognize and address social determinants of health. MHA provides a forum for hospitals to connect with partners who share the goal of health improvement and issued guidance to outline new workforce strategies to achieve clinical-community integration.

MHA works with the Department of Health and Senior Services to engage on various issues, including expanding public health capacity, health equity, vaccination messaging, data modernization, rural maternal health and workforce development. MHA is a trusted partner that can leverage experts and coordinate activities. As a result, MHA staff members serve as board members on the Missouri Public Health Institute and Pregnancy-Associated Mortality Review Board and inform and support the work of other stakeholders, including Missouri's Diabetes Shared Learning Network and the St. Louis Integrated Health Network, among others.

Focusing inward, MHA coordinates the statewide Patient and Family Advisory Council. One of only a handful of state-level councils in the nation, MHA's PFAC is focused on increasing the role of patients and family members to improve health care delivery for better health outcomes and support caregivers through enhanced patient-provider relationships. The MHA PFAC has been recognized by the Institute for Healthcare Improvement Patient Safety Congress and serves on the national PFAC committee comprised of other state hospital association patient experience leaders. The statewide effort encourages and supports hospitals' PFAC programs.

To support improvement, MHA's Quality Works staff engages with members to provide insights into community health needs assessment development, tools for framing implementation and specialized technical assistance. Some hospitals partner with local public health agencies to develop their plans.



Improving value and the health system

Although hospitals work within a system where value isn't always aligned between providers and patients, hospitals' partnership with **MHA brings access to tools and resources that assist hospitals in serving patients and communities.** MHA's work to help shape the health care system — improving accountability, identifying opportunities to capture and deliver value, keeping patients as the true north, and pushing for constant innovation — allows our community of hospitals to remain essential community institutions and preferred partners in change.

Significant transformation is occurring in the MO HealthNet program. This includes adoption of a Diagnosis-Related Group payment system, launch of the ToRCH pilot for selected rural hospitals and unwinding of the COVID-19 Medicaid eligibility bubble. MHA is monitoring, informing and shaping these changes.

A Stronger, Smarter and More Sustainable System

The ToRCH pilot includes opportunity for hospital participants to identify and address the significant social disparities that influence health. To assist the MO HealthNet Division and participating hospitals, MHA secured funding from the Missouri Foundation for Health to deliver analytic tools through the Hospital Industry Data Institute to identify opportunities and track progress. MHA serves as a facilitator between participating hospitals and the MHD Office of Transformation to support member participation. In addition, MHA is supporting technical assistance throughout the pilot.

As the MHD works through the eligibility unwinding process, MHA continues to monitor application processing timelines, process improvement, and reporting and transparency. MHA has collaborated with stakeholders to increase scrutiny by the Centers for Medicare & Medicaid Services and encouraged a corrective action plan. This has contributed to the launch of a "no-touch" application process and MHD acceptance of federal marketplace determinations of Medicaid eligibility.

MHA is actively engaged with MO HealthNet on its transformation to DRGs. This engagement has resulted in an earlier understanding of their payment methodology and work to align the rollout with elements of board-recommended principles. These include exclusion of specialty hospitals; placing Disproportionate Share Hospital, Graduate Medical Education and value-based payments outside of the framework; and managed care payers' adoption of the DRG system.

Hospitals are under significant financial pressure. In 2024, MHA advocated for policies to ease this pressure, including spend down of the FRA fund balance — substantially reducing the tax from approximately 4.8% to 4.2%. Although this adjustment is temporary, it provides short-term relief. In addition, MHA worked with state partners to adjust the FRA assessment to a level that ensures hospitals receive the maximum unspent DSH allotment payments each year. In calendar year 2024, \$51.4 million in 2019 unspent DSH allotment was delivered to member hospitals. Staff has worked closely with MO HealthNet officials to reduce short-term financial hardship experienced by hospitals, including identifying and preventing a harmful change to the methodology for calculating stop-loss payments and obtaining advanced funds for members with cash flow issues.

Improving Equity and Care Quality

In 2024, MHA delivered new and improved health equity assets and delivered technical assistance to advance equity-centered care. In May, HIDI launched enhancements to its hospital-specific health equity dashboards. The advanced toolset offers in-depth, stratified analyses of hospital utilization, geographical disparities, maternal and child health, and the impacts of specific conditions on patient readmissions and mortality.

To help hospitals understand and operationalize health equity and trauma-informed care in maternal health, the Perinatal Quality Collaborative held four equity-centered, trauma-informed care workshops, and the postpartum task force expanded knowledge of care delivery for patients of color. MHA provided a three-part webinar series on race, ethnicity, language and social drivers of health to explain screening processes, data and social referral platforms to improve maternal health, with 314 participants. In addition, MHA's EPICC coaches began

capturing race, ethnicity, and language data to better inform peer-recovery coaches.

Missouri's PQC is facilitated by MHA and aligned with hospital and partner goals to improve maternal health in Missouri. The collaborative has generated five additional full-time employees, totaling 10 MHA staff dedicated to providing clinical and operational support for care improvement. In its first full year of operations, the PQC onboarded subject matter experts, created an infrastructure for work and communications, and held numerous events to unite stakeholders around the common goal of maternal health improvement.

This year, the PQC established the foundational elements of maternal health improvement, including best-practice development and knowledge dissemination, and communications infrastructure to centralize and expand hospital, stakeholder and community engagement. The PQC and MHA supporting staff serves as a trusted partner with stakeholders, including the CDC, DHSS and MHD. Working with MHD, MHA and PQC staff negotiated extension billing clarification, and supported and educated providers on the process to launch a new notification of pregnancy process with managed care payers, billing for doulas and group prenatal care.

MO PQC Progress

53 birthing hospitals enrolled

12 evidence-based clinical and operational toolkits developed and deployed

4 rural community forums

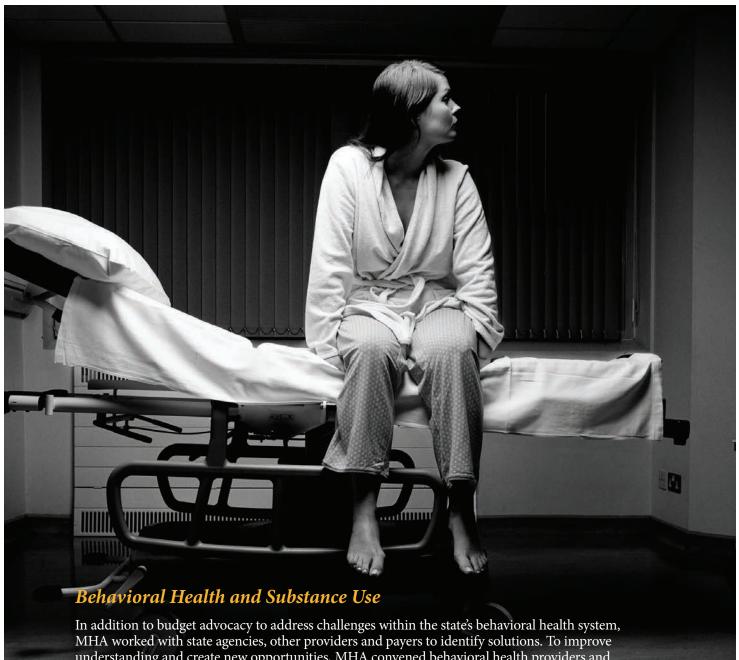
4 postpartum case study sites selected with \$250,000 in stipends awarded

Missouri Optimizing Postpartum Care Task Force established

Launch of MoPQC.org, social media channels and the PQC Pulse e-newsletter

MHA's quality and patient safety staff focused on enhancing hospital leaders' skills and tools. Throughout the year, staff monitored new and emerging data reporting requirements following COVID-19-era changes, educating quality staff in real-time to support compliance. MHA and HIDI designed a dashboard, which will launch in January 2025, of 11 harm measures hospitals can use to benchmark across their peers and support compliance with new structural measures. Plus, the Excellence in Clinical Care Conference was reestablished to highlight practical strategies to address medication administration errors, among other priority industry topics.

To build additional capacity for quality improvement work, MHA strategically teamed with the Quality Improvement Organization Comagine Health to submit a comprehensive response to CMS for a quality improvement contract that, if awarded, would provide full-time employees and educational resources to MHA to engage as many as 80 member hospitals over five years. Additionally, MHA convened the Critical Access Hospital Network quality leadership quarterly to identify priorities and prepare for a five-year Medicare Rural Hospital Flexibility (FLEX) grant bid through DHSS.



In addition to budget advocacy to address challenges within the state's behavioral health system, MHA worked with state agencies, other providers and payers to identify solutions. To improve understanding and create new opportunities, MHA convened behavioral health providers and insurers to discuss behavioral health challenges and share knowledge of plan offerings and engagement. MHA's advocacy efforts continue to encourage MO HealthNet to include the Intensive Outpatient Program and Partial Hospitalization Program as part of the state plan. In addition, collaboration with DMH and DSS continues related to the IMD Waiver adopted in late 2023.

MHA's EPICC program continued to expand in 2024, including the addition of five hospitals and numerous non-hospital stakeholders in a 10-county southeast Missouri catchment area. The program's growth in other regions continues with increases to referral volume, including more than 22% in the central, 48% in the southwestern and 42% in the western regions. In 2024, the program served more than 2,500 individuals and has incorporated harm reduction strategies to include overdose education and naloxone distribution.

MHA also partnered with DHSS and the State Public Health Laboratory to add bio-surveillance and harm prevention strategies to address a predominant challenge in most Missouri communities. In 2024, three hospital emergency departments are sampling plasma from non-fatal overdoses to screen for fentanyl analogues and three additional hospitals are currently onboarding. Of the 73 hospital-collected samples screened in the latter half of 2024, 50% contained fentanyl or related analogues.



MHA's commitment to value and stewardship

Value and stewardship are at the core of MHA's work. We're committed to sustainability and stewardship, with a focus on strong governance, engaged members, dedicated staff and fiscal strength, which enables MHA to provide five-star advocacy and programmatic offerings, as well as a trusted forum for hospitals to identify issues and solve problems together.

The 2024 Member Satisfaction Survey found **92% of those responding rated MHA excellent-only for overall performance.** In addition, 92% of respondents reported they are highly engaged or engaged with MHA, and 53% indicated they want to be more engaged.

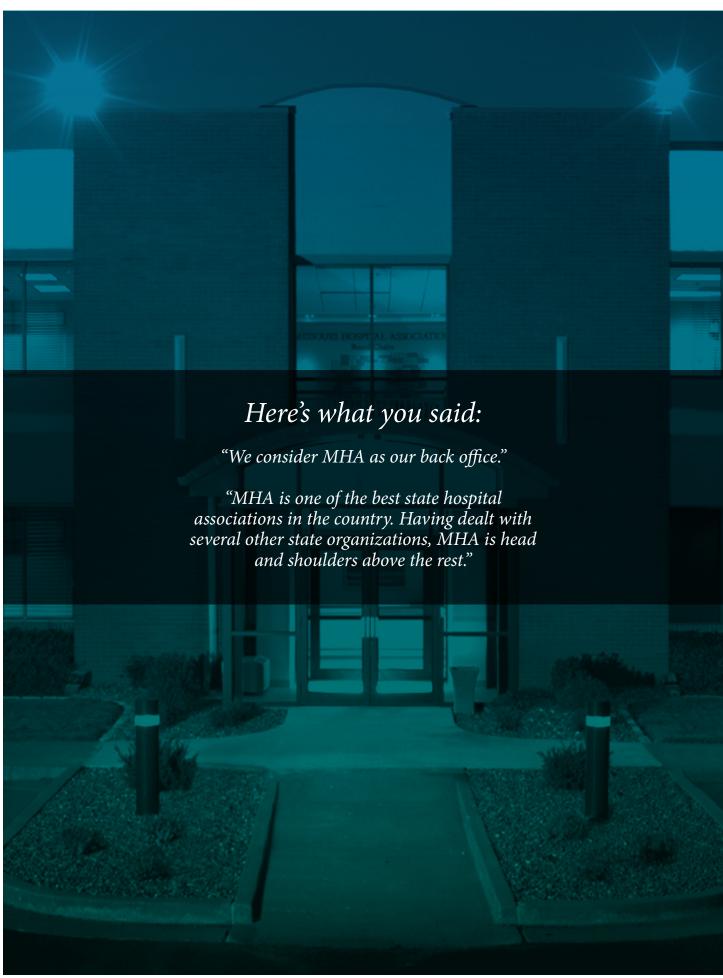
MHA's commitment to understanding hospitals' concerns and aspirations and translating them into action is fundamental to our partnership. In addition to the feedback MHA receives from the Board of Trustees and district councils, the knowledge gained from the Rural Hospital Council, Critical Access Hospital Network, COO Network, Physician Executives — and the newly formed Independent Hospital Workgroup — are essential to delivering meaningful change for all hospitals.

Hospital decision making is founded on data. In addition to the numerous advocacy efforts and operational initiatives powered by HIDI, its powerful analytics suite informs real-time and strategic investments. HIDI's business intelligence tools provide insight into market share, risk management, quality improvement and more. In 2024, HIDI continued to expand services and move toward a long-term vision for innovation to build return on investment for participating hospitals and partners.

MHA is committed to helping hospitals solve problems by offering trusted services to support strategic and operational requirements. MHA Management Services Corporation's Background Check Advantage™ program serves as a trusted partner to meet business and regulatory requirements for hospitals as employers. MSC also partners with hospitals on CHNAs, and MHA is building connections to extend this expertise beyond traditional partners to support health improvement activities.

MHA is committed to financial stewardship of member resources and value for dues investment. MHA continues to actively attract opportunities for funding outside of member dues to support programs that benefit Missouri hospitals and the communities they serve. MHA's dependence on dues as a percent of total association revenue is among the lowest in the nation.

MHA is proud to partner with Missouri's hospitals in efforts to improve health and health care for all Missourians.





MHA's Vision

Hospitals and health care systems that fulfill their missions, improve the health of their communities and are valued throughout Missouri and the nation.



MHA's Mission

To shape an evolving environment that helps our members thrive and fulfill their current and future missions.



MHA's Values

111111111111111111111111111111111111111	
Act with INTEGRITY	Be honest and transparent while adhering to the highest standards of professionalism, ethics and personal responsibility.
Promote EQUITY	Respect all individuals and embrace diversity, inclusion and belonging through collaboration and teamwork.
Prioritize WELL-BEING	Support work-life harmony and invest in the safety and well-being of employees, members and the people we serve.
Pursue EXCELLENCE	Aspire to achieve the highest quality and value in our services, professional development and reputation.
Cultivate INNOVATION	Continuously strive to adapt, reduce complexity and promote sustainability through curiosity and thought leadership.
Domonstrato CTEW/ADDCHID	Be accountable and use resources efficiently and effectively

