Council of Teaching Hospitals and Health Systems (COTH)
Member Services and Benefits

Learn
Serve
Lead
About the AAMC

The AAMC serves and leads the academic medicine community to improve the health of all.

The association supports the nation’s 133 accredited U.S. and 17 accredited Canadian medical schools; nearly 400 major teaching hospitals and health systems, including 62 Department of Veterans Affairs medical centers; and nearly 90 academic and scientific societies. Through these institutions and organizations, the AAMC represents 128,000 faculty members, 75,000 medical students, and 110,000 resident physicians. These constituencies are represented by five councils and organizations, of which the Council of Teaching Hospitals and Health Systems (COTH) is one.

Through its many programs and services, the AAMC strengthens the health care system by supporting the entire spectrum of education, research, and patient care activities conducted by its member institutions. We here at the AAMC, together with our members, are dedicated to improving the health of the communities we serve as well as the nation as a whole.
About COTH

The AAMC Council of Teaching Hospitals and Health Systems (COTH) is a group of approximately 400 of the nation’s leading teaching hospitals and health systems. Membership is recognized throughout the world as a benchmark for excellence in patient care, research, and medical education.

COTH members, which include general acute care hospitals and systems, VA hospitals, children’s hospitals, and specialty hospitals, are known for providing the most advanced care available. Although, short-term general, acute care COTH members make up 6 percent of the nearly 5,000 hospitals in the United States, they account for:

- 40 percent of neonatal ICUs,
- 61 percent of pediatric ICUs,
- 79 percent of all burn care units,
- 48 percent of the surgical transplant services,
- 44 percent of Alzheimer centers,
- 22 percent of all cardiac surgery services,
- 41 percent of all hospital charity care, and
- Are the sites for approximately 28 percent of all Medicaid hospitalizations.

Membership in COTH offers a wealth of benefits designed specifically to meet the unique needs of major teaching hospitals. Among the services and networking opportunities provided to you and your staff* are an array of data services and analytics, professional development groups, advocacy programs, quality initiatives, meetings and seminars, and numerous publications. We are pleased to describe them on the pages that follow.

Joanne Conroy, M.D.
Chief Health Care Officer
AAMC

*Staff must be designated by the CEO to participate in AAMC membership groups. Please see page 4 for more information about professional development groups.
# Table of Contents

About COTH ........................................................................ i

*Reaching Out to Policymakers and Constituents:*
  *Advocacy and Education* ........................................................ 1

*Providing the Facts and Figures Our Members Need:*
  *Data Services and Analytics* ......................................................... 2

*Opportunities for Growth, Collaboration, and Information Sharing:*
  *Professional Development Groups* ................................................ 4

*Keeping Our Members Current:*
  *Print and Electronic Publications* ................................................... 7

*Other Options for Networking and Involvement:*
  *Advisory Groups and Task Forces* .................................................. 8

*COTH Membership Application* .................................................. 9
Advocacy and Education

The AAMC provides an important advocacy and educational role on behalf of its teaching hospital and health system members, focusing attention on issues at the nexus between health care delivery and the missions of academic medicine.

With the passage of the health care reform bill, referred to as the Affordable Care Act (ACA), it is more critical than ever to focus on federal health care issues, including Medicare, Medicaid, new programs in the ACA, and other areas of particular and unique interest to the academic medical community. These include issues such as Medicare direct graduate medical education (DGME) payments, the indirect medical education (IME) payment adjustment, disproportionate share payments, clinical trials, quality-related requirements, and most recently, new payment delivery model demonstrations and pilots. Beyond that, the association actively monitors many other topics, among them health information technology, privacy, and tax-exempt/community benefit issues.

Advocacy Activities
Working closely with AAMC members, and via a broad range of activities, the association advances the issues of concern to COTH members by outreach to the U.S. Congress and relevant executive branch regulatory agencies. As examples, the association:

- Provides written and verbal testimony before congressional committees,
- Conducts briefings for congressional staff on topics of importance to AAMC members,
- Submits comment letters on regulatory proposals,
- Attends and coordinates AAMC member meetings with members of Congress and executive agency leaders, and
- Advances concerns through issue advertising, grass roots efforts, media relations, and coalitions.

AAMC staff also interact with federal commissions that can affect teaching hospital activities and missions, such as the Medicare Payment Advisory Commission (MedPAC), the Council on Graduate Medical Education (COGME), and the National Quality Forum.

Educational Outreach to Policymakers and Constituents
The AAMC also works with member institutions to educate policymakers and other opinion leaders about the process of medical education and the important missions of America’s medical schools and teaching hospitals and ensure that the voice of academic medicine is heard in Washington. The AAMC’s Project Medical Education, as a prime example, is a campus-based program that provides members of Congress, congressional staff, state legislators, and others the information necessary to make insightful decisions on issues that affect the future of medical education and the nation’s health care.

The association actively alerts the staff of COTH member institutions to federal legislative and regulatory actions. Included among the services the AAMC offers its member institutions are a range of educational programs, a comprehensive government affairs section on its Web site, written summaries of new laws and regulations, teleconferences, and the availability of knowledgeable staff for one-on-one discussions and consultation.

Visit the Government Affairs and Advocacy site at www.aamc.org/advocacy for more details.
Providing the Facts and Figures Our Members Need

Data Services and Analytics

One of the benefits of COTH membership is access to the data that the AAMC’s Health Care Affairs (HCA) cluster collects, analyzes, and maintains to provide useful information to its constituents. In addition to analyses of external data, such as the Medicare cost reports, the AAMC gathers data from member institutions through electronic surveys. The information is stored in databases that allow flexible reporting to respond to member needs. There is no additional cost to COTH members for participation in surveys, and those taking part in them receive complimentary reports and access to online reporting and analysis tools. Some of these surveys are described below.

**COTH Annual Survey of Hospital Operations and Financial Performance**
The COTH Annual Survey of Hospital Operations and Financial Performance has been a part of the AAMC’s commitment to teaching hospitals and graduate medical education for over 30 years and is one of the core member services provided by the AAMC’s Health Care Affairs cluster. The survey includes data on operational, financial, and graduate medical education from short-term, general, non-federal COTH member hospitals. The data are collected annually and include data from the most recently audited fiscal year.

**COTH Quarterly Financial Survey**
The data collected via the COTH Quarterly Financial Survey, conducted since 1999, provides critically important information necessary to monitor the financial condition of member teaching hospitals. Consisting of 15 short questions on hospital financial and utilization data, the survey provides the most current financial data available on teaching hospitals. Participants receive a quarterly benchmark report in a PowerPoint format that graphs their data against all other hospitals in the database.

**Mercer IHN Compensation Survey**
The annual Mercer IHN Compensation Survey is conducted through a joint collaboration between Mercer and COTH. This collaboration has significantly enhanced the quality of the compensation data collected on both multi-hospital system executives and single facility hospital executives and management staff.

**Survey of Resident/Fellow Stipends and Benefits**
Since 1968, the AAMC Survey of Resident/Fellow Stipends and Benefits (formerly the AAMC Survey of Housestaff Stipends, Benefits and Funding) has been published annually by the Association of American Medical Colleges. The AAMC employs a two-year cycle for the Resident/Fellow Stipend Survey. An abbreviated questionnaire that collects information only about stipends and funding is alternated with the full survey instrument, which includes sections on benefits and policies. The survey report is available free of charge to COTH members, AAMC constituents, and others with an interest in graduate medical education issues.

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**COTH Data Tool**
Another advantage of membership is access to the COTH Data Tool, an online application that provides financial benchmarking information. It is provided exclusively - and at no charge - to participants of the COTH Annual Survey of Hospital Operations and Financial Performance (COTH Annual Financial Survey).

You can use this tool for:
- Financial analysis
- Operational analysis
- Strategic planning
- Trend analysis
- GME planning and analysis
- Advocacy

Some of the features will allow you to:
- Look at comparative data for hospital cohorts that you establish
- Identify trends in financial and utilization metrics
- Identify strategies for improving your hospital’s financial performance
- And much more

For additional information and other ways in which you can use the COTH Data Tool, go to [https://services.aamc.org/opfin](https://services.aamc.org/opfin)
**Group on Resident Affairs (GRA) Survey**

The GRA represents the institutional leaders of graduate medical education (GME) who oversee GME quality, accreditation, administration, and financing in AAMC member medical schools and teaching hospitals. The group administers an annual survey to profile its membership and learn how members manage their institutions’ GME programs. Each year the survey addresses ‘hot topics’ such as resident duty hours, international resident rotations, and educating residents in teams with other health professionals.

**Compliance Officers Forum (COF) Survey**

The COF Annual Survey of Members’ Compliance Activities collects and analyzes data on compliance activities in academic settings. The goal of this survey is to gather information that will help AAMC members be aware of the work their colleagues are doing to implement and operate compliance programs. More specifically, the COF Survey collects data on compliance staff compensation, compliance office budgets, and institutional compliance initiatives.

Full information on these and other data services is available at [www.aamc.org/data](http://www.aamc.org/data).

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**FindAResident**

FindAResident is an online service that helps teaching hospitals fill residency and fellowship positions at any time of the year. Designed as a supplement to the Electronic Residency Application Service (ERAS), it allows program directors to showcase unexpected and other vacancies to thousands of applicants while simultaneously outlining requirements for selection. Included among its features are search criteria that focus on residents’ specialty interests, post graduate year levels, and geographic preferences, along with standardized resume information that allows for quick and objective comparison among qualified candidates. Through this streamlined and cost-effective system, program directors can use FindAResident year-round to help fill:

- Post-match vacancies
- Positions that arise during the ERAS off-season
- Non-ERAS specialties
- Off-cycle positions
- Fellowship positions

Learn more about the FindAResident service at [www.aamc.org/students/residents/findaresident](http://www.aamc.org/students/residents/findaresident).

**GME Track**

Conducted jointly by the AAMC and the American Medical Association (AMA), GME Track is a resident database and tracking system that assists GME administrators in the collection and management of data. It is pre-loaded with information collected from existing sources at the AAMC and the AMA (such as the National Resident Matching Program [NRMP] and ERAS) and thereby greatly reduces the time and effort required for data entry. Available at no cost, GME Track offers services and online reports that allow users to:

- Access up-to-the-minute rosters of current residents
- View and print individual resident profiles and a history of the resident’s education and training
- Work with boards and specialty groups to decrease duplicative reporting
- Download resident data for integration into other computer systems and databases
- Monitor the career choices made by medical school graduates

Please go to [www.aamc.org/services/gmetrack](http://www.aamc.org/services/gmetrack) for more information.
Opportunities for Growth, Collaboration, and Information Sharing

Professional Development Groups

Another major advantage of COTH membership is free access to a variety of professional development groups offered by the AAMC. Through these groups, staff of COTH members can benefit from annual professional development meetings, access to relevant information and data, networking opportunities, participation in surveys and listserves, availability of member directories, and many other member services.

Membership in these professional development groups is included as part of each hospital’s annual COTH membership dues*, and is limited to staff of COTH member hospitals. Several groups likely to be of particular interest to COTH staff are described below.

*Membership in the GIA requires a nominal fee.

Chief Medical Officers Group (CMOG)
The Chief Medical Officers Group provides information, networking opportunities, and professional development resources for CMOs and other physicians who lead clinical programs in AAMC-member organizations. Communication, interaction with colleagues, and learning are fostered by an active listserv, sessions for CMOs at the AAMC Annual Meeting, and an annual Professional Development Conference aimed specifically at the needs of clinical leaders in academic medical centers. Participants have titles such as CMO, vice dean for clinical affairs, vice president for medical affairs, medical director, or chief of staff (especially in Veterans Affairs organizations). For more information, go to www.aamc.org/members/cmog/.

Government Relations Representatives (GRR)
The Government Relations Representatives Group consists of individuals responsible for federal government relations at medical schools, teaching hospitals, and academic societies. Leadership for the group, which meets three times a year in Washington, D.C., is provided by a steering committee that coordinates professional development activities and advises on legislative strategies. In addition, members of the group can access a wide range of the AAMC’s electronic resources, including the Government Affairs and Advocacy Web site, two electronic publications that cover legislative and regulatory news, and a GRR listserv. Members of this group usually work in government relations, but member positions range from CEOs, to senior vice presidents, to directors. Visit www.aamc.org/members/grr for more information.

Compliance Officers’ Forum (COF)
Established to help compliance professionals at AAMC-member institutions address the myriad of compliance challenges posed by academic institutions, the Compliance Officers’ Forum holds an annual educational meeting, conducts regular teleconferences to discuss the hottest issues facing academic compliance officers, and maintains an active listserv. The COF is open only to employees of AAMC-member institutions who have major compliance responsibility, typically the compliance officer or staff of the compliance office. They may work in areas related to professional billing and regulatory compliance, hospital billing and regulatory compliance, clinical trial billing, research compliance, and requirements. You can learn more at www.aamc.org/members/cof.

Group on Resident Affairs (GRA)
The GRA represents the institutional leaders of graduate medical education (GME) who oversee GME quality, accreditation, administration, and financing in their AAMC members medical schools and teaching hospitals. Not only do its leadership course and educational programs serve as resources to improve the quality of resident education and strengthen institutional responsibility for GME, but the group also provides a forum on GME issues such as ACGME accreditation of residency programs and sponsoring institutions, resident duty hours, GME costs and financing, engaging residents in patient care quality and safety, teaching and assessing the GME general competencies, and GME staffing and
organization. Participants typically have titles such as vice president for academic affairs, director of medical education, or associate chief of staff for education and usually the appointee serves as the ACGME Designated Institutional Official (DIO). For full details, go to www.aamc.org/members/gra.

**Group on Information Resources (GIR)**
In an age when health information technology is a strategic asset, the GIR’s research, development, and policy-setting on various facets of information resources is vital to the advancement of medical teaching institutions. The GIR therefore provides a forum by which leaders can most effectively apply and integrate information resources within academic medicine, including areas such as medical education, clinical care, medical and health sciences research, health sciences libraries, public health, and institutional planning. Typically, members hold positions such as chief information officer or director of information technology. Go to the GIR Web site at www.aamc.org/members/gir for additional details.

**Group on Institutional Advancement (GIA)**
Comprised of medical school and teaching hospital professionals working in alumni relations, development, marketing, public affairs and public relations, the GIA is the only national, institutional advancement group devoted exclusively to academic medicine. The GIA seeks to enhance awareness of - and support for - medical education, health care, and biomedical research, and assists AAMC member institutions in building strong relationships with alumni and donors, patients, prospective students, the media, policymakers and opinion leaders, and the general public. It holds two meetings each year to provide members with the latest information on broad institutional advancement issues, and offers web-based and in-person skills-building workshops in marketing, development, public relations, and alumni relations. The GIA also conducts an annual awards competition to recognize the most creative and effective approaches used to promote academic medicine. AAMC member institutions may appoint multiple staff members to the GIA. Representatives to the GIA pay an annual fee of $130 to support GIA activities including the awards program and conference speakers honoraria. For additional information, visit www.aamc.org/members/gia.

**Group on Women in Medicine and Science (GWIMS)**
The mission of the Group on Women in Medicine and Science is to advance the full and successful participation of women in all roles within academic medicine, addressing issues related to gender equity, recruitment and retention, awards and recognition, and career advancement. This relatively new group is geared to those who advocate for women's advancement in leadership, education, research, clinical practice and administration. Its offerings include annual meeting programming, professional development seminars, an award program, a listserve, and a listing of relevant resources and publications. Learn more at www.aamc.org/members/gwims.

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**Specialized Services for COTH Members**

- **For COTH Reimbursement Managers**
  Given the importance of Medicare payments to COTH members, the AAMC provides a number of services targeted to those with responsibilities for reimbursement. These include a listserv where reimbursement managers may query each other on financing issues, teleconferences to summarize legislative and regulatory developments, summary and analysis of Medicare issues that affect teaching hospitals, and individual consultation. Specific issues of interest include Medicare DGME and IME payments, the Medicare inpatient and outpatient payment systems, quality reporting requirements and payments for new, cutting-edge technology. In addition, and when relevant, Medicaid topics also are discussed in this group.

- **For Administrative Fellows**
  This 2-day program is designed specifically for administrative fellows at COTH institutions to provide them with opportunities to expand their knowledge of academic medicine. The program, which takes place every fall, offers fellows the chance to hear from senior AAMC staff on the many issues facing academic medical centers. In addition, they are afforded opportunities to share experiences during an open discussion session, attend a meeting of the Medicare Payment Advisory Commission, and listen to a presentation from a leading health care legislative staff person in Congress.

- **For Senior and Other Staff**
  In addition to CEOs, the AAMC interacts regularly with general counsels, CFOs, COOs, and other staff on issues of importance to COTH members.

*For additional information, please contact Health Care Affairs at 202-828-0490.*
Group on Educational Affairs (GEA)
The Group on Educational Affairs is organized to reflect its mission of advancing medical education - particularly curriculum, educational research, and evaluation in undergraduate, graduate and continuing medical education. There are four sections in the GEA: one each for undergraduate medical education, graduate medical education, continuing medical education, and research in medical education. Each of the four sections elects a representative to the GEA Steering Committee. Sections plan professional development activities for their members, participate in annual meeting activities, regional meeting activities, and serve as important resources to the AAMC and the GEA. Deans are asked to appoint four different individuals to be listed in the GEA Directory who best represent the four sections of the GEA. Some of these positions include those working in undergraduate, graduate, and continuing medical education as well as research. For complete details, go to www.aamc.org/members/gea.

Group on Institutional Planning (GIP)
The Group on Institutional Planning is committed to advancing the practice of planning in academic medicine. Members work in medical schools, teaching hospitals, academic health science centers, and related organizations. Their responsibilities include strategic planning, academic planning, clinical services planning and marketing, facilities planning, information systems planning, and resource planning, among others. The primary purposes of the group are to enhance the planning skills and knowledge base of its members, to establish an active network or communication among its members in order to speed the dissemination of creative ideas and learning experiences, to serve as a planning resource to AAMC member institutions, and to encourage members to contribute to the fundamental body of knowledge about planning theory and applications. Learn more about the GIP at www.aamc.org/members/gip.

Group on Faculty Affairs (GFA)
The Group on Faculty Affairs (GFA) representatives serve as AAMC’s principle contact on issues related to appointment, promotion and tenure oversight, faculty rewards and recognition, leadership and career development programs, mentoring programs, faculty recruitment, retention, and diversity initiatives. The primary mission of the GFA is to build and sustain faculty vitality in medical schools and teaching hospitals. The GFA does this by supporting faculty affairs deans and administrators in their development and implementation of institutional policies and professional development activities that advance the academic missions of teaching, research, and clinical care. The dean of each member medical school and CEO of each member teaching hospital may appoint one or more persons from the faculty and staff who have administrative and leadership roles in faculty affairs and faculty development. Visit www.aamc.org/members/gfa for more information.
Keeping Our Members Current

Print and Electronic Publications

The association’s publications, many of which are free to COTH members, deliver news and information on a regular basis and periodically provide information on special topics. Among the regular publications are:

**Washington Highlights**
*Washington Highlights* is a weekly news summary covering legislative and regulatory issues of importance to medical schools and teaching hospitals. Available free of charge, the publication provides continuous coverage of items such as the federal budget and appropriations process, hospital and physician payment issues, research policy, health professions education, and student aid.

**STAT (Short, Topical, and Timely)**
**STAT** is another complimentary weekly electronic newsletter that covers the latest news from the AAMC, summarizes initiatives and policy statements, provides results of new surveys and other analyses, and highlights career moves of individuals in academic medicine.

**Leader-to-Leader**
*Leader to Leader* is the association’s biweekly electronic publication through which AAMC President and CEO Darrell G. Kirch, M.D., provides key individuals – including COTH CEOs – with early insight and behind-the-scenes updates on emerging issues that affect academic medicine. It is, of course, provided free of charge.

**Reporter**
Another monthly publication free to COTH CEOs is the **Reporter**, the association’s flagship newsletter. Published 11 times a year, it covers the latest and most significant developments and innovations in academic medicine through news articles, feature stories, opinion pieces, and standing columns.

**Academic Medicine**
**Academic Medicine**, the AAMC’s monthly peer-reviewed journal, publishes policy papers, analyses, research reports, and other articles that cover the full range of issues facing medical schools, teaching hospitals, academic societies, and health policy agencies. It is provided at no charge to COTH CEOs.

**Analysis in Brief**
This complimentary, online publication presents recent findings from the AAMC’s data collection and research activities in a concise, easy-to-read report. Published several times a year, it addresses a wide range of topics and trends that affect medical schools and teaching hospitals.

**AAMC Directory of American Medical Education (DAME)**
This directory, also available free of charge to members, is an annual compendium of information about U.S. and Canadian medical schools and teaching hospitals, and includes a listing of the names, titles, and addresses of their key staff.

**AAMC Data Book**
The 2010 **AAMC Data Book** is a statistical abstract of U.S. medical schools and teaching hospitals, from both a current and historical perspective, and a convenient source of data in producing tables, graphs, and slides. Topics include those related to graduate medical education, teaching hospitals, health care financing, biomedical research, physician services, and faculty and physician compensation. It is offered at a discount to AAMC members.

To learn more about these and other publications, please go to [www.aamc.org/publications](http://www.aamc.org/publications), where you can search by title or topic, or call 202-828-0416.
Other Options for Networking and Involvement

Advisory Groups and Task Forces

AAMC Advisory Groups provide important counsel to AAMC leadership and staff on issues relevant to the association’s three mission areas of education, patient care, and research. Each of these three groups, which are described below, includes representation by COTH members and provides additional opportunities for networking and involvement.

Advisory Panel on Medical Education
The Advisory Panel on Medical Education provides forecasting guidance and recommendations to the AAMC on issues germane to the medical education continuum. Panel members, with expertise across the spectrum of academic medicine, identify emergent innovations and trends in medical education and research, deliberate on contemporary issues within academic medicine, foster opportunities to create effective linkages across the continuum, and address the role of education in the delivery of patient care and research.

Advisory Panel on Health Care Delivery
The Advisory Panel on Health Care Delivery monitors significant trends and emerging issues in the health care financing and delivery system and assesses implications for the academic medical community. Panel members, who include COTH CEOs, medical school deans, faculty practice plan representatives and academic clinical physicians, provide advice and counsel to AAMC staff on these issues. In addition, and when relevant, they also make recommendations to the AAMC leadership on potential association policy statements or initiatives.

Advisory Panel on Research
The Advisory Panel on Research increases awareness of the public, policymakers, and constituents as to the value of research; works with stakeholders to advocate for funding; helps AAMC member institutions to be identified as “research innovation zones;” and promotes integrity and accountability in research. Membership of the panel has recently been expanded to emphasize innovation in research models and infrastructure and to align its activities with the AAMC’s strategic priority to strengthen the national commitment to discovery. Those who serve on the panel represent a broad spectrum of expertise and include members practiced in the biomedical sciences, patient-oriented research, and health services and epidemiological research. The panel meets twice yearly in Washington and maintains an active listserve for discussions between meetings. In addition, there are also a number of special task forces used to gather insights on specific issues by capitalizing on the expertise of AAMC members. These, too, may be of interest to COTH members and focus on areas ranging from resident duty hours to financial conflicts of interest.
APPLICATION FOR COTH MEMBERSHIP

GENERAL INFORMATION AND COTH MEMBERSHIP CRITERIA

Membership in COTH is limited to organizations having a documented affiliation agreement with a medical school accredited by the Liaison Committee on Medical Education (LCME). Typically, these organizations must sponsor, or participate significantly in, at least four approved, active residency programs. At least two of the approved residency programs should be in medicine, surgery, obstetrics/gynecology, pediatrics, family practice, or psychiatry. Membership applications to COTH are reviewed by the COTH Administrative Board, which serves as the AAMC’s membership committee for hospital participation. Under certain circumstances, and for certain types of hospitals such as children’s, VA, military and specialty hospitals, the COTH Administrative Board may approve full membership for hospitals and health systems that do not meet the full membership requirements.

Institutions that do not meet full membership criteria may be approved for corresponding COTH membership. Corresponding members are eligible to attend all open AAMC meetings and enjoy many of the privileges of full members, but are not eligible to participate in AAMC committees, the COTH Administrative Board, the AAMC Board of Directors, the AAMC Assembly or other AAMC governance structures. Organizations meeting full membership criteria, or who are offered full membership in certain situations, will not be considered for corresponding membership.

Membership Options

(A) Individual Teaching Hospital Membership - This option is intended for freestanding teaching hospitals that wish to join as individual teaching hospitals (even though they may be members of a system).

(B) Common Teaching Hospital/Health System Membership - This option is intended for non-federal COTH members who are the only COTH eligible hospital within a health system, or health systems which have multiple COTH-eligible hospitals but where (1) it has been determined that all COTH eligible hospitals do not wish to be members of COTH, or (2) the COTH eligible hospitals prefer to retain their individual hospital membership status. This option provides the system with complimentary COTH membership (as part of the hospital’s membership), forming a single member with the same dues structure as Option (A) and a single governance vote.

(C) Multiple Teaching Hospital/Health System Membership - This membership option is designed for systems where all non-federal COTH eligible hospitals within a health system are currently COTH members or wish to be COTH members, though they will still retain the privileges and benefits of individual members. Multiple teaching hospital/health system membership also entitles the system to complimentary membership by virtue of its hospitals’ memberships. A multiple teaching hospital/health system member will have as many governance votes as the number of its COTH member hospitals.

Corresponding COTH Membership - Institutions that apply for membership options A, B or C but do not meet the criteria for full membership but fulfill a crucial educational and service role in the community may be considered for corresponding COTH membership under Option A.
APPLICATION FOR COTH MEMBERSHIP

Please complete all sections of this application and return the completed application and appropriate supporting documents to the address on the last page of this application.

I. Please check the membership option you are seeking, as explained in the General Information and COTH Membership Criteria document. Check only one:

- Option (A) individual hospital membership
- Option (B) common hospital/system membership
- Option (C) multiple hospital/system membership**

II. HOSPITAL INFORMATION

Primary Teaching Hospital Name*_____________________________________________________________

Hospital Address ___________________________________________________________________________

Hospital Address ___________________________________________________________________________

City ________________________________________ State _______________ Zip_________________________

Main Hospital Telephone Number ________________________ URL ___________________________________

*If applying for option B or C, please list primary teaching hospital.

III. HOSPITAL CEO

Name ______________________________________________________________________________________

Telephone Number ________________________ Fax ________________________

E-mail _____________________________________________________________________________________

CEO’s Assistant’s Name_______________________________________________________________________

Assistant’s Telephone Number______________________________ Fax _______________________________

Assistant’s Email _____________________________________________________________________________

**If you are applying for Option C membership, please use Appendix A to add additional hospitals.
☐ Check here if you are not part of a system. Please skip to Section VI.

IV. SYSTEM INFORMATION

System Name _____________________________________________________________

System Address __________________________________________________________

System Address __________________________________________________________

City __________________________ State ___________ Zip ___________

Main System Telephone Number ______________________ URL ____________________

V. SYSTEM CEO

Name _____________________________________________________________

Telephone Number ______________________ Fax ___________________________

E-mail ______________________________________________________________

CEO's Assistant's Name ______________________________________________

Assistant's Telephone Number ______________________ Fax __________________

Assistant's Email ____________________________________________________

VI. HOSPITAL DATA (for the most recently completed fiscal year: FY ________)

Medicare Provider Number _________________________

AHA ID (American Hospital Association) _____________________________

Licensed Bed Capacity (Adult & Pediatric, excluding newborn) _________________

Average Daily Census _____________________________

Total Operating Expenses $__________________________

Total Payroll Expenses $__________________________

VII. MEDICAL STAFFING

Number of Physicians employed by the hospital/health system __________

Employed Physicians are in the following specialties (please list) _________________________________

________________________________________________________________________________________

Number of Physicians Appointed to the Hospital’s Active Medical Staff _________________

Number of Physicians with Medical School Faculty Appointments __________________________

Total Number of MDs with admitting privileges __________________
VII. FACULTY PRACTICE PLAN (Check those answers that apply)

Are your clinical faculty physicians employed?  Yes ____  No____

If yes, who are they employed by?  (Check all that apply):

Faculty Practice(s)  ____  Hospital ____  University ____  System ____  Other ____

If you selected Other, please state what entity ____________________________________________

VIII. FACULTY PRACTICE POSITIONS

Name of Faculty Practice Plan Administrative Leader _________________________________________

Telephone Number __________________________ Email_______________________________________

Name of Faculty Practice Plan Physician Leader ____________________________________________

Telephone Number __________________________ Email:_____________________________________

IX. SELECT HOSPITAL POSITIONS

Name of Chief Financial Officer ___________________________________________________________

Telephone Number __________________________ Email:_____________________________________

Name of Chief Compliance Officer _______________________________________________________

Telephone Number __________________________ Email:_____________________________________

Name of Chief Medical Officer __________________________________________________________

Telephone Number __________________________ Email:_____________________________________

X. MEDICAL EDUCATION DATA

Name of hospital’s Designated Institutional Official (DIO) as required by the ACGME (Accreditation Council for Graduate Medical Education) _____________________________________________________________

A. Undergraduate Medical Education

Please complete the following information on your hospital’s participation in undergraduate clinical clerkships during the most recently completed academic year. **Check the medical student clerkships you offer or participate significantly in:**

Clinical Services Providing Clerkships

☐ Medicine
☐ Surgery
☐ OB-Gyn
☐ Pediatrics
☐ Family Practice
☐ Psychiatry
☐ Other, Please list __________________________________________
B. Graduate Medical Education
Please complete the following information on your hospital’s participation in graduate medical education.
Check the residency programs that you sponsor or participate significantly in:

Residency Program

- Medicine
- Surgery
- OB-Gyn
- Pediatrics
- Family Practice
- Psychiatry
- Other, Please list ______________________________

XI. SUPPLEMENTARY INFORMATION

To assist the COTH Administrative Board in its evaluation of whether the hospital fulfills present membership criteria, you are invited to submit a brief statement which supplements the data provided in prior sections of this application. When combined, the supplementary statement and required data should provide a comprehensive summary of the hospital’s organized medical education and research programs. Specific reference should be given to unique hospital characteristics and educational program features.

XII. SUPPORTING DOCUMENTS

A. When returning the completed application, please enclose a copy of the hospital’s current medical school affiliation agreement.

B. A letter of confirmation from the dean of the affiliated medical school must accompany the completed membership application. The letter should clearly outline the role of the applicant hospital in the school’s educational programs.

Name of Affiliated Medical School:________________________________________________________

Dean of Affiliated Medical School:________________________________________________________

Information on this application submitted by:

(Name)________________________________________________

(Title)_________________________________________________

(Phone)________________________________________________

_____________________________________________________

____________________________  __________________________
Signature of Hospital or System Chief Executive Officer  Date

Please complete all sections of this application and return the completed application and appropriate supporting documents to:

LaTonya Ford
COTH Membership Services
Health Care Affairs
AAMC
2450 N Street, NW
Washington, DC 20037

Please direct any questions concerning this application to LaTonya Ford at 202-828-0490 or lford@aamc.org.
**APPENDIX A**

This section is for those applying for Option C membership. Please list additional hospitals here.

I. **HOSPITAL INFORMATION**

   Hospital Name ____________________________________________________________
   Hospital Address __________________________________________________________
   Hospital Address __________________________________________________________
   City _______________________________ State ________ Zip_______________________
   Main Hospital Telephone Number _____________________ URL ____________________

II. **HOSPITAL CEO**

   Name _________________________________________________________________
   Telephone Number ________________________________ Fax _______________________
   E-mail ________________________________________________________________

   CEO’s Assistant’s Name _________________________________________________
   Assistant’s Telephone Number ________________________________ Fax _______________________
   Assistant’s Email ______________________________________________________

I. **HOSPITAL INFORMATION**

   Hospital Name __________________________________________________________
   Hospital Address __________________________________________________________
   Hospital Address __________________________________________________________
   City _______________________________ State ________ Zip_______________________
   Main Hospital Telephone Number _____________________ URL ____________________

II. **HOSPITAL CEO**

   Name _________________________________________________________________
   Telephone Number ________________________________ Fax _______________________
   E-mail ________________________________________________________________

   CEO’s Assistant’s Name _________________________________________________
   Assistant’s Telephone Number ________________________________ Fax _______________________
   Assistant’s Email ______________________________________________________