AUPHA achieves excellence and innovation in health management and policy education by embracing diversity and providing opportunities for learning and collaboration.

**AUPHA’S VISION**
To be recognized as the global leader in advancing higher education and scholarship in healthcare management and health policy.

**AUPHA’S MISSION**
AUPHA fosters excellence and innovation in health management, policy education, and scholarship.

**AUPHA’S PHILOSOPHY**
AUPHA achieves excellence and innovation in health management and policy education and scholarship by embracing diversity and providing opportunities for learning and collaboration.

---

**Excellence**
AUPHA believes that excellence in education leads to excellence in healthcare management practice, and ultimately leads to improved quality, efficiency, and accessibility in healthcare delivery.

**Innovation**
AUPHA promotes innovation, encourages the adoption of new strategies, and disseminates best practices in healthcare management and policy education.

**Collaboration**
AUPHA collaborates in the generation and translation of research and the integration of theory and practice in interprofessional work environments.

**Diversity**
AUPHA believes diversity—in people, in programs, and in perspectives—is essential for an effective, interprofessional workforce.

**Learning**
AUPHA pursues continual learning to advance and share knowledge, to foster the development of pedagogy, and to improve teaching and practice.

---

**AUPHA’s Four Core Committees**

- **Diversity with Inclusion Committee (DIC)**
  Charged with addressing the ongoing challenge of the lack of diversity among AUPHA member program faculty and among students, especially at the graduate level.

- **Global Leadership Committee (GLC)**
  Charged with developing an AUPHA global presence.

- **Undergraduate Program Committee (UPC)**
  Charged with managing specific activities relevant to undergraduate program members.

- **Graduate Program Committee (GPC)**
  Charged with managing specific activities relevant to graduate program members.
It has been my distinct honor to serve as the AUPHA Chair of the Board for 2020. During this year, we have experienced historic events that demanded our organizational response to be timely and thoughtful. The AUPHA Board, as a team, possessed the resiliency to act collaboratively, mindful of our responsibility to move forward with our vision for AUPHA. Our vision is to be recognized as the global leader in advancing higher education and scholarship in healthcare management and policy, but this is attainable only if we remember that inclusion is key—in programs and in perspectives. It is essential for an effective workplace. It is important to be strong, calm, and kind to one another. We are in this together, to be better practitioners and academics.

This term will be marked always as the year in which a pandemic spread across the globe and the unacceptable and horrific nature of racism was more fully recognized by more people in our nation. And in these times, the AUPHA Board, staff, and membership understood the importance of maintaining the culture that encourages us to plan and take action strategically. The work was directed to ensure effective response to life changing events as well as live our mission—to foster excellence and innovation in health management and policy education, and scholarship. My hope is that the actions of the Board exceed expectations of what can be accomplished during these difficult times. I believe we did well, but there is still much to do.

There are three accomplishments that I am proud of to support this belief. They focus on themes of inclusion and change management, and they align with our values to achieve excellence by embracing diversity and providing opportunities for learning and collaboration. The first is that the Board, with the guidance of Suzanne Wood, is working diligently to further develop the strategic plan to bring about action that matters. At this time, the board members have selected to join one of four areas of focus and are crafting recommendations to address the needs of our program members (led by Shoou-Yih D. “Daniel” Lee) and our individual members (led by Nancy Borkowski). The two other groups are to recommend actions to promote the voice of the profession (led by Steven “Steve” Bateman) and support people and excellence in operations (led by Jeff Helton). It remains a challenge to accomplish all the work we want to do during a board meeting; so, the four groups have met separately throughout the year and report their progress at each board meeting. I look forward to learning about their final recommendations in the upcoming year.

The second accomplishment I am proud to have been a part of is the change for more inclusion and participation. Under the direction of Mark Diana during his term as Board Chair (2019), the Board initiated action focused on AUPHA Board membership as it did not adequately represent its overall membership. The Board recommended a revision of the bylaws to allow membership on the Board beyond full member programs. The poll opened on 14 August and closed on 13 September 2019, with 73 (59%) of the eligible programs voting. Of those who voted, 69 (93%) supported the change. Now, the Board composition better reflects our membership. The bylaws read:

**Board Composition.** The specified number of Board members allowed from the various categories of membership:

1. Full Member Programs
   No less than 10 (Accredited Graduate and Certified Undergraduate)
2. Associate Member Programs
   No more than 1
3. Affiliate Member Programs (Practitioners)
   No more than 3
4. Individual Members
   No more than 1
5. International Members
   No more than 1
6. President/CEO
   No more than 1

Relatedly, we also felt it was important to be inclusive and support participation on the Board. Up until 2020, we asked Board members to attend Board meetings and come prepared, but we had not supported their travel financially. In consultation with the Finance Committee, the Board voted to support reasonable travel expenses to Board meetings. With
such support, a barrier has been removed, and members may consider serving on the Board regardless of their ability to pay for the travel.

Another action that reflected our vision and inclusion was the search process for the new President and CEO of AUPHA. Jerry Glandon served as President and CEO for six years. One of his strengths is his ability to listen carefully and respond thoughtfully while all the while making sure you knew you were a valued member of the profession. He is an advocate for us and for our field, and we appreciate his service. Jerry retired in October 2019, and Diane Howard agreed to lead the search committee to find his replacement.

With the assistance of the Isaacson, Miller executive search firm, Diane’s exceptional leadership, and an engaged search committee that was representative of our membership, the process ensured a successful search in which many well-qualified candidates were vetted. I was delighted to announce that Dan Gentry accepted the position in January 2020. He has worked in health management over 26 years, and he stated that to serve as President and CEO is “An opportunity and role of a lifetime.” Dan’s strength lies not only in his knowledge of the profession, but in his infectious energy and positive outlook that makes us know we are valued members of the profession. Moreover, he reminds us that AUPHA needs our voice, our action, and involvement. I second these sentiments and encourage members to consider AUPHA service. We are better when we work together.

The last accomplishment of which I was honored to be a part of concerns the significance of celebrating our successes—even in these troubling times. With the advent of COVID-19, the Board, AUPHA staff, and AUPHA members quickly pivoted to online delivery of content, materials, and opportunities for us to learn and network. The March 2020 meetings (that were to be held in Chicago, Illinois) were delivered virtually as was the Annual Meeting (that was to be held in Salt Lake City, Utah). I am grateful for the Annual Meeting Planning Committee (led by Tracy Farnsworth) and the ability to revisit the plan, and I am equally pleased by the excellent participation by AUPHA members in these events. A special note of thanks should be extended to Jason Walker who served as our virtual delivery expert. Well done. I look forward to when we will be together again—in person—in better times. Until then, however, I am very proud of the virtual platforms and events that help to maintain our connection with one another.

Celebrating our success is significant in that I believe we need to take time to recognize best efforts. We also started a new tradition at AUPHA—to present AUPHA challenge coins to members who have demonstrated outstanding service during the year. The first awardee was Jaime Stephens (COO of AUPHA) whose work during this time of leadership transition was exceptional. Jaime’s strength is her ability to remain calm during crises and to ensure the work is done and done well. The second awardee was Diane Howard who served as Chair of the President and CEO Search. Diane’s strength is that she serves with grace, integrity, and humor. Thank you both for your service.

AUPHA remains in a strong financial position, and I have full faith and confidence in the 2021 Board with Tracy Farnsworth as Chair and a strong leadership team—Suzanne Wood (Chair Elect), Jeff Helton (Treasurer), and Jason Turner (Secretary). The Board members are resilient; they understand the importance of relevance; and they are compelled to serve by a sense of duty and responsibility to give back to their profession. I thank them for their hard work and leadership in advancing AUPHA and the field. Along with the Board members mentioned earlier, I recognize the Board members who have rotated off the board—Mark Diana, Carol Molinari, and Carolyn (Cindy) Watts. Thank you for your service. Current Board members include Steven “Steve” Bateman, Rosemary Caron, Rupert Evans, Shoou-Yih D. “Daniel” Lee, Brian Malec, and William “Bill” Tuttle. Newly elected Board Members are Jullet “Jaye” Davis Weaver, Reid Oetjen, and Laurie Shanderson. The Board functions well because of the AUPHA staff: Dan Gentry, Jaime Stephens, Liza Assefa, Lena Dixon, Mark Ryan, Chris Sanyer, and Jason Walker—a superb team of professionals.

Finally, thank you to the AUPHA Board, staff, and members for the incredible work over the year. Thank you for allowing me the opportunity to serve as your Chair. It was my pleasure.

Best wishes,

Leigh W. Cellucci, Ph.D. MBA
Chair, Board of Directors
Fellow AUPHA Colleagues:

On behalf of the AUPHA Board and staff, it is my pleasure to provide you with the 2019-2020 Annual Report. I have been an AUPHA member since 1994 and attended my first AUPHA Annual Meeting in 1995. It is no secret that I love this community. I am proud and honored to serve as the seventh President and CEO in AUPHA’s 72-year history.

Gratitude

First and foremost, I am grateful to Dr. Leigh Cellucci for providing a comprehensive review of AUPHA’s activities and accomplishments during the past year, given that I didn’t step into the CEO role until mid-March of this year. I want to thank Drs. Cellucci and Mark Diana for their leadership as AUPHA Board Chairs during 2019 and 2020. Likewise, I am grateful to my predecessor, Dr. Jerry Glandon, for his six years of service to AUPHA and for his remarkable stewardship of resources that has put AUPHA in perhaps its best financial position ever.

As I’ve transitioned into my role over the past few months, I am in awe of the talent, commitment, and work ethic of our COO, Jaime Stephens. I am grateful for her leadership as interim CEO following Dr. Glandon’s retirement, her warm welcoming of me, and our partnership which I’ve quickly come to highly value. Like Jaime, the AUPHA staff are all experts in their specialized fields of association management, they are all committed to AUPHA’s mission, and they are sincerely fond of you, our members.

Finally, I am grateful to everyone who was involved in the recruitment and hiring process for a new AUPHA CEO. It was unlike anything I’ve experienced previously. It was a thoughtful and rigorous process, almost six months from beginning to end. I learned so much during the process, heard and learned from so many stakeholders and their varied perspectives, was challenged with questions and even “assignments,” and grew in my thinking and in what might be possible for AUPHA’s future.

A Liminal Time

Like all of you, the past five months have been surreal - unexpected, foreign, disorienting, and so uncertain. It is a time like no other, personally and professionally, in modern times. It feels like we are “in-between” something—what was before COVID and what comes next, either after COVID or in a world where we learn and manage to live and work with COVID as a lingering threat.

While we each have had our own challenges since the pandemic began, what our community has in common is our shared purpose of achieving excellence in health administration education in spite of COVID. Indeed, the pandemic has reinforced and accentuated our personal passions and AUPHA’s mission and vision. It is difficult to find the words to express how very impressed I am with our community’s resilience, “coming together,” and growth during this unprecedented challenge. At the program level, across the academy, and at AUPHA, we are “turning lemons into lemonade” on a weekly basis. You are putting your students, alumni, and other stakeholders first: meeting challenges and solving problems creatively; and in doing so, innovating for a brighter future for health administration and health policy education. At AUPHA, we have used the challenges of COVID to engage with our members more than ever before, to respond and pivot quickly to address the academy’s needs, and to add ever-increasing value for your AUPHA membership.
All My Hope is in the Future

Rather than harm during and post COVID, my hope is that we will experience and benefit from “post-traumatic growth.” From challenge, can come creativity and innovation; from uncertainty, can come nimbleness and adaptability; and, from threat, can come resilience and sustainability.

My husband Patrick is an artist, master picture framer, and past art gallery operator. We began collecting modern art, mostly works on paper, in the mid-1990s. One of our favorite artists is Lawrence Gipe, who is on faculty at the University of Arizona. Gipe has been described as “a painter with the sensibility of a historian.” His work focuses on the imperfect world we live in and tipping points of change. His work is often critical of society but also hopeful of the future. An art critic, Gary Bower, has described his work as “the poetry of melancholia illuminated through a crack from which the light gets in.” The 1995 Gipe print we own is titled “All Your Hope Should Be In The Future.”

While we recognize and honor AUPHA’s past, our association’s impressive and important legacy, and our many distinguished past leaders, all of my hope for AUPHA, for the field of health administration and health policy education, and for improvement in healthcare delivery and improved health, lies in the future—our shared future.

Sincerely,

Dan

Dan Gentry, PhD, MHA
President and CEO

AUPHA Staff

Liza Assefa, MBA
Director of Finance

Lena Dixon
Office Coordinator

Dan Gentry, PhD, MHA
President and CEO

Mark Ryan
Certification and Assessment Manager

Chris Anne Sanyer
Director of Membership

Jaime E. Stephens, CMP, CAE
Vice President and COO

Jason Chong Walker
Manager of Meetings
2019–2020 AUPHA Board of Directors

Leigh Cellucci, PhD
Chair
East Carolina University

Steven Bateman, MHA
Weber State University

Brian T. Malec, PhD
California State University, Northridge

Mark Diana, PhD, MBA, MSIA
Past Chair
Tulane University

Nancy Borkowski, DBA, CPA, FACHE, FHFMA
University of Alabama at Birmingham

Carol A. Molinari, PhD, MBA, MPH
University of Baltimore

Tracy Farnsworth, EdD, MHSA, MBA
Chair-Elect
Idaho State University

Rosemary Caron, PhD, MPH
University of New Hampshire

Jason S. Turner, PhD
Rush University

Dan Gentry, PhD, MHA
AUPHA

Rupert Evans, DHA, FACHE
Governors State University

William A. Tuttle, DSc, FACHE
Baptist College of Health Sciences

Carolyn (Cindy) Watts, PhD
Treasurer
Virginia Commonwealth University

Jeffrey R. Helton, PhD, CMA, CFE, FHFMA
University of Colorado at Denver

Suzanne J. Wood, PhD, FACHE
Secretary
University of Washington

Shou-Yih (Daniel) Lee, PhD
University of Michigan
<table>
<thead>
<tr>
<th></th>
<th>12/31/2019</th>
<th>12/31/2018</th>
<th>12/31/2017</th>
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<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
<td></td>
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<td><strong>Current Assets</strong></td>
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<td>Checking/Savings</td>
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<td>Accounts Receivable</td>
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<td>Other Current Assets</td>
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<td><strong>Total Current Assets</strong></td>
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<td><strong>Fixed Assets</strong></td>
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<td><strong>Other Assets</strong></td>
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<td><strong>TOTAL ASSETS</strong></td>
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<td>4,433,019</td>
<td>4,461,540</td>
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<tr>
<td><strong>LIABILITIES AND EQUITY</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Current Liabilities</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts Payable</td>
<td>41,174</td>
<td>12,545</td>
<td>21,448</td>
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<td>Other Current Liabilities</td>
<td>791,681</td>
<td>646,483</td>
<td>678,418</td>
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<td>Long Term Liabilities</td>
<td>18,952</td>
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<td>22,005</td>
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<td><strong>Total Liabilities</strong></td>
<td>851,807</td>
<td>681,033</td>
<td>721,870</td>
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<td><strong>Equity</strong></td>
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<tr>
<td>Unrestricted and Restricted Net Assets</td>
<td>3,721,259</td>
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<td>Net Change in Assets</td>
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<td>8,962</td>
<td>519,235</td>
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<tr>
<td><strong>Total Equity</strong></td>
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<td>3,751,986</td>
<td>3,739,670</td>
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<tr>
<td><strong>TOTAL LIABILITIES AND EQUITY</strong></td>
<td>5,224,212</td>
<td>4,433,019</td>
<td>4,461,540</td>
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</tbody>
</table>
Association of University Programs in Health Administration
Summary of Statement of Activities
2019, 2018, and 2017

<table>
<thead>
<tr>
<th></th>
<th>12/31/2019</th>
<th>12/31/2018</th>
<th>12/31/2017</th>
</tr>
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<tbody>
<tr>
<td><strong>ORDINARY REVENUE/EXPENDITURES</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>40000 – Operating Revenue</td>
<td>1,536,849</td>
<td>1,528,200</td>
<td>1,504,313</td>
</tr>
<tr>
<td>46400 – Other Revenue</td>
<td>153,868</td>
<td>156,300</td>
<td>155,582</td>
</tr>
<tr>
<td>Total Revenue</td>
<td>1,690,717</td>
<td>1,684,500</td>
<td>1,659,894</td>
</tr>
<tr>
<td><strong>EXPENDITURES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>60000 – Salaries and Wages Expense</td>
<td>760,285</td>
<td>673,610</td>
<td>690,533</td>
</tr>
<tr>
<td>60500 – Occupancy and Equipment</td>
<td>65,813</td>
<td>65,101</td>
<td>89,527</td>
</tr>
<tr>
<td>60600 – Operations</td>
<td>115,257</td>
<td>110,059</td>
<td>74,776</td>
</tr>
<tr>
<td>60700 – Program Expenses</td>
<td>241,543</td>
<td>234,097</td>
<td>274,584</td>
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<tr>
<td>62100 – Professional Fees</td>
<td>159,395</td>
<td>142,266</td>
<td>194,910</td>
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<tr>
<td>63100 – Travel and Meetings</td>
<td>210,280</td>
<td>228,290</td>
<td>208,030</td>
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<tr>
<td>65100 – Other Expenses</td>
<td>152,180</td>
<td>50,388</td>
<td>6,783</td>
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<tr>
<td>Total Expenditures</td>
<td>1,704,753</td>
<td>1,503,811</td>
<td>1,599,143</td>
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<tr>
<td><strong>OTHER REVENUE/EXPENDITURES</strong></td>
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<td></td>
<td></td>
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<tr>
<td>Net Other Revenue</td>
<td>665,182</td>
<td>-171,726</td>
<td>458,484</td>
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<tr>
<td>Net Change in Assets</td>
<td>651,146</td>
<td>8,962</td>
<td>519,235</td>
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</tbody>
</table>
INDEPENDENT AUDITORS' REPORT

Board of Directors and Management
Association of University Programs in Health Administration
Washington, DC

We have audited the accompanying financial statements of the Association of University Programs in Health Administration (a nonprofit organization), which comprise the statement of financial position as of December 31, 2019, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements
Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility
Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion
In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Association of University Programs in Health Administration as of December 31, 2019, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters
Change in Accounting Principles
As described in Note 1, Association of University Programs in Health Administration has adopted Financial Accounting Standards Board (FASB) Accounting Standards Codification No. 606, Revenue Recognition from Contracts with Customers, in 2019. Accordingly, the accounting change has been adopted using the modified retrospective approach. Our opinion is not modified with respect to this matter.

As discussed in Note 1, Association of University Programs in Health Administration has adopted Accounting Standards Update (ASU) No. 2018-08, Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made. Accordingly, the accounting change has been adopted using the prospective approach. Our opinion is not modified with respect to this matter.

CliftonLarsonAllen LLP

Arlington, Virginia
May 7, 2020
American College of Healthcare Executives
The American College of Healthcare Executives is an international professional society of more than 40,000 healthcare executives who lead hospitals, healthcare systems, and other healthcare organizations. ACHE offers its prestigious FACHE credential, signifying board certification in healthcare management. ACHE’s established network of 77 chapters provides access to networking, education, and career development at the local level. In addition, ACHE is known for its magazine, Healthcare Executive, and its career development and public policy programs. Through such efforts, ACHE works toward its goal of being the premier professional society for healthcare executives dedicated to improving healthcare delivery. www.ache.org

American Hospital Association
The American Hospital Association (AHA) is the national organization that represents and serves hospitals, health care networks, patients and communities. Nearly 5,000 hospitals, health systems, other care providers and 43,000 individual members come together to form the AHA. Through our representation and advocacy activities, AHA ensures that members’ perspectives and needs are heard and addressed in national health policy development. The AHA also provides education and information on issues and trends for health care leaders. www.aha.org

Health Administration Press
Health Administration Press (HAP) has, for over 40 years, focused solely on publishing books and journals on all aspects of health services management. We are committed to bringing you the highest quality textbooks written by the leading experts in healthcare administration. HAP is the publishing partner of AUPHA and a division of ACHE. www.ache.org

Jones & Bartlett Learning
Jones & Bartlett Learning is a world-leading provider of instructional, assessment, and learning-performance management solutions for the secondary education, post-secondary education, and professional markets. Our educational programs and services improve learning outcomes and enhance student achievement by combining authoritative content with innovative, proven, and engaging technology applications. www.jblearning.com

Peregrine Global Services
Peregrine Global Services is the globally recognized leader in providing online exam services for colleges and universities related to program-level assessment, academic leveling, and APA writing style competency. We also provide leadership development, strategic planning, and academic consulting services for higher education institutions and academic organizations.

Programmatic assessment exams are available for Business Administration, Accounting and Finance, Early Childhood Education, Healthcare Administration, General Education, Criminal Justice, and Public Administration academic degree programs. www.peregrineglobal.com

Supporter

HIMSS
HIMSS is a cause-based, global enterprise producing health IT through leadership, education, events, market research, and media services around the world. Founded in 1961, HIMSS encompasses more than 80,000 individuals, of which more than two-thirds work in healthcare provider, governmental, and not-for-profit organizations across the globe, plus over 650 corporations and 470 not-for-profit partner organizations that share this cause. HIMSS, headquartered in Chicago services the global IT community with additional offices in the United States, Europe, and Asia. For over sixteen years, HIMSS has joined with AUPHA to offer the joint HIMSS/AUPHA Academic Forum. AUPHA is grateful to HIMSS for their continuing generosity and support. www.himss.org
Benchmarking

The following benchmarks are based on survey data collected from AUPHA programs from the 2018-19 academic year. Eighty-one AUPHA Graduate Members and 29 AUPHA Undergraduate Members responded to separate surveys. The graduate data was obtained from CAHME’s annual program survey, which is a requirement for all CAHME accredited programs. CAHME also sends the survey to all AUPHA Associate Graduate members; they are not, however, required to complete it. The undergraduate data was collected through AUPHA’s undergraduate program survey, a voluntary survey, completion not required by AUPHA, distributed to members annually.

The data used in this report represent partial samples of the AUPHA network; about sixty percent of the graduate membership and about thirty percent of the undergraduate membership are represented. Because of this, this report, particularly the undergraduate section, must be interpreted with some caution. Because the graduate and undergraduate data come from different surveys, these two sets should be compared between groups with similar care. AUPHA and CAHME did collaborate on aligning the surveys as best possible, but some differences in completion requirements and question structure were unavoidable. Nonetheless, the aim was to deliver a report that gives some idea of what the typical AUPHA program looks like, regardless of size. Throughout the report we also provided figures from 2017-18, where possible, for your additional comparison.

AUPHA is dedicated to the continual improvement of its benchmarking efforts. Many thanks to all 110 programs who contributed their data for this year’s version.

**Graduate Programs**

**Table 1: Graduate Faculty and Students by Status in 2018-2019**

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
<th>Median</th>
<th>Min</th>
<th>Max</th>
<th>n</th>
<th>2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty</td>
<td>Full-Time</td>
<td>7</td>
<td>0</td>
<td>30</td>
<td>81</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Part-Time and Adjunct</td>
<td>7</td>
<td>0</td>
<td>48</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>Students</td>
<td>Full-Time</td>
<td>34.5</td>
<td>0</td>
<td>756</td>
<td>79</td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Part-Time</td>
<td>4</td>
<td>0</td>
<td>133</td>
<td></td>
<td>Unreported</td>
</tr>
</tbody>
</table>

**Table 2: Mean Proportions of Graduate Faculty by Gender and Racial Identity in 2018-2019**

<table>
<thead>
<tr>
<th>Category</th>
<th>Gender/Ethnicity</th>
<th>Mean</th>
<th>n</th>
<th>2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Female</td>
<td>41.7%</td>
<td>39.4%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>58.3%</td>
<td>60.6%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>0.0%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td>Racial Identity</td>
<td>American Indian/Alaskan Native</td>
<td>0.1%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Asian</td>
<td>9.7%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Black</td>
<td>6.2%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
<td>3.0%</td>
<td>6.2%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Native Hawaiian/Pacific Islander</td>
<td>0.2%</td>
<td>2.3%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>79.0%</td>
<td>79.0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>1.8%(^1)</td>
<td>12.5%(^2)</td>
<td></td>
</tr>
</tbody>
</table>

\(^1\) Includes two or more races and other races
\(^2\) Includes American Indian/Alaska Native, Asian, Native Hawaiian/Pacific Islander, two or more races, and other races
### Table 3: Mean Proportions of Graduate Students by Gender and Racial Identity in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Gender/Ethnicity</th>
<th>Mean</th>
<th>n</th>
<th>2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Female</td>
<td>61.1%</td>
<td>80</td>
<td>39.4%</td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>38.9%</td>
<td></td>
<td>60.6%</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>0.0%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td>Racial Identity</td>
<td>American Indian/Alaskan Native</td>
<td>0.3%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Asian</td>
<td>14.5%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Black</td>
<td>12.0%</td>
<td></td>
<td>18.5%</td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
<td>10.8%</td>
<td>72</td>
<td>8.9%</td>
</tr>
<tr>
<td></td>
<td>Native Hawaiian/Pacific Islander</td>
<td>0.3%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>56.3%</td>
<td></td>
<td>55.6%</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>5.8%</td>
<td></td>
<td>Unreported</td>
</tr>
</tbody>
</table>

### Table 4: Average Graduate Program Admissions Statistics in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Average</th>
<th>Min</th>
<th>Max</th>
<th>n</th>
<th>2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduates (median)</td>
<td>22.5</td>
<td>4</td>
<td>217</td>
<td>80</td>
<td>Unreported</td>
</tr>
<tr>
<td>Applications (median)</td>
<td>70</td>
<td>9</td>
<td>252</td>
<td>79</td>
<td>93.8 (mean)</td>
</tr>
<tr>
<td>Offers (median)</td>
<td>42</td>
<td>7</td>
<td>154</td>
<td>60</td>
<td>60.1 (mean)</td>
</tr>
<tr>
<td>Matriculants (median)</td>
<td>24</td>
<td>5</td>
<td>85</td>
<td>79</td>
<td>36.1 (mean)</td>
</tr>
<tr>
<td>Acceptance Rate (mean)</td>
<td>67.7%</td>
<td>20.2%</td>
<td>100%</td>
<td>79</td>
<td>64.1%</td>
</tr>
<tr>
<td>Matriculant/Offer Rate (mean)</td>
<td>59.4%</td>
<td>15.1%</td>
<td>100%</td>
<td>79</td>
<td>60.1%</td>
</tr>
</tbody>
</table>

### Table 5: Graduate Student Starting Salaries, Three Months Post-Graduation (mean of median) in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Mean</th>
<th>Min</th>
<th>Max</th>
<th>n</th>
<th>2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median Starting Salary: Fellowships</td>
<td>$60,209</td>
<td>$40,000</td>
<td>$78,250</td>
<td>45</td>
<td>$57,841</td>
</tr>
<tr>
<td>Median Starting Salary: Jobs</td>
<td>$68,932</td>
<td>$36,000</td>
<td>$105,000</td>
<td>62</td>
<td>$70,890</td>
</tr>
</tbody>
</table>

### Table 6: Mean Proportions of Graduate Student Outcomes, Three Months Post-Graduation in 2018-2019

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Mean</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Placed in Healthcare Position</td>
<td>73.3%</td>
<td></td>
</tr>
<tr>
<td>Placed in Non-Healthcare Position</td>
<td>2.6%</td>
<td></td>
</tr>
<tr>
<td>Already Employed and Remained in Same Position</td>
<td>12.2%</td>
<td>77</td>
</tr>
<tr>
<td>Studied for Another Graduate Degree</td>
<td>2.0%</td>
<td></td>
</tr>
<tr>
<td>Not Placed</td>
<td>4.2%</td>
<td></td>
</tr>
<tr>
<td>Unknown/Other</td>
<td>5.7%</td>
<td></td>
</tr>
</tbody>
</table>

### Table 7: Mean Proportions of Graduate Student Placements in Healthcare Positions, Three Months Post-Graduation in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Mean</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthcare Fellowship</td>
<td>19.0%</td>
<td></td>
</tr>
<tr>
<td>Hospital/Health System</td>
<td>40.9%</td>
<td></td>
</tr>
<tr>
<td>Consulting</td>
<td>9.6%</td>
<td></td>
</tr>
<tr>
<td>Physician Practice</td>
<td>6.7%</td>
<td></td>
</tr>
<tr>
<td>Insurance Agency</td>
<td>5.0%</td>
<td></td>
</tr>
<tr>
<td>Military/Veterans Health System</td>
<td>4.3%</td>
<td></td>
</tr>
<tr>
<td>Pharmaceutical/Biotech</td>
<td>2.8%</td>
<td></td>
</tr>
<tr>
<td>Governmental Agency</td>
<td>2.7%</td>
<td>75</td>
</tr>
<tr>
<td>Long-term Care Facility</td>
<td>1.9%</td>
<td></td>
</tr>
<tr>
<td>Information Technology</td>
<td>1.0%</td>
<td></td>
</tr>
<tr>
<td>Trade Association</td>
<td>0.8%</td>
<td></td>
</tr>
<tr>
<td>Home Health Agency</td>
<td>0.5%</td>
<td></td>
</tr>
<tr>
<td>National Health Organization (e.g., CVS)</td>
<td>0.4%</td>
<td></td>
</tr>
<tr>
<td>Foundation/Not-For-Profit</td>
<td>0.3%</td>
<td></td>
</tr>
<tr>
<td>Other6</td>
<td>4.1%</td>
<td></td>
</tr>
</tbody>
</table>

---

3 Includes two or more races and other races
4 These data were not reported in the previous benchmarking report
5 These data were not reported in the previous benchmarking report
6 Includes investment banking, venture capital, and other healthcare-related positions.
### Undergraduate Programs

#### Table 8: Undergraduate Faculty and Students by Status in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
<th>Median</th>
<th>Min</th>
<th>Max</th>
<th>n</th>
<th>2017-2018 Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty</td>
<td>Full-Time</td>
<td>3</td>
<td>0</td>
<td>30</td>
<td>4</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Part-Time</td>
<td>0</td>
<td>0</td>
<td>23</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Adjunct</td>
<td>2.5</td>
<td>0</td>
<td>13</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Students</td>
<td>Full-Time</td>
<td>80</td>
<td>18</td>
<td>392</td>
<td>27</td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Part-Time</td>
<td>3</td>
<td>0</td>
<td>190</td>
<td>27</td>
<td>Unreported</td>
</tr>
</tbody>
</table>

#### Table 9: Undergraduate Faculty by Gender, Racial Identity and Years of Experience in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Gender/Ethnicity</th>
<th>Mean</th>
<th>n</th>
<th>2017-2018 Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Female</td>
<td>46.7%</td>
<td>29</td>
<td>57.0%</td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>53.7%</td>
<td>29</td>
<td>43.0%</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>0.0%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td>Racial Identity</td>
<td>American Indian/Alaskan Native</td>
<td>0.0%</td>
<td>26</td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Asian</td>
<td>8.0%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Black</td>
<td>18.1%</td>
<td></td>
<td>9.4%</td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
<td>4.0%</td>
<td></td>
<td>14.2%</td>
</tr>
<tr>
<td></td>
<td>Native Hawaiian/Pacific Islander</td>
<td>0.0%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>68.4%</td>
<td></td>
<td>68.2%</td>
</tr>
<tr>
<td></td>
<td>Two or More Races</td>
<td>0.6%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Other Races</td>
<td>0.9%</td>
<td></td>
<td>Unreported</td>
</tr>
</tbody>
</table>

#### Table 10: Undergraduate Students by Gender and Racial Identity in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Gender/Ethnicity</th>
<th>Mean</th>
<th>n</th>
<th>2017-2018 Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Female</td>
<td>74.1%</td>
<td>75.8%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>25.9%</td>
<td>24</td>
<td>24.2%</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>0.0%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td>Racial Identity</td>
<td>American Indian/Alaskan Native</td>
<td>0.4%</td>
<td>23</td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Asian</td>
<td>7.3%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Black</td>
<td>24.7%</td>
<td></td>
<td>16.6%</td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
<td>8.1%</td>
<td></td>
<td>14.9%</td>
</tr>
<tr>
<td></td>
<td>Native Hawaiian/Pacific Islander</td>
<td>0.2%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>55.2%</td>
<td></td>
<td>60.9%</td>
</tr>
<tr>
<td></td>
<td>Two or More Races</td>
<td>1.1%</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td></td>
<td>Other Races</td>
<td>3.0%</td>
<td></td>
<td>Unreported</td>
</tr>
</tbody>
</table>
### Table 11: Average Undergraduate Program Admissions Statistics in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Average</th>
<th>Min</th>
<th>Max</th>
<th>n</th>
<th>2017-2018 Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduates (median)</td>
<td>38.5</td>
<td>0</td>
<td>241</td>
<td>26</td>
<td>Unreported</td>
</tr>
<tr>
<td>Applications (median)</td>
<td>49.0</td>
<td>34</td>
<td>125</td>
<td></td>
<td>Unreported</td>
</tr>
<tr>
<td>Offers (median)</td>
<td>46.5</td>
<td>25</td>
<td>100</td>
<td>6</td>
<td>Unreported</td>
</tr>
<tr>
<td>Matriculants (median)</td>
<td>33.5</td>
<td>7</td>
<td>60</td>
<td></td>
<td>67.1 (mean)</td>
</tr>
<tr>
<td>Acceptance Rate (mean)</td>
<td>81.3%</td>
<td>58.2%</td>
<td>95.1%</td>
<td>6</td>
<td>Unreported</td>
</tr>
<tr>
<td>Matriculant/Offer Rate (mean)</td>
<td>80.1%</td>
<td>29.2%</td>
<td>100%</td>
<td></td>
<td>Unreported</td>
</tr>
</tbody>
</table>

### Table 12: Undergraduate Student Starting Salaries, Three Months Post-Graduation (mean of median) in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Mean</th>
<th>Min</th>
<th>Max</th>
<th>n</th>
<th>2017-2018 Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median Starting Salary: Jobs</td>
<td>$49,063</td>
<td>$35,000</td>
<td>$65,000</td>
<td>16</td>
<td>Unreported</td>
</tr>
</tbody>
</table>

### Table 13: Mean Proportions of Graduate Student Outcomes, Three Months Post-Graduation in 2018-2019

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Mean</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Studied for Graduate Degree</td>
<td>25.1%</td>
<td></td>
</tr>
<tr>
<td>Professional Position in Healthcare</td>
<td>58.9%</td>
<td>22</td>
</tr>
<tr>
<td>Professional Position Outside of Healthcare</td>
<td>5.9%</td>
<td></td>
</tr>
<tr>
<td>Other/Not Placed/Unknown</td>
<td>10.1%</td>
<td></td>
</tr>
</tbody>
</table>

### Table 14: Mean Proportions of Undergraduate Student Placements in Healthcare Positions, Three Months Post-Graduation in 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Mean</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital/Health System</td>
<td>47.9%</td>
<td>20</td>
</tr>
<tr>
<td>Physician Practice</td>
<td>16.9%</td>
<td></td>
</tr>
<tr>
<td>Nursing Homes</td>
<td>15.6%</td>
<td></td>
</tr>
<tr>
<td>Consulting</td>
<td>3.1%</td>
<td></td>
</tr>
<tr>
<td>Pharmaceutical/Biotechnology</td>
<td>3.1%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>13.4%</td>
<td></td>
</tr>
</tbody>
</table>

### Conclusion

Over the next year, AUPHA will be initiating substantial efforts to improve the accuracy and utility of future benchmarking reports. The first several steps in this process will include enhancing the report’s validity by increasing survey response rates, developing clear operational definitions for all items, expanding the scope of the survey and subsequent analyses, and consulting with experts in statistics, survey methodologies, and benchmarking for guidance. In the future, AUPHA will continue to prioritize the enhancement and development of this member benefit. AUPHA member faculty are encouraged to provide their ideas and feedback on the benchmarking report directly to AUPHA staff to help guide the process.

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7 These data were not reported in the previous benchmarking report
8 These data were not reported in the previous benchmarking report
Who Are We?

Membership in AUPHA is represented by a large and highly diverse set of institutions, members, and faculty. As of April 2020, there were a total of 229 graduate and undergraduate programs from 183 separate institutions. Also included are doctoral programs, affiliate members, international programs, and 146 individual members. The table below shows that most of AUPHA’s members are “Full Members” indicating that they are either AUPHA certified (if undergraduate) or CAHME accredited (if graduate).

The number of Full programs has remained relatively steady. As more undergraduate programs seek AUPHA Undergraduate Certification, however, the number of Associate Undergraduate and Full Certified Undergraduate program members will continue to increase.

### Membership Comparison

<table>
<thead>
<tr>
<th>Membership Type</th>
<th>2014</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Graduate</td>
<td>76</td>
<td>78</td>
</tr>
<tr>
<td>Associate Graduate</td>
<td>50</td>
<td>53</td>
</tr>
<tr>
<td><strong>Total Graduate</strong></td>
<td>126</td>
<td>131</td>
</tr>
<tr>
<td>Full Undergraduate</td>
<td>47</td>
<td>46</td>
</tr>
<tr>
<td>Associate Undergraduate</td>
<td>34</td>
<td>49</td>
</tr>
<tr>
<td><strong>Total Undergraduate</strong></td>
<td>81</td>
<td>95</td>
</tr>
<tr>
<td>Total Doctoral</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total Programs</strong></td>
<td>212</td>
<td>229</td>
</tr>
<tr>
<td>Total Institutions</td>
<td>180</td>
<td>183</td>
</tr>
<tr>
<td>Individuals</td>
<td>146</td>
<td>146</td>
</tr>
</tbody>
</table>

Member Programs

The following programs were members of AUPHA as of April 2020. Click an institution for more information on programs. The letters following the listing indicate Undergraduate (UG), Graduate (G), Doctoral (D) or Executive (E) programs.

- Alma College (UG)
- American College of Education (UG)
- Appalachian State University (UG)
- Army-Baylor University (G)
- Ashford University (G)
- AT Still University (G)
- Auburn University (UG)
- Baptist College of Health Sciences
- Barry University (G)
- Bay Path University (G)
- Baylor University (G)
- Belmont University (G)
- Boston University School of Management (G)
- Boston University School of Public Health (G)
- California Baptist University (UG)
- California State University - Chico (UG)
- California State University - Long Beach (UG) (G)
- California State University, Los Angeles (G)
- California State University, Northridge (UG)
- Campbell University (UG)
- Capella University (UG)
- Carnegie Mellon University (G)
- Central Michigan University (UG) (G) (D)
- City University of New York (CUNY) (UG)
- Clarkson University, Capital Region Campus (G)
- Clayton State University (UG) (G)
- Coastal Carolina University (UG)
- Columbia University (G)
- Concordia College (UG)
- Cornell University/Sloan Program in Health Administration (G)
- Portland State University (G)
- Queens University of Charlotte (G)
- Radford University (UG) (G)
- Robert Morris University (UG)
- Rochester Institute of Technology (G)
- Rosalind Franklin University of Medicine and Science (G)
- Rush University (G)
- Rutgers University (UG) (G)
- Ryerson University (UG)
- Saint Leo University (UG)
- Saint Louis University (UG) (G)
- Samford University (UG) (G)
- Seton Hall University (G)
- South University (UG)
- Southern Illinois University - Carbondale (UG)
- Stevenson University Online (G)
- Stonehill College (UG)
- Stony Brook University (G)
- Suffolk University (G)
- Temple University (G) (GBus)
- Tennessee State University (UG)
- Texas A&M Health Science Center (G)
- Texas A&M University - Corpus Christi (UG)
- Texas Southern University (UG) (G)
- Texas State University (UG) (G)
- Texas Woman's University Houston (G)
- The Christ College of Nursing Houston (G)
- Towson University (UG)
- Trinity University (G) (E)
- Tulane University (G)
- Uniformed Services University of Health Science (G)
- Universite De Montreal (G)
- University of Alabama at Birmingham (UG) (G) (D)
- University of Arkansas for Medical Sciences (G)
- University of Arkansas Fort Smith (G)
- University of Baltimore (UG)
- University of California - Los Angeles (G)
- University of Central Florida (UG) (G)
- University of Cincinnati (G)
- University of Colorado Denver (G)
- University of Colorado Denver/Network for Healthcare Mgmt (E)
- University of Detroit Mercy (G)
- University of Florida (G)
- University of Georgia (D)
- University of Houston - Clear Lake (G)
- University of Illinois at Chicago (G)
- University of Iowa (G)
- University of Kansas Medical Center (G)
- University of Kentucky (G)
- University of Louisiana at Lafayette (UG)
- University of Louisville (G)
- University of Maryland Global Campus (G)
- University of Memphis (UG) (G)
- University of Miami (UG) (G)
- University of Michigan (G)
- University of Michigan - Flint (UG)
- University of Minnesota (UG) (G) (E)
- University of Minnesota Duluth (UG)
- University of Missouri (G)
- University of Nevada - Las Vegas (UG) (G)
- University of New Hampshire (UG)
- University of New Haven (G)
- University of New Orleans (UG)
- University of North Carolina at Chapel Hill (G)
- University of North Carolina at Charlotte (G)
- University of North Florida (UG) (G)
- University of North Texas (G)
- University of North Texas Health Science Center (G)
- University of Oklahoma Health Sciences Center (G)
- University of Phoenix (UG) (G)
University of Pittsburgh (G)
University of Puerto Rico (UG)
University of Puerto Rico - Medical Science Campus (G)
University of Scranton (UG) (G)
University of South Carolina (G)
University of South Dakota (UG)
University of South Florida (G)
University of Southern California (G)
University of Southern Indiana (UG)
University of Texas at Arlington (G)
University of Texas at Dallas (G)
University of Texas Health Science Center at Houston (G)
University of Texas Health Science Center at Tyler (G)
University of the Incarnate Word (G)
University of Utah (G)
University of Washington Seattle (G)
University of Wisconsin – Extension (G)
University of Wisconsin - Milwaukee (UG)
Virginia Commonwealth University (G) (E)
Weber State University (UG) (G)
West Virginia University (UG) (G)
Western Kentucky University (UG)
Winston-Salem State University (UG) (G)
Winthrop University (UG)
Xavier University (UG) (G)
What We Do for Members

Marketing the Profession

AUPHA’s marketing and branding campaign, begun in 2017-2018 and unveiled at the 2018 Annual Meeting in Philadelphia, continues to be viable today. The two videos produced were developed with an intentional look towards a long lifespan. *A Career with a Calling* is aimed at those unfamiliar with the field of health administration, particularly students, but is also useful to those who do not understand who we are and what we do, a continuing challenge for the field. The video is available free of charge and was updated to include subtitles for the hearing impaired. The second video, *Why AUPHA Matters*, was developed for a few reasons—to show the value of AUPHA membership to existing program members and as a recruiting tool for potential members. Both videos are still in demand in 2020.

AUPHA is pleased to have participated in Health Professions Week (HPW) for the third consecutive year. Health Professions Week is a free, week-long event for high school and college students to learn about the numerous opportunities in fields related to healthcare. Along with 22 other associations, AUPHA participated and executed a week of events that included a Virtual Treasure Hunt, Self-Care Day, HPW Instagram Chat, Financial Literacy Day, and a Virtual Fair. These events afforded the over 4,500 registrants to not only learn about the various healthcare fields, but also about skills that provide a good foundation for future students.

AUPHA would like to thank the Health Professions Week Executive Committee for spearheading this year’s efforts, as well as all the individuals from member programs who volunteered to help. A special thanks to the individuals listed below for chatting online with students and representing the healthcare administration field during the Virtual Fair.

- Salvatore Barbera, DHA, MSM, FACHE, Florida Atlantic University
- Erik Carlton, DrPH, West Virginia University
- Rebecca McIntyre, DHA, MHSA, CCRP, Radford University
- Sherdeana Owens, DDS, MPA, Texas A&M University - Corpus Christi
- Suzanne J. Wood, PhD, MS, FACHE, University of Washington

The 2020 Health Professions Week will be held November 14-19 and will include a similar program. A Call for Volunteers will be issued in late summer of 2020.

Meetings

The 2019 Annual Meeting, held last June in New Orleans, Louisiana, with an attendance of 397 registrants, had the highest attendance of any AUPHA Annual Meeting. A special thank you to the Annual Meeting Program Committee’s (AMPC) chair, Leigh Cellucci, East Carolina University, and the members of the Committee for putting together a fabulous program of educational and networking opportunities: Stephen Burrows, Sacred Heart University; Tammy Cagle, University of Phoenix; Erik Carlton, University of Memphis; Michael Counte, Saint Louis University; Rita DiLeo, Old Dominion University; Praveen Durgampudi, Old Dominion University; Karen Edwards, Ithaca College; Cynthia Faulkner, Indiana Wesleyan University; John Fick, A.T. Still University; Gerald Goodman, Texas Woman’s University Houston; Wittney Jones, Northcentral University; Mary Helen McSweeney-Feld, Towson University; Mel Minarik, University of Nevada Reno; Zachary Pruitt, University of South Florida; Carmen Sanders-Russell, California State University, Northridge; Carla Stebbins, Rochester Institute of Technology; and William Tuttle, Baptist Memorial Health Care Corporation.

AUPHA’s 2019 Undergraduate Program Workshop, held in Winston-Salem October 11-13, drew 47 attendees. A special thanks to Montrale Boykin, Winston-Salem State University, for chairing and hosting this meeting at his program, along with the other members of his planning committee: Carol A. Vogt, Pfeiffer University; Stephanie Joseph, Winston-Salem State University; Renee Walsh, Winston-Salem University; Juliet (Jaye) Davis Weaver, Florida A&M University; Cristian Lieneck, Texas State University; and Rosemary Caron, University of New Hampshire.
Moving forward, the Undergraduate Program has been integrated into the Annual Meeting schedule, to allow for maximum participation and convenience.

At their March 2020 Board of Directors meeting, the AUPHA Board, in response to the continued concerns related to the COVID-19 pandemic, voted to cancel the 2020 Annual Meeting scheduled to be held in Salt Lake City June 3-5 and to hold the meeting in a virtual format. The virtual Annual Meeting opened on June 3, 2020, as originally planned, and ended on July 24th. As a result of the generosity of AUPHA’s program sponsors, the Annual Meeting was made available to all members free of charge. A complete listing of the programs who, through their generosity and support, made this possible may be found on page 22 of this Annual Report.

A special thanks to the 2020 Annual Meeting Program Planning Committee, chaired by Tracy Farnsworth, Idaho State University, for putting together a wonderful combination of educational and wellness activities in a virtual format: George Audi, Florida A&M University; Nancy Borkowski, University of Alabama at Birmingham; Erik Carlton, West Virginia University; Darcy Carter, Weber State University; Ria Hearld, University of Alabama at Birmingham; Tamara Herchel, University of Florida; Shannon Houser, University of Alabama at Birmingham; Kenneth Johnson, Weber State University; PJ Maddox, George Mason University; Susan McClernon, University of Minnesota; William Miller, University of Scranton; Eric Richardson, University of North Carolina at Wilmington; Erin Seedorf, Metropolitan State University of Denver; Carole South-Winter, University of South Dakota; Steve Walston, University of Utah; Kent Willis, Marshall University; Kristin Wilson, Saint Louis University; and Pia Woodley, Florida A&M University.

Faculty Forums

Faculty Forums bring together faculty from diverse programs with common interests to share ideas and expertise. Faculty Forums are online communities that also meet annually during AUPHA’s Annual Meeting.

The following Faculty Forums are open to all AUPHA members:

- Advancing Women Leaders in Healthcare Management
- Cultural Perspectives
- Ethics
- Finance, Economics & Insurance
- Global Healthcare Management
- Health Information Management
- Health Policy
- Innovative Teaching
- Interprofessional Education
- Post-Acute Care
- Management and Case Studies
- Medical Group Practice/Ambulatory Care
- Online Program Directors
- Online Teaching and Technology
- Public Health
- Quality Improvement

Network

The AUPHA Network is one of the most important resources offered by AUPHA. The Network allows members to share information with the entire membership, to communicate within focused communities, and to connect one-to-one. The graphs and charts below show the trends of Network usage in 2019 and during the first quarter of 2020. In a usual cycle, community activity and messaging increase prior to the date of the Annual Meeting. Activity then falls off during the summer months. It will be interesting to track the Network activity during the remainder of 2020; with the pivot to virtual meetings and the addition of the COVID-19 Open Forum, it is expected that the Network activity will be sustained at these higher levels throughout the year.
In Appreciation of Our Program Sponsors

Gold Level
Johns Hopkins University
Rush University
Saint Louis University
Southern Illinois University
Tulane University
University of Central Florida
University of Nevada, Las Vegas
Weber State University
West Virginia University

Silver Level
Baylor University
East Carolina University
The George Washington University
Metropolitan State University Denver
The Ohio State University
University of Alabama at Birmingham
University of Baltimore
University of Iowa
University of Michigan
University of Minnesota
University of Missouri
University of North Carolina at Chapel Hill
University of North Texas Health Science Center at Fort Worth
University of Pittsburgh
University of Scranton
University of South Florida
University of Utah
University of Washington
Virginia Commonwealth University
Western Governors University

Bronze Level
Columbia University
Cornell University
Idaho College of Osteopathic Medicine
Indiana University Fairbanks School of Public Health
Loyola University Chicago
Medical University of South Carolina
Seton Hall University
Trinity University
University of Colorado Denver
University of The Incarnate Word
University of Memphis
University of Wisconsin-Milwaukee
Network Users

Every individual with membership access, either through program or individual membership, has access to the AUPHA Network. AUPHA continues to work with program members to include any faculty or staff member who would benefit from access to the AUPHA Network. AUPHA members can connect with one another through the Member Directory.

AUPHA Network Users

<table>
<thead>
<tr>
<th>Year</th>
<th>Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>2,493</td>
</tr>
<tr>
<td>2018</td>
<td>2,568</td>
</tr>
<tr>
<td>2019</td>
<td>2,580</td>
</tr>
<tr>
<td>2020</td>
<td>2,650</td>
</tr>
</tbody>
</table>

Discussion Trends

A discussion post is the information shared in the Network through groups such as the Open Forum, Faculty Forums, and the Committee Communities. Discussion messages are messages sent in reply to discussion posts and among the groups. The discussion activity for 2019 follows the usual trend of falling off from January through March, picking up in the spring prior to the Annual Meeting, and then falling off again in late summer into fall. The first quarter of 2020, however, showed a significant increase in posts and messages. This can be attributed to the large amount of information shared during the onset of COVID-19, especially through the new COVID-19 Open Forum. This special forum was created to share the important resources and ideas that AUPHA staff and members have provided to address the challenges of the pandemic.

It is expected that the use of the AUPHA Network will be sustained at these higher levels. Discussion posts in April 2020 were up 52% over April 2019 and discussion messages were up 57%.

Library Access

Another important set of resources are the libraries. Nearly every community has a library where members can post sharable documents. Similar to discussion posts, members downloaded and viewed more documents in the community libraries in April of 2020 compared to April of 2019. Members posted and shared COVID-19 related documents and case studies that could be used in place of internships.

Network Emails

Another sign that the COVID-19 pandemic increased Network activity is the number of emails sent through the Network. Compared to the first quarter of 2019, members sent 82,285 more emails, or 36% more, in the first quarter of 2020.
Email Open Rate
A valuable measure of the effectiveness of digital communication are email open rates, which measure the percentage of emails that were opened compared to the total number of emails sent. The standard open rate is 20% and that rate has been consistently surpassed.

Network Profiles
Every member has a profile in the Network. A basic profile shows affiliation and contact information. More complete profiles can contain a photo and biographical information and can even be joined with LinkedIn. This additional information can only be accessed by other AUPHA members. Members have total control over the amount of information they share. More complete profiles ensure a better response to messages in the Network and complete the information available in the online directory. The AUPHA Program and Faculty Engagement Awards reward individuals and programs who choose to share additional information in the profile. A very small percentage of members have added pictures or other information to their profiles. Members can log into their profiles to add pictures and biographical information.

Profile Completeness as of April 29, 2020

What are people searching for?
This word cloud is a visual representation of the twenty most searched for terms on the AUPHA website last year. “Scholarship” is perennially the most searched for term, while many also searched for information about Upsilon Phi Delta. This proves that current and prospective health administration students access the AUPHA website for information and resources, including information about member programs. Capstone, certification, and accreditation are also popular search topics.
Upsilon Phi Delta Honorary Society

Upsilon Phi Delta is AUPHA's honorary society. The mission of the Upsilon Phi Delta Honor Society is to recognize, reward, and encourage academic excellence in the study of healthcare management and policy. UPD provides financial assistance through individual scholarships, in the amount of $500 each, to outstanding students pursuing academic degrees that prepare individuals for careers in healthcare management, policy, and leadership. Membership in the Upsilon Phi Delta Honor Society is open to individuals who meet the national and local standards of this organization and are accepted and initiated into membership of a collegiate chapter. Membership is open to students, faculty, healthcare executives and administrators, and to those contributing to the healthcare administration profession. As of April 2020, there were 128 UPD chapters.

The 2020 Upsilon Phi Delta Grants have been awarded to the Undergraduate UPD Chapter at the University of Minnesota Duluth and the Graduate UPD Chapter at Samford University.

The University of Minnesota Duluth UPD Chapter will use the grant to host student networking events and reimburse travel expenses for speakers. The Samford University Chapter will use the grant to fund scholarships, conduct a service project, and create a healthcare administration simulation for the online graduate program.

AUPHA has pledged to fund two, $2,500 competitive UPD Grants each year for at least the next four (4) years. The grants will be awarded to one Undergraduate UPD Chapter and one Graduate UPD Chapter each year. UPD Chapters in good standing will be eligible to apply for a grant. Grants must be used to benefit the UPD Chapter and the program’s healthcare management students.

Undergraduate Certification

Since 1989, AUPHA has recognized undergraduate health administration programs through a rigorous certification process. Programs undergoing certification are examined by a review team of expert faculty, many of whom have gone through the certification process themselves. The review team assesses the program on 28 different criteria, established by AUPHA and its Undergraduate Program Committee, spanning six broad areas: program structure, student support, professional alumni linkages, curriculum and teaching, experiential and applied learning, and program evaluation/improvement.

Program directors and reviewers alike consistently report that this process allows them to make many improvements and refinements to their own programs. As of May 2020, 46 undergraduate programs are certified by AUPHA. It is anticipated that this number will rise to 48 by the end of 2020.

2019 Undergraduate Certification Reviews

In 2019, AUPHA recognized the following undergraduate health management programs for successfully meeting the established criteria for AUPHA certification and eligibility for Full Certified Undergraduate membership:

- East Carolina University
- James Madison University (initial certification)
- Methodist University
- Pennsylvania College of Health Sciences (initial certification)
- Southern Illinois University
- University of Michigan-Flint
- University of New Hampshire
- University of Scranton
- Western Kentucky University

AUPHA thanks all of the review team members for their invaluable service to the entire AUPHA membership. We would especially likely to recognize the work and leadership of the 2019 review team chairs:
Accreditation

Full Graduate AUPHA Member programs are recognized for having withstood the rigors of peer review wherein curricula, faculty, educational outcomes, and student and employer satisfaction are critically examined by external review teams.

At the graduate level, this standard is met by achieving accreditation by the Commission on Accreditation of Healthcare Management Education (CAHME). CAHME accreditation is the benchmark for students and employers that ensures the integrity of graduate healthcare management education. It demonstrates that the program strives to be exceptional and:

» Meets the highest standards of quality in healthcare management
» Utilizes appropriate academic content
» Includes membership in a network of professional colleagues that transcends boundaries of universities, colleges, and professional associations

As of May 2020, 79 of AUPHA’s graduate program members were accredited by CAHME.

Exit Assessment

AUPHA has been working with Peregrine Academic Services (now known as Peregrine Global Services) to develop a comprehensive healthcare administration exit assessment test bank for use by AUPHA undergraduate programs. To facilitate this, AUPHA convened a committee of expert faculty to develop test bank structure and content. As of the end of 2019, the test bank structure had been finalized and several subject matter experts had written over 400 questions.

HAMPCAS

After several consecutive years of slow growth, the Healthcare Administration, Management & Policy Centralized Application Service (HAMPCAS) recorded a year-over-year decline in applicant and application volume during the 2018-2019 cycle, which ran from September 2018 to August 2019. A total of 481 applicants submitted 992 applications during this time period. For year-over-year trends dating back to 2012-13, please refer to the charts below.
Publications

The *Journal of Health Administration Education* (JHAE) is AUPHA’s quarterly, peer-reviewed journal, which includes research, case studies, teaching tools, and essays by leading health administration educators and professionals. The *Journal* addresses key policy issues in health administration management nationally and internationally and is the foremost authoritative guide on the latest academic and professional developments in the field.

In 2019, the *Journal’s* acceptance rate was 77%, with twenty three papers published, including six offering teaching tips and tools, two book reviews, and ten original articles.

The Exchange

*The Exchange*, AUPHA’s digital newsletter, is delivered approximately eight times per year through MemberSuite, AUPHA’s Customer Management System (CMS). It is distributed to nearly 3,000 members and subscribers, contains current information on AUPHA’s internal and external activities, and includes blogs from both AUPHA’s Board Chair and its President and CEO. Member programs are encouraged to submit program and/or faculty news for inclusion in *The Exchange*.

AUPHA’s Partnership with Health Administration Press (HAP)

HAP is a division of the Foundation of the American College of Healthcare Executives (ACHE), dedicated to fostering healthcare management excellence and committed to publishing the highest-quality content, written by leading experts in healthcare management.

Established in 1972, HAP is now one of the largest publishers in the field of healthcare management. HAP publishes professional books, textbooks for undergraduate and graduate courses, journals, and self-study courses. HAP is the publishing partner of AUPHA.

McGaw Scholarship

The Foster G. McGaw Scholarship provides financial support to undergraduate and graduate students in healthcare administration and is available to all full member programs. Funds are requested and distributed by programs and are awarded based on the discretion of the individual institutions.

These scholarships, endowed by Foster G. McGaw of the American Hospital Association Supply Corporation, support the importance of healthcare administration education and AUPHA’s contribution to the field.
2020 Prize Winners

The William B. Graham Prize for Health Services Research
The Graham Prize for Health Services Research was established to succeed the Baxter International Foundation Prize for Health Services Research, which was established in 1985 and has long been internationally regarded as the premier recognition for health services research.

The Prize was established to recognize worldwide contributions to the improved health of the public through health services research, particularly research that has a lasting impact on the healthcare system and the way healthcare is delivered. It is awarded to individuals who have significantly contributed to public health in one of three primary areas: Health Services Management, Health Policy Development, and Healthcare Delivery. The winner is selected annually by an international committee of past Prize winners, distinguished academics, and internationally recognized researchers. The Prize includes an award of $25,000 to the recipient and $25,000 to a nonprofit institution that supports the recipient’s work.

The Gary L. Filerman Prize for Educational Leadership
The Filerman Prize for Educational Leadership recognizes individuals from AUPHA member programs who have made outstanding contributions to the field of healthcare management education, who have exhibited leadership in their field, and who have enriched their institutions, their students, and healthcare management through their work. It was established to honor Gary L. Filerman, PhD, the first president of AUPHA, for his many years of service to the association and to healthcare management education.

The Filerman Prize is administered by AUPHA with the generous support of the University of Minnesota’s Healthcare Alumni Associations/Foundations and the many friends of Dr. Filerman.

2020 Gary L. Filerman Prize Recipient
Diane M. Howard, PhD, MPH
Rush University

2020 Engagement Awards
The 2020 recipients of the AUPHA Engagement Awards include Wittney Jones, PhD, Northcentral University, as faculty member of the year; Metropolitan State University Denver as new program of the year; and Virginia Commonwealth University as the established program of the year.
**The John D. Thompson Prize**

The Prize recognizes junior and mid-career faculty based on their overall contributions to the field of health administration education, broadly defined. This includes scholarly and practice-oriented research, teaching accomplishments, and other relevant experiences and achievements in areas such as curriculum and program building; student mentoring; and leadership in the health administration education field. Mid-career faculty, e.g. those who are at the Associate Professor level and/or have been in an academic position for an appropriate length of time, allowing for the building of a strong, multi-faceted record, are the desired focus for this award.

**2020 John D. Thompson Prize Recipient**

Paula H. Song, PhD
University of North Carolina at Chapel Hill

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**Corris Boyd Scholars Program**

The HCA Corris Boyd Scholars Program was established in 2006 to provide scholarships to two deserving minority students entering AUPHA full member programs. The Program honors Corris Boyd, a senior healthcare executive with HealthTrust Purchasing Group and HCA, who was a proponent of excellence and leadership and dedicated to increasing diversity. Mr. Boyd died in 2005.

The recipient receives a $20,000 per year scholarship, for a period of two years, towards a master’s program in healthcare management from the AUPHA full member program of their choice.

**2020 Corris Boyd Scholar**

Summer Hill
Will attend University of North Carolina at Chapel Hill’s Master of Healthcare Administration Program

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**Bachrach Family Scholarship for Excellence in Healthcare Administration**

The Bachrach Family Scholarship for Excellence in Healthcare Administration was acquired by AUPHA in 2016. This endowed scholarship was established with the intent of creating a durable legacy to the education of students in areas and at institutions that contributed to the success of David and Linda Bachrach.

The scholarship is available to students enrolled full-time in a CAHME accredited residential graduate program in healthcare administration during the second year of their program of study. It recognizes the demonstrated successful academic performance as undergraduate as well as during their first year of graduate study, with preference to otherwise qualified students who are the first in their immediate family to pursue graduate level education, qualified students who can demonstrate an economic need for such financial support, and/or qualified women applicants.

**2020 Bachrach Scholarship Recipient**

Raina Jain
Cornell University

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**Glandon Family Scholarship for Advancement of Healthcare Management Education**

The Glandon Family Scholarship for Advancement of Healthcare Management Education was established to create an endowment for a faculty scholarship at an AUPHA member program with the intent of creating a durable legacy in support of quality healthcare management education. While scholarships and awards exist for research and professional service, those committed primarily to educating our future healthcare leaders rarely exist. Many of these individuals become the core of academic programs with appropriate mentorship and motivation. The scholarship is aimed at these future educational leaders by giving them recognition and financial support at an early stage of their career. Ideally,
the scholarship will be awarded to a faculty member from an undergraduate program in one year and from a graduate program the alternative year. The first Glandon Family Scholarship was awarded in 2020 to a faculty member from a graduate program member.

2020 Glandon Family Scholarship for Advancement of Healthcare Management Education Recipient
Joanna Veazey Brooks, PhD, MBE
University of Kansas Medical Center

David A. Winston Health Policy Fellowship
The David A. Winston Health Policy Fellowship offers a twelve-month postgraduate experience in Washington, DC, to students from AUPHA member universities. Established in 1987, this Fellowship commemorates the contribution and personal commitment of David A. Winston, who played a significant role in shaping American health policy at both the state and federal level.

The objective of the David A. Winston Health Policy Fellowship is to provide a unique opportunity to learn about the political system through direct exposure to public and private sector roles in health policy development. The Fellowship embodies Mr. Winston’s commitment to the public/private partnership necessary for a high-quality, market-oriented healthcare system.

2020-21 Winston Health Policy Fellowship Recipients
Janhavi Dubhashi
Georgia State University School of Public Health

Jessica Hale
Johns Hopkins Bloomberg School of Public Health

David A. Winston Health Policy Scholarship
The David A. Winston Health Policy Scholarship aims to increase the number and quality of individuals trained in healthcare policy at the state and federal levels by providing financial support to deserving health policy students for furthering their education. The scholarship recognizes student excellence and achievement based on the student’s record, along with recommendations from faculty and colleagues.

2020 Winston Scholarship Recipients
Scarlett Bergam
Boston University – MPH
Rebecca Copeland
University of Michigan - MPH/MPP
Jonah Cunningham
The George Washington University - MPP
Amani Danielle Echols
University of Michigan - MPH
Anne Edwards
University of Iowa - MHA
John Franco
Columbia University - MPH
Christopher Kei Helm
Georgetown University – MPP
Batsheva Honig
University of Michigan - MPH/MHSA
Clare Hudock
Columbia University - MPH
Matthew Jirsa
University of Michigan - MHSA
Kellie McThenia
The George Washington University – MHA
Julie Reiff
Johns Hopkins University- MHA
Justin Yoo
University of California, Berkeley - MPP/MPH
Moving Forward

As we move beyond 2020, AUPHA—as the global association of programs and scholars committed to, and passionate about, health administration and health policy education—will focus on three priorities.

Implementation of the 2020-2023 AUPHA Strategic Plan
Following a full year of thoughtful discussions and deliberations, and with input from membership, the AUPHA Board has adopted a comprehensive plan to propel AUPHA into the future. The four pillars in the plan include emphases on programs, individuals, the profession, and our association governance and management. The plan includes exciting new initiatives to revise and update the AUPHA Body of Knowledge; continually monitor, synthesize, and disseminate trends in health management and policy practice; promote and recognize excellence in academic leadership; promote and recognize excellence in teaching and learning; be recognized globally as the voice of the health administration and policy education profession; and, communicate AUPHA’s mission, vision, values, initiatives, and accolades effectively.

Excellence in Diversity, Equity, and Inclusion in AUPHA Governance, Management, and Programming
AUPHA’s core values include diversity, and the association’s new philosophy statement has diversity at its core. AUPHA’s statement on Racism, Social Injustice, Discrimination, and Violence Against African American and Black Communities released in June 2020 clearly articulated AUPHA’s commitment to diversity, equity, inclusion, and social and racial justice. AUPHA will work with and across our full membership, and with important partner organizations such as the National Association of Health Services Executives and the American College of Healthcare Executives, to act. These actions will be focused on curriculum content and competencies; faculty and student talent and professional development; public advocacy; and AUPHA governance and management.
Honoring Our Past and Ensuring AUPHA's Prosperous Future

AUPHA has a long and rich history and legacy. Our history includes service by hundreds of past Board members, six CEOs, and enduring partnerships with the American College of Healthcare Executives, the American Hospital Association, and others that have remained strong for over 70 years. AUPHA has advocated for public policy, strategically partnered with professional and other academic associations, and led initiatives that have grown and strengthened the fields of healthcare management and health policy practice and education.

AUPHA's legacy includes luminary recipients of distinguished prizes and awards, including the William B. Graham Prize for Health Services Research, the John D. Thompson Prize, the Gary L. Filerman Prize for Educational Leadership, the George Bugbee and Isidore Falk Book Award, and the Bachrach Family Scholarship. AUPHA continues to build and grow, with new distinctions such as the 2020 launch of the Glandon Family Scholarship for Advancement of Healthcare Management Education.

Ensuring our legacy, building on our past, and boldly moving forward into AUPHA's future requires sustainability in resources. Heading into 2020, the association was fiscally sound, in perhaps its best financial position in AUPHA's history. However, 2020 has been and continues to be unprecedented with regard to healthcare, higher education, and COVID's impact on societies and global financial markets. AUPHA has been resilient since the emergence of COVID-19 in early 2020. AUPHA has maximized revenues, lowered expenses, grown membership, and increased member engagement and value. AUPHA has been - and will continue to be - keenly sensitive of, and responsive to, our academic and individual program members needs and challenges.

The 2020-2023 AUPHA Strategic Plan promises new initiatives, and, with those, new revenue streams for our association. These are designed to both grow and diversify our revenue—to not only sustain but to ensure that AUPHA thrives in the future.

As communicated during both the 2020 AUPHA business meeting and awards presentation, there are numerous opportunities for AUPHA members—programs, individuals, partner organizations, and affiliates—to contribute to AUPHA's lasting legacy and promising future. Please contact CEO Dan Gentry to discuss your personal priorities for meaningful, tax-deductible contributions to AUPHA.