WHAT ABOUT “AAAHC ACCREDITATION”?  
A Joint Statement by NIFLA, Care Net, and Heartbeat

What is AAAHC?
In the past few years, some Pregnancy Medical Clinics (PMCs) have inquired about the benefits of accreditation through the Accreditation Association for Ambulatory Health Care (AAAHC). According to its annual report on its website, AAAHC creates peer-based best practices for ambulatory health care organizations and health plans. If a clinic is in compliance with AAAHC standards, it may become “accredited” upon application to AAAHC. Such accreditation must be renewed every three years at a cost. See www.aaahc.org

Accreditation from AAAHC is expensive – both for the consulting fees to become accredited and the actual accreditation fee. In addition, there is a renewal fee every three years to stay accredited.

Regarding AAAHC accreditation, NIFLA, Care Net, and Heartbeat International recommend that the center’s leadership consider the following.

Will AAAHC Accreditation Provide Additional Legal Protection?
Since the early 1980s, prolife pregnancy centers have been under legal, legislative, and public relations attacks from the abortion industry in attempts to severely restrict and/or close them down. Hence, AAAHC accreditation is being marketed to prolife PMCs as a service that will provide additional legal protection.

The fact is, however, that AAAHC accreditation has not and will not provide additional legal protection for PMCs against these attacks.

Restrictive laws being proposed (and enacted in California and Illinois) against PMCs, apply whether a center is AAAHC accredited or not. These laws restrict PMCs because they do not perform and/or refer for abortion. You are targeted by the abortion industry because of your prolife convictions -- not because operational procedures are not in order, which is what AAAHC accreditation address.

The states of California and Illinois are just two examples. In CA, to provide medical services, such as ultrasound confirmation of pregnancy, a PMC must be licensed under California’s Primary Care Clinic law. To achieve this, they must comply with detailed statutory regulations and pass a state inspection of the facility. Upon passage, the PMC is issued a clinic license. (four other states have such rigorous requirements).

Compliance with CA’s law provides the highest form of legal protection available for PMCs in California. However, the recent adoption by
California of AB775 (which mandates PMCs place a sign in their clinic advising patients on how to obtain an abortion) covers all licensed prolife PMCs, regardless of AAAHC accreditation. Such “accredited” clinics” are not exempt from this law’s oppressive requirements. In Illinois, a recent law passed which mandates that all physicians refer for abortions regardless of their moral objections. The law applies to all PMCs, irrespective of AAAHC certification.

Certainly AAAHC accreditation has some professional aspects for the operations of ambulatory medical clinics in general. Efforts to strengthen internal processes and protocols are applauded. However, for prolife PMCs, such third party accreditation offers no additional protection against attacks, both legal and legislative, from the abortion industry.

**AAAHC “Accredits” Abortion Clinics**

AAAHC “accredits”, and thus gives credibility to, abortion clinics. For instance, a website that markets abortion clinics in Illinois asserts, “All Illinois Abortion Clinics are state certified, AAAHC certified with board certified physicians.” The site goes on to state, “Our member clinics are conveniently located including locations in the City of Chicago, Downers Grove, Wood Dale and Glen Ellyn in Illinois.”

In the state of Washington, a notoriously long standing chain of late-term abortion clinics states, “Cedar River Clinics is the only AAAHC accredited abortion provider in Washington, our clinics meet the rigorous standards for quality set by the Accreditation Association of Ambulatory Health Centers.”

In Montclair, New Jersey the Pilgrim Medical Center, an abortion clinic, proudly boasts of its AAAHC certification on its home page. www.pilgrimmed.com

In Oakland, California the Family Planning Specialists Medical Group, a chain of abortion clinics, states on its website, “In 1996, FPA was accredited by the, Accreditation Association for Ambulatory Health Care. As such, it became the first family planning provider in California to be accredited. FPA’s ongoing commitment to quality of care is evident in its continuing participation in the accreditation program.” FPA lists affiliate abortion clinics throughout California in Bakersfield, Buttonwillow, Delano, Lost Hills, McFarland, Mojave, Oildale, Rosedale, and Tehachapi. www.familyplanningspecialists.com

In New York City, the abortion clinic Parkmed states on its website that it is AAAHC accredited and claims to be “the most respected Abortion Clinic in NYC.” They further state, “Our staff knows how important it is for you to receive sensitive and expert care in an Abortion Clinic in NYC.”

In Attleboro, MA the abortion clinic Four Women Health Services lists AAAHC accreditation and states on its website, “Four Women Health Services was founded to ensure that all women have access to the highest quality reproductive health care through direct service, education and referrals.”

Undoubtedly a more thorough review of all clinics accredited by AAAHC will uncover other abortion providers that use this certification to promote their
credibility. The abortion industry clearly uses AAAHC accreditation to deceive women into thinking that they are receiving high quality health care from them.

Some might argue that AAAHC is neutral on abortion because its standards apply across the board to all qualifying medical clinics, regardless of their support or non-support for abortion. But because AAAHC accredits the work of abortion clinics, it is clear that AAAHC endorses the credibility of abortion providers, thereby enhancing their status. Therefore, centers should consider whether giving money to AAAHC undercuts and destroys the foundational principles upon which pro-life pregnancy centers exist.

Compliance Considerations

According to its website, AAAHC, is a “private, non-profit organization” which is governed by a Board of Directors that includes input from other professional organizations. In the first paragraph of their 2015 Annual Report, the CEO discusses their “commitment to embrace changes in the health care landscape ...”. Therefore, centers should consider the likelihood of future AAAHC compliance requirements, meant to “embrace change”, that could include a deference to abortion as a healthcare right thus forcing pro-life pregnancy centers to discontinue their relationship with AAAHC.

The ongoing financial burden of accreditation, might also cause a center to reconsider their relationship with AAAHC after the initial accreditation has been granted. Centers should therefore strategically consider the answer to the question likely to be posed by those opposed to the work of pregnancy centers: “Is it true you are no longer accredited by the AAAHC?” While there could be a valid reason for dropping accreditation, a “we are no longer accredited” answer could be damaging nonetheless.

It is also important to recognize that AAAHC is based in Illinois, the same state where, just in January, pro-abortion legislators succeeded in stripping conscience rights from pro-life healthcare professionals in favor of the patient’s right to be referred for abortion.

Evaluating the Return On Investment (ROI)

The initial expense of AAAHC accreditation, along with the expense of tri-annual renewal (more inclined to increase then decline) should be measured against the expected return on the investment of resources. Centers should ask, “Does the cost involved – namely engaging a consultant and committing to maintaining accreditation - reap the promised/desired outcomes?”

While the fees are direct expenses, there is considerable “soft” cost in personnel time to factor together for a comprehensive picture of the true cost of such an investment.

Any evaluation of ROI should also include a discussion of “opportunity costs” defined as “unseen losses.” It is important to factor the opportunities a center chooses to forego in electing to spend the resources to achieve accreditation.

A good question to ask is, "What other gains might we make with such an outlay of resources?" Centers should consider the risk in not directing those funds to, for example, increasing marketing to target clients, adding hours of service and
increasing paid staffing, or funding additional staff training. A solid investment decision should recognize what is not chosen, as much as what is chosen.

Once true costs are projected, it is important to clearly define the expected return. Leadership should clearly have S.M.A.R.T. (specific, measurable, achievable, relevant, and timely) goals set before making such an investment. Then, and only then, can the ROI be accurately calculated. Since there is no evidence that AAAHC accreditation provides additional legal protection or staves off legislative efforts designed to undermine PMCs, these points cannot be considered “smart” returns on investment.

**Recommendation**

In light of the lack of additional protections and the aforementioned concerns, NIFLA, Care Net & Heartbeat strongly recommend that AAAHC accreditation consideration include a comprehensive evaluation of all the above, as well as the costs - hard and soft, initial and on-going - measured against clearly defined goals for that accreditation.

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http://www.aaahc.org/Global/Annual%20Report/AAAHC%20AR%202015_FINAL.pdf