



CHARTER OF THE ASSOCIATION FOR HEALTH CARE RESOURCE & MATERIALS MANAGEMENT (AHRMM) OF THE AMERICAN HOSPITAL ASSOCIATION

ARTICLE 1 – NAME AND PURPOSE

The name of the Professional Membership Group (“**PMG**”) shall be the Association for Health Care Resource & Materials Management (“**AHRMM**”), an operating unit of the American Hospital Association (“**AHA**”).

AHRMM’s vision is to advance health care through supply chain excellence in alignment with the vision of the AHA: A just society of healthy communities, where all individuals reach their highest potential for health.

AHRMM advances health care through supply chain excellence by providing education, leadership and advocacy to professionals in health care and related organizations that are accountable to the community and committed to health improvement.

AHRMM, and the professionals it represents, provides a primary professional, technical, and administrative resource for AHA in formulating policy, determining membership programs, and fulfilling AHA’s advocacy role in influencing the public, legislation, and regulations.

AHRMM functions as a PMG of the AHA operating in accordance with this Charter and AHA policies and procedures, including AHA’s PMG Framework, each as approved at the sole discretion of AHA leadership.

ARTICLE 2 – AHRMM MEMBERSHIP

Section 1. Eligibility. Membership in AHRMM is available to professionals whose job responsibilities include health care supply chain / resource & materials management or who have an interest in the field of health care supply chain / resource & materials management and who meet the eligibility criteria for AHRMM Membership in a below category. All members have the right to vote in the Advisory Board member election except that this voting right does not extend to the election of the Advisory Board Chair-Elect.

a. Supply Chain Provider Members. Individuals eligible for Supply Chain Provider membership in AHRMM shall be those who are employed by a health care provider organization.

b. Affiliate Members. Individuals eligible for Affiliate membership in AHRMM shall be those who are employed in the health care field as vendors, consultants, trade press, GPOs, distributors, and similar entities supporting providers.

c. Military Members. Individuals eligible for Military membership shall be those individuals who are active duty military personnel.



d. Supply Chain Executive Members. Individuals eligible for Supply Chain Executive membership shall be those who are employed as executives such as CEOs, EVPs, VPs, or similar executive level position by health care provider organizations.

e. Young Professional Associate Members. Individuals eligible for Young Professional Associate membership shall be those individuals who meet both of the following criteria:

(1) are age thirty-five (35) or younger, as verified by documentation proving age as specified by AHRMM during the application process.

AND

(2) Are eligible for the Supply Chain Provider Membership or the Affiliate Membership as outlined in Section 1.

When a Young Professional Associate Member reaches the age of thirty-six (36), membership will be transferred to Supply Chain Provider or Affiliate member status, as applicable.

f. Student Members. Individuals eligible for Student membership shall be those who are enrolled full-time in an accredited school and give proof of such full-time enrollment when applying for such membership.

g. Retired Members. Individuals eligible for retired membership shall be those who have been supply chain members of AHRMM and are now retired from full-time employment within health care supply chain management and desire to continue their membership.

h. Lifetime Members. Individuals eligible for Lifetime membership are those who have either served as President or Chair of AHRMM.

Section 2. Termination of Membership.

a. Resignation. Any member may resign at any time by so stating in writing to the AHRMM Executive Director and is not entitled to a refund of dues.

b. Suspension and Expulsion. Any AHRMM member whose conduct is deemed to be detrimental to the best interest of AHRMM, or who willfully violates this Charter or AHA policies, may be suspended or expelled by action of the Advisory Board. Initially, the conduct that is deemed to be in violation will be reviewed by the AHRMM Executive Committee. The Advisory Board will take action based on the Executive Committee's recommendation. The member will be informed in writing of the Advisory Board's anticipated action and the member is entitled to a hearing before the Advisory Board before the action is taken.

c. Loss of Eligibility. Members who no longer meet the membership eligibility in AHRMM in their current member category shall adjust or leave membership accordingly at the time of renewal.

d. Nonpayment of Dues. Membership of any person who is 60 days in arrears in the payment of annual dues will be automatically terminated.

Section 3. Transfer of Membership. Membership in AHRMM shall not be transferable to another person. Members who change their institutional affiliation shall retain their membership during the full term for which dues have been paid. In limited, select situations such as memberships for the Veterans Administration and the Uniformed Services, memberships belong to institutions and those membership do transfer to another person from that institution.



ARTICLE 3 – AHRMM ADVISORY BOARD

Section 1. Composition. The Advisory Board shall be composed of fourteen (14) active leaders in the health care supply chain: the Chair, Immediate Past Chair, and Chair-Elect of AHRMM, eight (8) leaders from the Health Care Provider membership addressed below, and two (2) leaders from the Affiliates membership addressed below. The AHRMM Executive Director is a perpetual, non-voting member of the Advisory Board. From time to time, the Advisory Board may be expanded to include one Special Appointee Advisory Board member as described below. One Health Care Provider seat and one Affiliate seat on the Advisory Board will be made available to new AHRMM members, provided that the number of new AHRMM members on the Advisory Board at any given time will not exceed two. A new AHRMM member is defined as any AHRMM member who, at the time of appointment to the Advisory Board, became for the first time an AHRMM member within the past 12 months.

Section 2. Eligibility.

a. General. To be eligible for an Advisory Board position, an individual must be a member in good standing with AHRMM during the nomination and appointment period. No Advisory Board member who has served a complete Advisory Board term shall be eligible for reelection as an Advisory Board member for a period of one year.

b. Advisory Board Membership Categories. The AHRMM Advisory Board membership categories areas:

i. Health Care Providers. To be eligible for a Health Care Provider Advisory Board member position, an individual must be an AHRMM member in any AHRMM membership category except for Affiliate.

ii. Affiliates. To be eligible for an Affiliate Advisory Board member, an individual must be an Affiliate member in AHRMM.

iii. Special Appointee. A Special Appointee Advisory Board Member is appointed by the Chair after a majority vote by the Advisory Board. A Special Appointee Advisory Board Member will be appointed for a specific purpose or task and the length of their term will be determined at the time of their appointment.

Section 3. Election and Term. AHRMM members will be notified about open Advisory Board seats by membership category and given application steps. The Nominating Committee will review the applications, select the slate of candidates to serve as new Advisory Board member(s) if elected, and notify the Advisory Board. An election will be held for AHRMM members to vote on the slate of candidates. A majority of those members voting is required for a candidate on the slate to be elected to the Advisory Board. The term of each Advisory Board member (except the Executive Director and any Special Appointees) is three years.

Section 4. Forfeiture and Removal. If the individual who was elected to the Advisory Board has a change in employment that affects their membership category, that individual may retain his/her seat for the remainder of their elected term. At the next possible election period, the election ballot will reflect the open category so as to regain the intended composition of the Advisory Board.



Section 5. Powers. AHRMM's Advisory Board, consistent with the AHA's mission, goals and objectives, shall consult with the AHA including AHRMM's Executive Director on industry matters that may impact AHRMM. The actions of the Advisory Board shall at all times be in conformity with the policies and procedures of AHA including the AHA's PMG Framework.

Section 6. Vacancies. Should a vacancy occur on the Advisory Board, other than the offices of the Immediate Past-Chair, Chair-Elect and Chair, the Chair, with the approval of the Advisory Board, shall appoint an eligible member, consistent with the Advisory Board composition requirements, to complete the unexpired term.

Section 7. Meetings. The Advisory Board shall meet (virtually or in person) as frequently as they shall determine after consulting with the AHRMM Executive Director, but not less than one time a year.

ARTICLE 4 – ADVISORY BOARD LEADERSHIP

Section 1. Composition. Leaders of the AHRMM Advisory Board are the Chair, Chair-Elect, and Immediate Past Chair. The Chair of AHRMM shall chair the Advisory Board meetings.

Section 2. Eligibility. A person interested in running for the AHRMM Chair-Elect seat must meet the following requirements: (1) Be an AHRMM member in good standing for the last two consecutive years, (2) Be a Certified Materials & Resource Professional (CMRP) and/or Fellow (FAHRMM), and (3) Have completed one year as an AHRMM Advisory Board Member prior to self-nominating. All AHRMM Advisory Board leaders must be employed by a hospital or health system.

Section 3. Term. Each Advisory Role Leader will serve in their role for a period of one (1) year.

Section 4. Nominations. One who meets the above criteria may self-nominate for the Chair-Elect position by notifying the AHRMM Executive Director in writing.

Section 5. Election. An election shall be held for the Chair-Elect role annually. The winner of a majority of votes of Advisory Board members (with any nominee who is also an Advisory Board member recusing herself/himself from the vote) will become the next Chair-Elect, the sitting Chair-Elect will elevate to the Chair role, and the sitting Chair will transition to the Past-Chair role.

Section 6. Duties. The AHRMM Advisory Board Chair shall chair the Advisory Board and preside at all meetings of the Advisory Board. The Chair-Elect shall perform the duties of the role of the Chair whenever the Chair is unable to do so.

Section 7. Vacancies. If the role of Chair becomes vacant, the Chair-Elect shall immediately accede to the Chair role for the duration of the unexpired term and shall continue to serve as Chair for the subsequent term. If the role of Chair-Elect becomes vacant, the person who received the next highest number of votes in the previous election for Chair-Elect shall become Chair-Elect. If the office of Chair-Elect becomes vacant at a time when the office of Chair is also vacant, the Immediate Past Chair will serve as Chair for the remainder of the Chair's term. At AHRMM's next regular election, a Chair and Chair-Elect shall be elected. The nomination and election of the Chair shall follow the same procedure as that of the Chair-Elect.



Section 8. Forfeiture and Removal. Advisory Board leaders shall automatically forfeit their role if their AHRMM membership terminates pursuant to Article 2, Section 2. Such leaders are subject to removal from their leadership role for failure to fulfill the duties of the role by two-thirds vote of AHRMM's Advisory Board. If any Advisory Board Leader, after being installed in their role, becomes ineligible to serve based on the eligibility criteria above, they may remain in the role until the natural expiry of the role's term.

ARTICLE 5 – CONFLICTS OF INTEREST

Advisory Board members shall disclose, in accordance with the AHA PMG Framework and AHA policies, any interest that is or might result in a conflict of interest or the appearance of a conflict of interest and shall otherwise comply with such framework and policies toward mitigating any actual or perceived conflict. Unresolved conflicts may result in suspension or removal from the Advisory Board as determined by the discretion of the AHA.

ARTICLE 6 – COMMITTEES

AHRMM shall have an Executive Committee as set forth in the AHA's PMG Framework. It shall also have a Nominating Committee composed of the AHRMM Officers (Chair, Chair-Elect, and Immediate Past Chair), the two most immediate past AHRMM Chairs and up to three AHRMM members, each as appointed by the AHRMM Executive Director in consultation with the Executive Committee. The AHRMM Executive Director, in consultation with the Executive Committee, may appoint and remove the Nominations Committee chair.

Other committees, task forces, and other subgroups may be established and disestablished by the Chair, subject to Executive Committee approval for purposes compatible with the vision, goals and objectives of AHRMM. The Chair may also appoint individuals to member subgroups subject to Executive Committee approval. All individuals serving in AHRMM member subgroups shall be AHRMM members and all member subgroups shall be chaired by a member of AHRMM.

ARTICLE 7 – CHAPTERS

AHRMM may allow for local, state, or international chapters. Such chapters shall be further defined by the form Chapter Agreement approved by the AHA and the AHRMM Executive Committee.

Any state or local chapter under this article is not an extension or part of AHRMM or an operating unit, affiliate, or subsidiary of the AHA but rather a distinct legal entity outside the ownership or control of the AHA; any such chapter is, therefore, responsible for maintaining its own financial records, filing appropriate notices and forms with state and federal income tax authorities, maintaining necessary insurance coverage, and so forth.

ARTICLE 8 – CHARTER AMMENDMENT

This Charter may be amended at the sole discretion of the AHA after consultation with the AHRMM Executive Committee and AHRMM Advisory Board, and the AHRMM Advisory Board may propose changes to this Charter at any time through the Executive Director.