

THE GLOBAL LEADER IN OPTIMIZING QUALITY EAR, NOSE, AND THROAT PATIENT CARE

Legislative & Political Advocacy Toolkit – September 2018

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Goals of Toolkit



 Understand the legislative, political, and regulatory processes and how they impact your practice of medicine.

Understand how the AAO-HNS works to impact the policy-making process.

 Define your role and learn what you can do individually to contribute to the advocacy process.

Introduction to U.S. Federal Government



Legislative Branch: United States Congress

- U.S. Senate
- U.S. House of Representatives



Executive Branch: Office of The President

Federal Agencies



Judicial Branch: U.S. Supreme Court

Nine justices

United States Congress

Legislation must pass both bodies:



- U.S. Senate
 - 2 Senators for every state (6-year terms)
- U.S. House of Representatives
 - 435 Members
 - Apportioned to state based on population (2-year terms)

U.S. Senate

Republicans have a 51-49 majority.



- Two key committees overseeing healthcare:
 - Finance Medicare, Medicaid
 - Health, Education, Labor, & Pensions Healthcare in general
- 60-vote threshold for most legislation
 - Slow moving
 - Action requires bipartisan support

U.S. House of Representatives

Republicans have a 237-193 majority (5 vacancies)



- Two key committees overseeing healthcare:
 - Energy and Commerce Medicare, Medicaid, healthcare industry
 - Ways and Means Medicare
- Simple majority required to pass legislation
 - Can move more quickly
 - Rules process controls debate and amendments

U.S. Congress: Status Matters!

- Party with majority vote
- Leadership Speaker of the House, Majority Leader, Whip, etc.
- Committee Assignments
- Seniority





The Executive Branch

Office of the President



Department of Health and Human Services



The Department of Health and Human Services

- Eleven operating Divisions/Offices that administer a variety of healthcare services, including:
 - Centers for Medicare & Medicaid Services (CMS)
 - Medicare
 - Timing is critical
 - Annual rulemaking cycles
 - Public comment periods
 - Medicaid most administrative work done at the state level
 - Federal Marketplaces (Insurance Oversight)
 - Food and Drug Administration (FDA)
 - Centers for Disease Control & Prevention (CDC)
 - Agency for Healthcare Research & Quality (AHRQ)
 - National Institutes for Health (NIH)
 - National Institute on Deafness and Other Communication Disorders

How Can I Be an Effective Advocate?

• Be aware

Be active

Be educated

Be committed ←



AAO-HNS Legislative & Grassroots Programs

- Opportunities to Get Involved:
 - State Trackers
 - In-District Grassroots Outreach (I-GO)
 - PROJECT 535
- Ways to Stay Informed:
 - ENT Advocacy Network
 - Social Media
 - Legislative & Political Affairs Webpage: www.entnet.org/advocacy

AAO-HNS Grassroots Programs





 AAO-HNS State Trackers phone call monthly during state sessions to collaborate and identify trends.



- I-GO: Dedicated to finding opportunities for AAO-HNS members to meet LOCALLY with candidates and elected officials.
 - Participate in face-to-face meetings, practice visits, fundraisers, townhalls, etc.



- Join a network of nearly **2,000** of your colleagues to receive the latest updates on legislative and political activities.
 - Receive The ENT Advocate monthly a FREE member benefit!



- PROJECT 535
 - Pairs an AAO-HNS Member with their Federal lawmaker as a "key contact."

PROJECT 535

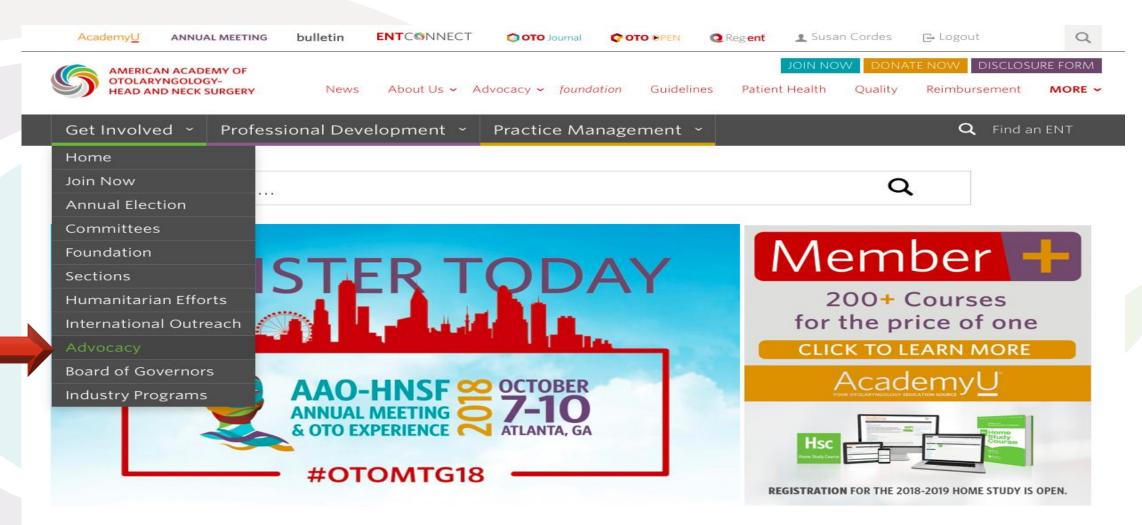
- Launched in 2015 by the AAO-HNS Board of Governors.
- Purpose: By using coordinated email and phone campaigns, we can improve our outreach to federal legislators when major issues impacting the specialty are debated by Congress.



- 435 Members of the U.S. House of Representatives
- 100 Members of the U.S. Senate
- Territories (six) also included.
- The commitment is minimal, but the impact is immense!
- Sign up at www.entnet.org/project535



Get Involved with PROJECT 535 at entnet.org under Advocacy



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Tweets by @AAOHNSGovtAffrs





Thank you @RepYvetteClarke for taking the time to meet with Richard Rosenfeld, MD and Alisha Timaspolsky, MD and discuss issues of importance to @AAOHNS!



Aug 7, 2018



Happening now: @HouseCommerce #SubHealth hearing on #MACRA and #MIPS



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Sign Up for PROJECT 535

Become A Member of PROJECT 535

Successful legislative advocacy starts with a solid grassroots foundation. To ensure the message of otolaryngology-head and neck surgery is heard broadly on Capitol Hill, the AAO-HNS launched PROJECT 535 in 2015. Our goal is to recruit a "key contact" for each U.S. Senate and House Congressional seat to improve our outreach to federal legislators when major healthcare issues are debated by Congress. The commitment is minimal, but the impact is immense. Sign-up today to join this exciting program!

* Required



State Advocacy

- Why should I care about what goes on at the state level?
 - "Laboratories" for policy changes
 - Main centers for regulation
 - 8,000 state legislators across the nation





State Government

- Similar to the Federal Government (three branches)
 - Executive Governor
 - Enacts bills passed by the legislature, putting programs into action.
 - Legislative Usually divided into upper and lower chambers
 - Every state but Nebraska has two chambers
 - Judicial Court system
 - Interprets and explains laws
 - Decides if laws are constitutional

Opportunities to Get Involved in State Advocacy

- Join the AAO-HNS State Trackers Team!
 - Nearly 150 AAO-HNS physician volunteers monitoring legislation in their state.
 - Determination of action in conjunction with Academy leadership/state society leadership.
 - AAO-HNS State Trackers meet monthly via conference call during state sessions to collaborate and identify trends.
 - State-mENT, a monthly State Tracker update, is released after each conference call.



EXAMPLE: 2018 State Trends monitored by State Trackers

• Scope of Practice:

- Audiologists/SLPs
- Hearing Aid Dispensers
- Dentists
- Advance Practice Nurses
- Physician Assistants
- Pharmacists

Specialty-Specific Issues:

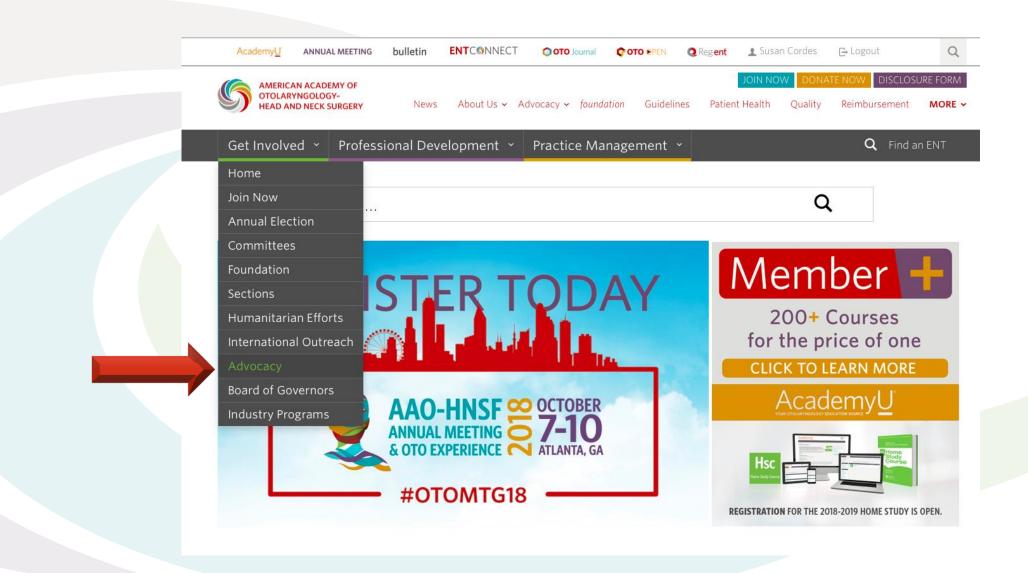
- Hearing Aid Coverage/Mandates
- Prior Authorization
- In-Office Compounding
- Hearing Aid Dispensing

Broader Medicine:

- Board Certification/MOC
- Medical Liability Reform
- Balanced Billing
- Telemedicine



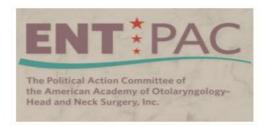
Find State Tracker Information at entnet.org



Click on the Icon in the Center of the Page

Advocacy Home **ENT PAC** Tweets by @AAOHNSGovtAffrs AAO-HNS GA Staff Retweeted Sujana Chandrasekhar @SujanaChandrase Love to see fellow Otolaryngologists doing #advocacy - particularly the Pres of the @AAOHNS Dr @GavinSetzen Aug 16, 2018 AAO-HNS GA Staff Retweeted AmAcadOtolaryngology @AAOHNS .@AAOHNS President @GavinSetzen meets with @RepPaulTonko Aug 16, 2018 AAO-HNS GA Staff @AAOHNSGovtAffrs Thank you @RepPaulTonko for discussing issues of importance to the @AAOHNS with @GavinSetzen!

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State Legislative Advocacy

Grassroots Advocacy, Political Action, Legislative Advocacy, Scope of Practice



AAO-HNS State Trackers

Thank you for participating in this important program! Please use the resources below to help guide you during this year's legislative session. If you have any questions or problems, please contact the Government Affairs team at govtaffairs@entnet.org.

AAO-HNS State Trackers List

State Legislative Tracker - Introductory Slideshow

SCROLL DOWN **FOR MORE RESOURCES**



Academy State Advocacy Bill Tracking:

Legislative Tracking by State

Legislative Tracking by Issue

State Legislative Tracking Resources:

2018 State Legislative Session Dates 2018 State Legislative Priorities State Legislative Action Request Form

State "Mark-up" Styles
Glossary of legislative terms
Example of the state legislative process
Explanation of the crossover period

Other State Resources and Links:

FindLaw - Access your state's constitution, administrative codes, bills, and other resources

National Conference of State Legislatures - Access legislative information and research on a variety of topics

Stateline - Daily news on emerging trends and issues in state policy and politics

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Tweets by @AAOHNSGovtAffrs





Sujana Chandrasekhar @SujanaChandrase

Love to see fellow Otolaryngologists doing #advocacy - particularly the Pres of the @AAOHNS Dr @GavinSetzen





Aug 16, 2018





AmAcadOtolaryngology

@AAOHNS

.@AAOHNS President @GavinSetzen meets with @RepPaulTonko





Aug 16, 2018



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View on Twitter

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Federal Legislative



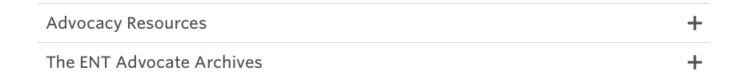
State Legislative



THIS WILL TAKE YOU TO THE State-mENT



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The State Tracker State-mENT

Guidelines





The State-mENT is an "at a glance" one-page resource outlining the Academy's state legislative activity from the previous month. Sign up as a State Tracker and become part of the discussion!

February 2018

March 2018

April 2018

May/June 2018

GET INVOLVED

PROFESSIONAL DEVELOPMENT

PRACTICE MANAGEMENT

ENT CAREERS

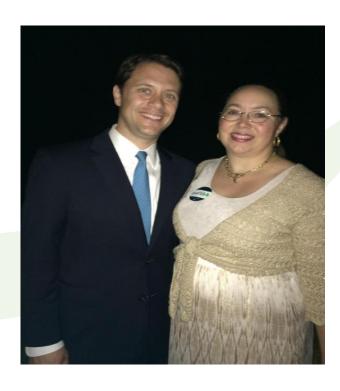
MARKETPLACE

What is the I-GO Program?

- In-district Grassroots Outreach (I-GO) is dedicated to finding opportunities for AAO-HNS members to meet LOCALLY with elected federal officials in person.
- Primary focus identify events near your home/practice.







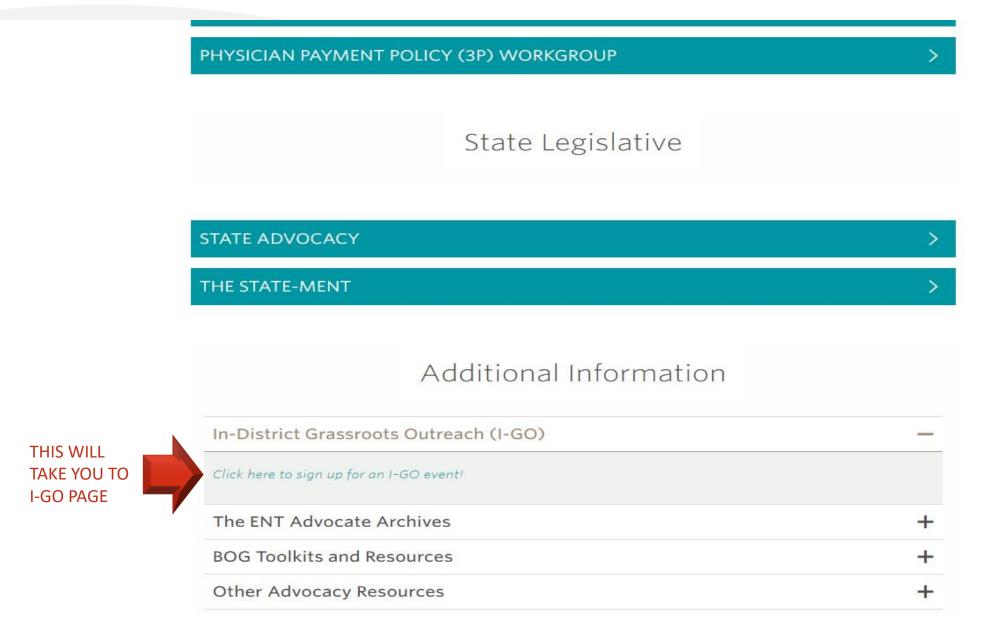
I-GO (Continued)

I-GO In-district Grassroots

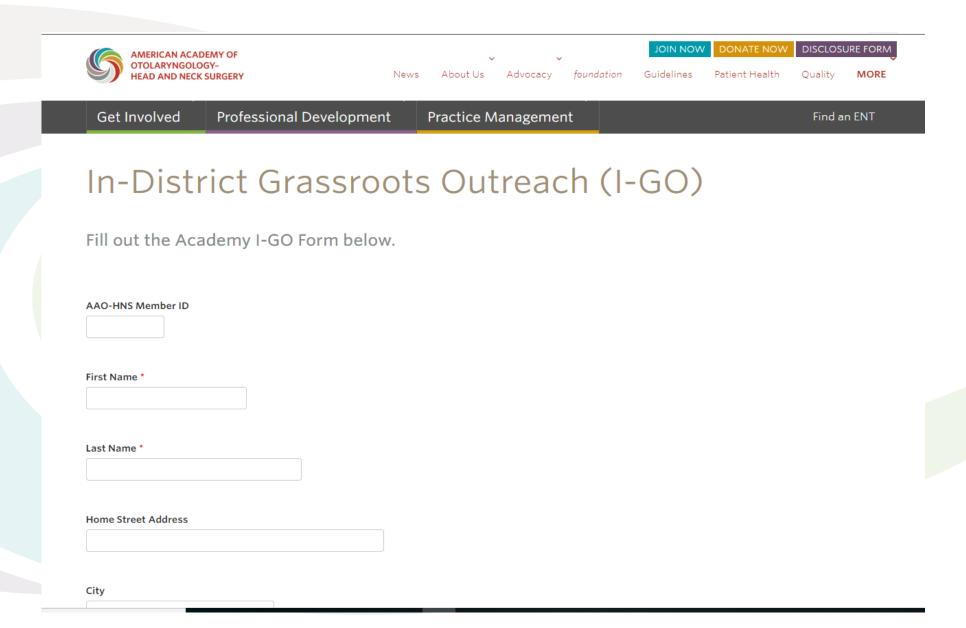
- Events since the program's launch
 - Practice visits
 - Political fundraisers
 - Meetings in local Congressional offices
- Online form available
- Prep materials/talking points provided
- LIMITED TRAVEL NECESSARY!



Find I-GO Information at entnet.org



Find I-GO Information at entnet.org



Political Action Committee

• ENT PAC is the non-partisan, issue-driven political action committee of the AAO-HNS, established in 1995 to advance and protect the interests of the specialty on Capitol Hill.



- Enhances AAO-HNS visibility and voice with federal legislators by allowing a "seat at the table."
- Helps build awareness about the specialty with Members of Congress.
- The stronger our PAC (dollars raised, number of Investors), the stronger our collective voice on our federal legislative priorities.
- Reminder: AAO-HNS membership dues cannot be used for political purposes.
- www.entpac.org website!
 - Login using your AAO-HNS ID and password.

^{*}Contributions to ENT PAC are not deductible as charitable contributions for federal income tax purposes. Contributions are voluntary, and all members of the American Academy of Otolaryngology-Head and Neck Surgery have the right to refuse to contribute without reprisal. Federal law prohibits ENT PAC from accepting contributions from foreign nationals. By law, if your contributions are made using a personal check or credit card, ENT PAC may use your contribution only to support candidates in federal elections. All corporate contributions to ENT PAC will be used for educational and administrative fees of ENT PAC, and other activities permissible under federal law. Federal law requires ENT PAC to use its best efforts to collect and report the name, mailing address, occupation, and the name of the employer of individuals whose contributions exceed \$200 in a calendar year.

Re-designed ENT PAC website: www.entpac.org



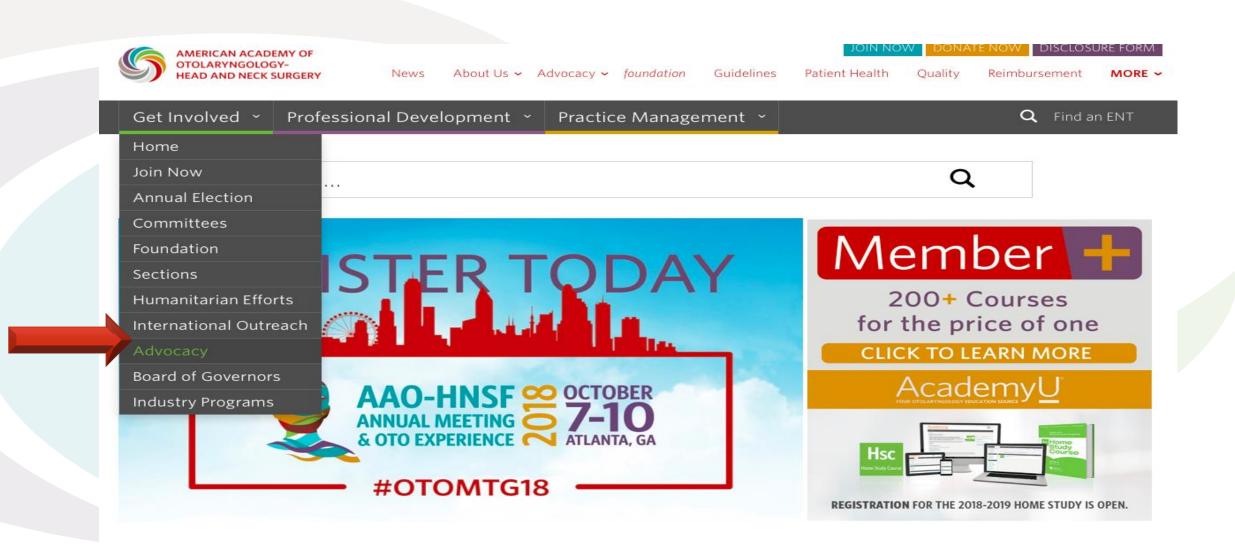


ENT Advocacy Network

- Network of nearly 2,000 of your colleagues
- Receive the latest updates on legislative and political activities
- Receive monthly e-newsletter, The ENT Advocate – a FREE member benefit!



Find Advocacy Network Information at entnet.org



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Aug 7, 201

Happening now: @HouseCommerce #SubHealth hearing on #MACRA and #MIPS

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ENT PAC

Dear ENT Advocacy Network Member:

August 3, 2018

Legislative and political activity directly affects our practices and our patients. As a leading advocate for otolaryngology-head and neck surgery, we hope you enjoy reading this edition of The ENT Advocate, your premier source of advocacy information for the specialty!

Lead Story

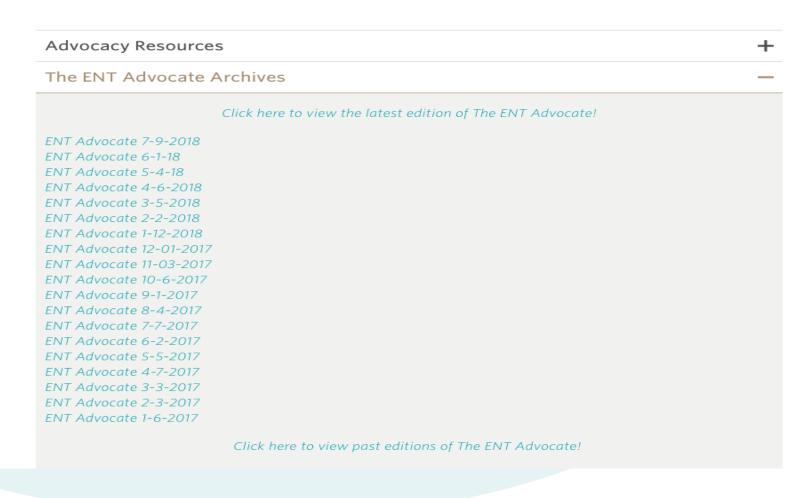
CMS Publishes Proposed 2018 Physician Fee Schedule

On July 12, the Centers for Medicare & Medicaid Services (CMS) <u>issued a proposed rule</u> that includes 2019 updates to payment policies, payment rates, and quality provisions for services furnished under the Medicare Physician Fee Schedule (PFS) and the Quality Payment Program (QPP). The AAO-HNS is analyzing the 1,500-page proposed rule and will submit comments by the September 10 deadline. To help answer questions regarding the proposed rule and its impact on your practice and patients, a new Panel Presentation has been added to the <u>AAO-HNSF 2018 Annual Meeting & OTO Experience</u> program.

Action Requested

From the Main Advocacy Page, Scroll Down for ENT Advocate Archives

Additional Information



...and more Advocacy Resources

Additional Information

Advocacy Resources **Political News** The Hill Politico Roll Call **U.S Congress** U.S. Senate U.S. House of Representatives **Executive Branch** The White House Department of Health & Human Services Centers for Medicare & Medicaid Services National Institutes of Health Food and Drug Administration National Institute on Deafness and Other Communication Disorders National Academy of Medicine (formerly IOM) **State Legislative Resources** National Conference of State Legislatures (NCSL) StateScape

The ENT Advocate Archives

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American Academy of Otolaryngology— Head and Neck Surgery

@AAOHNS

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- Legislative Representative for Each Society
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To Find the Board of Governors Webpage, go to entnet.org.

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WHERE THE RUBBER MEETS THE ROAD

EXAMPLES OF HOW OTOLARYNGOLOGISTS ARE ADVOCATING AND MAKING A DIFFERENCE FOR OUR PATIENTS AND OUR SPECIALTY

Legislative Success: EHDI Reauthorization

- The Early Hearing Detection and Intervention (EHDI) program helps to establish statewide plans that identify children with hearing loss, directing them to early intervention services.
- Legislative Timeline:
 - March 15, 2017: The "Early Hearing Detection and Intervention Act of 2017" (H.R. 1539/S.652), which would reauthorize funding for the EHDI program through 2022, was introduced in the U.S. House of Representatives and U.S. Senate.
 - April 26, 2017: S. 652 advanced from the Senate HELP Committee.
 - September 6, 2017: S. 652 passed the U.S. Senate via "unanimous consent."
 - October 3, 2017: S. 652 passed the U.S. House of Representatives via voice vote.
 - October 18, 2017: S. 652 was signed into law by the President.

Legislative Success: IPAB Repeal

 The Independent Payment Advisory Board (IPAB) was created as part of the Affordable Care Act. Those who opposed the Board, including the AAO-HNS, viewed it as an unaccountable body of non-physician individuals appointed by the President and charged with creating/modifying Medicare payment policy without Congressional oversight.

Legislative Timeline:

- **February 1, 2017**: Two bills (S. 260 and S. 251) seeking to repeal the IPAB provision of the ACA were introduced in the U.S. Senate.
- February 3, 2017: Legislation (H.R 849) identical to S. 260 was introduced in the U.S. House of Representatives.
- November 2, 2017: H.R. 849 passed (307-111) the U.S. House of Representatives.
- February 6, 2018: H.R. 849 was included as part of broader spending package (H.R. 1892, the Bipartisan Budget Act of 2018) and passed by Congress.
- February 9, 2018: H.R. 1892 was signed into law by the President.

AAO-HNS Members Amplify the Academy's Message with Grassroots Actions

- AAO-HNS Advocacy Staff Worked to Build Momentum
 - Support letters to U.S. House and Senate champions
 - EHDI
 - IPAB
 - Coalition efforts
 - Deaf & Hard of Hearing Alliance
 - Friends of the Congressional Hearing Health Caucus
 - Surgical Coalition
 - Meetings on Capitol Hill
 - Political events (via ENT PAC)

- AAO-HNS Members Pushed EHDI Reauthorization and IPAB Repeal to the Finish Line
 - PROJECT 535 messages (emails to federal lawmakers)
 - Action Alerts (email and phone messages to Congress)
 - I-GO meetings
 - In-district meetings with legislators
 - Political events (via ENT PAC)
 - Capitol Hill meetings in Washington,
 DC, during the AAO-HNS/F Leadership
 Forum & BOG Spring Meeting

AAO-HNS Legislative and Political Advocacy

- Participation in at least one AAO-HNS political/grassroots program contributes to the specialty's overall success.
- Legislative "wins" would NOT have been possible without AAO-HNS member participation.
 - Every call, email, meeting, and donation makes a difference!



A PRIMER FOR GETTING INVOLVED IN LEGISLATIVE ADVOCACY

Steven T. Kmucha MD, JD

- First, anyone can be effective in the arena of legislative advocacy, but it does take some time and commitment. After that, with greater experience, one becomes even more effective.
- The process begins at the local level. To be most effective, one needs to be aware of
 what is happening in the local healthcare community, not just what affects
 otolaryngologists, but what affects patients, employers who provide healthcare coverage,
 Medicaid, Medicare, local hospitals, local public health initiatives, free clinics, as well as
 what other providers are experiencing.
- To do this effectively, one needs to try to be **involved with local community organizations** like the small business groups, fraternal organizations, school board, PTA and, because so much healthcare and community support comes from organizations with religious affiliations, the local church or synagogue.
- The next step is to become familiar with the **county supervisors**. This is where many legislators start their careers, and it is much easier to get to know them when they are local. Once they move onward and upward to state or federal office, their time becomes increasingly limited, and their constituency becomes much larger.

- If possible, try to **get on your legislators' email lists**, make yourself available for questions, attend the legislators' birthday parties or holiday parties, and attend the local meetings when they are back in their district.
- Wear a name tag, introduce yourself, have business cards ready, smile, be nice, be helpful, be constructive, be available, and don't whine!
- Because otolaryngology is a small specialty, we can magnify and optimize our effectiveness by getting involved in our **county medical societies/associations** where we can learn from our colleagues, get the support of our colleagues, and magnify our voice and efforts in the legislative and socioeconomic arenas.
- Many county medical societies have legislative affairs and health policy committees
 where one can learn and contribute. These committees and the county societies often have
 long-established relationships with local and state legislators.
- Due to their limited time, legislators are often more willing to schedule meetings with larger groups of their constituents rather than meeting with individuals or small groups. Remember, legislators represent a **diverse constituency**, many of whom have a completely different and often opposing messages.
- If the county medical association/society supports the otolaryngology position, it gives added emphasis and is more likely to persuade an otherwise undecided position.

- If time permits, the experience that one gains within the county medical society/association can be used as an initial introductory step to get better involved at the state level. In some states, it is mandatory for a member of the state medical society/association to be a member of the county society. Most county societies are looking for interested members who are willing to serve in various positions. Often this means one can easily be appointed or elected to a position within the state medical society representing your local county or community.
- If the state society has a specialty delegation, get involved there, too. **Specialty**delegations tend to be more supportive of specialty issues, but one needs to be prepared to reciprocate when it is necessary.
- If there is an active local, county, or state otolaryngology society, by all means, get involved there. This is an excellent venue to learn what problems others in our specialty are experiencing, as well as providing a forum within which discussions can occur that can help with addressing and resolving some of these problems in a unified fashion rather than each individual physician having to fight a solo battle.
- This is especially important when it comes to **crafting a position in favor of or in opposition** to an existing piece of legislation or policy and is even more critical when creating the language of a new piece of legislation that one needs prior to approaching a legislator for support or endorsement.

- Many of the bills introduced at the state level are based upon legislation that has been attempted in other states. The successful efforts in one state to effectuate change in legislation or change in the policy development process can often be very helpful in dealing with legislative and policy efforts in other states.
- Legislation then becomes policy that is implemented by the appropriate regulatory
 agency. How these policies are developed is often quite different than what the legislators
 initially intended and often very different from state to state despite very similar legislative
 language.
- Finally, local, county, and state organizations are significantly more effective when there is active bi-directional communication with the national organization. One needs to be easily accessible by the limited staff in the national office. This means that each of us needs to take a proactive approach to update our address, phone, and email of record in the national office on a regular basis.
- The AAO-HNS makes a great effort to push information to members, but they can only be successful if we pay our dues on time and if we keep our contact information up to date.
 Make it easy for the staff to contact you not your medical assistant, not your answering service, etc. Read your own emails, read the emails from your county/state medical society, ready the emails about impending changes in health legislation and healthcare policy, stay awake, and stay informed.

- For national issues, there again is the benefit of large scale in working cooperatively with other medical organizations and specialties. The AAO-HNS has been able to make great progress in a number of areas due to our active AMA delegation and the close working relationship between the two organizations.
- The AMA does a very good job in pushing information to dues-paying members about federal legislation, federal health policy, Medicare changes, national coding and billing policies of the payers, legal battles in the defense of physicians' rights, etc.
- Staying involved takes time, effort, and commitment. To be most effective, one needs to get involved at the local level and build upon that. This also takes money as county and state medical societies, local/county/state otolaryngology societies, and, of course, the AAO-HNS and AMA require the payment of dues. While not all local and state otolaryngology societies collect dues, most do. But, with the payment of dues, comes greater communication and greater engagement.
- With greater engagement and the knowledge that results, we can all individually be more informed and more effective in our legislative advocacy efforts. With multilevel engagement, our small specialty society can significantly magnify our efficiency and effectiveness at our legislative and health policy efforts.



THE GLOBAL LEADER IN OPTIMIZING QUALITY EAR, NOSE, AND THROAT PATIENT CARE

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