Annual Report: Calendar Year 2021
The 2021 Annual Report is a special one in the history of the American Academy of Otolaryngology-Head and Neck Surgery and its Foundation (AAO-HNS/F) in that it marks the 125th anniversary of our organization. The year 2021 was the convergence of both the reflection of our rich history and footprint in the house of medicine and our proactive response to the ongoing transformation of member and patient needs ignited by the COVID-19 pandemic. As a result, and through a thorough and engaged strategic planning process, the Academy not only strengthened the pillars of this organization—advocacy, education, and research—but extended that reach through new initiatives and campaigns.

The 2021 AAO-HNS/F Strategic Planning process, which included considerable input from over 100 internal and external stakeholders representing the full spectrum of the otolaryngology community, began in early 2021. Both the plan and the budget that supports it were finalized and approved at the Boards of Directors meeting in April.

ADDRESSING EQUITY IN HEALTHCARE AND THE CHALLENGES OF IMPLICIT BIAS

During the strategic planning process, the AAO-HNS/F updated our Core Purpose and Core Guiding Principles and added the word “equitable” to our Core Purpose to read, “We engage our members and help them achieve excellence and provide high-quality, evidence-informed, and equitable ear, nose, and throat care through professional and public education, research, and health policy advocacy.” We expanded that further with one of our updated Core Guiding Principles that reads, “Promote inclusive diversity and equity in ENT patient care and throughout our specialty and organization.”

The AAO-HNS/F strives to serve as a positive example of inclusive excellence, where all members have the opportunity to thrive. We strive for a workforce that has parallel diversity to the communities we serve. We aspire to overcome healthcare disparities so that we can provide high-quality, equitable care to all. We know that significant health disparities exist, and we know that the work ahead of us matters—that this work will require us to devote our talents, resources, and creativity to make a meaningful difference.

To effect change and reduce and eliminate barriers to equitable care, the AAO-HNSF, through the collaborative effort of the Diversity and Inclusion Committee, created 10 interactive videos that explore the most common types of implicit bias. Past President Duane J. Taylor, MD, provided the introductory video for the series. The production of this valuable series was made possible by a successful staff effort to identify funding sources and secure the needed resources for the production. The Academy would like to thank the sponsors of this project—Medtronic, the Josiah Macy Jr. Foundation, Acumed, Integra Foundation, and Olympus—for their generous support that allowed production of this valuable resource.

We also extend a special thank you to the members of the AAO-HNS Diversity and Inclusion Committee and Foundation staff for their dedication to this project and commitment to providing valuable resources not only to the members of the Academy but to the healthcare community as a whole.
FOCUS OF BUSINESS OF MEDICINE AND DEVELOPING THE PRIVATE PRACTICE STUDY GROUP

In response to the ongoing, persistent challenges to maintaining a well-run medical practice that are increasing and expanding every year, AAO-HNS leadership included a new focus on the “Business of Medicine” in the Academy’s updated 2021 Strategic Plan with the following objectives:

→ Advocate for appropriate reimbursement and diminished administrative burdens.
→ Promote awareness of existing practice management resources through collaboration with our practice administrator colleagues.
→ Develop an active forum for collaboration on practice management support.
→ Develop strategic models for incorporating advanced practice providers (APPs) into team-based otolaryngology care.

An assortment of venues and approaches will be utilized to attain these objectives, including the creation of the Private Practice Study Group (PPSG). ThePPSG will work in collaboration with the Academy’s 3P Workgroup and Advocacy team to gather payer policy information and concerns necessary for successful advocacy, report on innovative practice strategies and solutions, and advise the Board of Directors on its constituents’ needs. Equally as important, it will give a large number of private practitioners a strong voice and a community through which they can take an active role in advocacy efforts.

FUTURE OF MEETINGS TASK FORCE

One major area of transformation as a result of the COVID-19 pandemic has been the logistics of meetings. In response, the Board of Directors created a Task Force on the Future of Meetings that is charged with evaluating the entire portfolio of meetings that the AAO-HNS/F convenes each year. To remain relevant to the needs of attendees of our meetings, it will be critical for the Task Force to identify the purpose and goals of each as well as who are the target audiences for our meetings. Since we are likely to be dealing with some level of the COVID-19 pandemic well into the future, we will need to maintain flexibility and practice patience as we find the best way to maintain the significant benefit of the meetings while considering stakeholder concerns and value.

125 STRONG

The 125 Strong Campaign was initiated to drive transformation and innovation, expand and magnify programs and services, and collectively partner for the health and well-being of our members and those we serve.

The four areas of this campaign, which will run through the end of 2022, include Diversity, Equity, and Inclusion (DEI); Education; Leadership Development and Mentorship; and Wellness. We extend a special thank you to two Past Presidents Sujana S. Chandrasekhar, MD, and Albert L. Merati, MD, who are serving as the Co-chairs of the 125 Strong Campaign, and to the leaders of the four projects: Angela M. Powell, MD (DEI); Richard V. Smith, MD (Education); Kathleen L. Yaremchuk, MD, MSA (Leadership Development and Mentorship); and Dana M. Thompson, MD, MS (Wellness).

We have made strides on the fundraising goals for this campaign in 2021, but we need more participation from the membership in 2022 to reach our $5 million goal in total. Look for more opportunities throughout in the coming year on how you can participate and contribute to the project and initiatives that further the efforts of our organization’s supporting pillars.

TRANSITION IN LEADERSHIP

Supporting the extensive work of the Strategic Plan is a multi-layer approach that includes the Boards of Directors, coordinators, committees, sections, member volunteers, and staff, as well as our collaboration through specialty and other medical societies.

In 2021 there were several transitions in the coordinator-level position to note. Daniel C. Chelius, Jr., MD, served his first full year as Annual Meeting Program Coordinator after Mark K. Wax, MD, finished his term in October 2020. Mark E. Zafereo, Jr., MD, took the torch from J. Pablo Stolovitzky, MD, in October and is now serving as the sixth Coordinator for International Affairs. Vikas Mehta, MD, MPH, assumed the role of Coordinator for Research and Quality in October when Cecelia E. Schmalbach, MD, MSc, stepped down to assume the role as Editor in Chief-elect for Otolaryngology-Head and Neck Surgery and OTO Open. She will serve as the first AAO-HNSF female Editor in Chief starting in October 2022 at the end of the term for current Editor in Chief John H. Krouse, MD, PhD, MBA.

THE 125-YEAR LAUNCH PAD

Over the years, the Academy has expanded from primarily an education and research organization that fostered a collegial community of U.S. otolaryngologists to a full-service association with significant international presence and collaborative relationships to meet the needs and preferences of otolaryngologists around the globe. The discipline to focus both talents and resources on factors directly related to improving patient care and meeting members’ needs has allowed our organization to thrive in changing environmental and political situations as well as through global pandemics like COVID-19.

The continued growth in the specialty and the organization can be directly linked to the commitment of our engaged otolaryngology community. It can also be mapped to our ability to transcend challenges and recognize the transformative significance of innovation and initiative.

As the year closes to our 125-year celebration, it is quite evident that otolaryngology-head and neck surgery has a rich history and has established itself as an essential, highly respected specialty within the medical community. Just like the past 125 years, our specialty and organization will rise to the challenges that confront us, advancing otolaryngology and improving patient care around the world thanks to the extraordinary dedication and leadership of our members.
LEGACY of EXCELLENCE
Published a print and digital version of the sequel to Century of Excellence. This nearly 300-page, colorful illustrative publication documents the AAO-HNS/F history and contributions to otolaryngology-head and neck surgery over the past 25 years.

125th ANNIVERSARY SPECIAL ISSUE OF THE BULLETIN
Published a special, commemorative issue of the Bulletin in January 2021 that documented the AAO-HNS/F 125-year history. This bonus issue included contributions from guest authors.

THE LEGACY of EXCELLENCE WAS MADE POSSIBLE BY THE GENEROUS SUPPORT OF:

Thank you for helping the AAO-HNS/F honor and share our rich 125-year history with the global otolaryngology-head and neck surgery community.
125 STRONG CAMPAIGN

The 125 Strong Campaign commemorates the 125th anniversary of the Academy and our specialty and is critical to shaping our future together. Ensuring the AAO-HNSF raises the funds needed to complement our existing programs is a major component of shaping the specialty’s next 125 years and beyond. The 125 Strong Campaign is a fundraising effort designed and driven by practicing otolaryngologists to provide funds for programs for otolaryngologists locally, regionally, nationally, and internationally. We are investing in each other, in you, your partners, your trainees, and your communities—as we work to improve patient care at home and around the world. This fundraising effort, which officially launched in January 2021, focuses on raising funds in four essential areas: Diversity, Equity, and Inclusion; Education; Leadership Development and Mentorship; and Wellness.

HALL OF DISTINCTION

The AAO-HNS/F announced the selection of the inaugural class of the “Hall of Distinction.” The Awards Task Force, chaired by Past President Albert L. Merati, MD, recommended and the Executive Committee subsequently approved these individuals for the 2021 inaugural class of inductees. President Carol R. Bradford, MD, MS, honored this outstanding class of inductees on Tuesday, October 5, 2021, followed by a reception.

L to R: William Harry Barnes, MD; John J. Conley, MD; Antonio De la Cruz, MD; Hal Lovelace Foster, MD; Chevalier Jackson, MD; Helen F. Krause, MD

L to R: M. Jennifer Derebery, MD; K.J. Lee, MD; Eugene N. Myers, MD, FRCS Edin (Hon); James L. Netterville, MD; Gavin Setzen, MD; Gayle E. Woodson, MD

LEGACY of EXCELLENCE MUSEUM

The Academy’s rich history was on display in the 125th Anniversary Legacy of Excellence Museum at the Annual Meeting & OTO Experience in Los Angeles, California. This exhibit provided attendees the opportunity to view a sampling of artifacts from the John Q. Adams Center for the History of Otolaryngology-Head and Neck Surgery housed at the Academy’s headquarters—including some original artwork from Chevalier Jackson, MD, from 1939. It also included an animated timeline reflecting on historic accomplishments and moments since Hal Foster, MD, founded the organization in 1896.
Engaged with national, regional, and local insurers seeking positive coverage changes to policies relating to:

- Tonsillectomy for adults with or without adenoidectomy
- Obstructive sleep apnea, including hypoglossal nerve stimulation (HGN)
- Absorbable nasal implant (Latera)
- SPECT/CT Fusion Imaging
- Steroid-eluting implant (Sinuva)
- Balloon sinus ostial dilation
- Functional endoscopic sinus surgery
- Cochlear implants
- Cryosurgical ablation for chronic rhinitis

Executed successful “First 50” campaign via ENT PAC, garnering an annual contribution of $1,000 or greater by 50 AAO-HNS members, in the midst of a challenging political climate following the November 2020 elections.

Continued to grow the Academy’s political footprint on Capitol Hill, expanding support to new candidates and U.S. Representatives and Senators not previously supported by ENT PAC—attended several virtual events beginning in March 2021 and commenced in-person political participation via ENT PAC in late July.

Launched multiple impactful grassroots campaigns advocating for AAO-HNS federal legislative priorities on www.entadvocacy.org—the October 2021 campaign, urging Congress to stop scheduled cuts to the 2022 Medicare Physician Fee Schedule, contributed to a bipartisan letter sent to Congressional leadership generating 247 signatories.

Continued the fight in Congress to stop inappropriate federal scope-of-practice expansions for audiologists and other nonphysician providers, including actively opposing legislation (H.R. 1587/S. 1731, the “Medicare Audiologist Access and Services Act of 2021”), which would grant audiologists unlimited direct access to Medicare patients without a physician referral.

As part of this effort, the AAO-HNS led coalition letters to Congressional leadership strongly opposing these bills—both letters included 110 national, state, and local physician organizations that signed on in opposition to H.R. 1587/S. 1731.

Conducted targeted federal legislative and regulatory advocacy efforts, including through an AMA-led coalition, to oppose and revise the U.S. Department of Veterans Affairs’ (VA) project to develop National Standards of Practice for 48 healthcare occupations—the VA is invoking the Supremacy Clause of the Constitution to preempt state and local scope of practice laws, which has harmful implications on patient care.

Worked with CPT team, Academy leaders, and collaborating societies on the creation of a new CPT code, effective in January 2022, for:

- Nasal Valve Collapse
- Bone Anchored Hearing Aids (BAHA)

Worked with RUC team and other Academy leaders to achieve appropriate valuation for a new CPT code, effective in January 2022, for:

- Drug Induced Sleep Endoscopy (DISE)

Convened a joint workgroup with leadership of the American Rhinologic Society to create radiographic imaging criteria for endoscopic sinus surgery for distribution to commercial insurers

Collaborated with state advocates and state medical societies to successfully:

- Grow the State Trackers program to include 175 trackers who collectively worked on 2,484 state legislative and regulatory proposals.
- Add the AAO-HNS/AMA amendments to Audiology and Speech-Language Pathology Interstate Compact (ASLP-IC) legislation in eight out of fifteen states that have passed the compact.
- Following the introduction of ASLP-IC bills in 29 states, 11 bills were stopped and one was vetoed by a governor.
- Propose multiple amendments to North Carolina HB 72, the audiology practice act legislation.
- Submit letters of support/testimony on Massachusetts’s “Act to Increase Access to Hearing Aids.”
- Submit letters of opposition to West Virginia HB 3037, the “HEAR Act,” which would have allowed audiologists to determine medical hearing loss.
- Work with advocates in Ohio (HB 198), South Carolina (SB 193/HB 3234) and Florida (SB 1268) to amend bills omitting otolaryngologists for medical evaluation and insurance coverage of children for hearing aids.
- Alert, comment, and propose multiple amendments to Tennessee HB 920 and SB 665, regarding cerumen management for hearing aid specialists.
- Work with Arkansas advocates to amend SB 88, legislation to eliminate the physician position on the Hearing Instrument Dispensers Board.
Released the first eight sections of FLEX, AAO-HNSF’s new flagship education program, offering 10 different creative and contemporary modalities

Offered 1,672 activities in OTO Logic and welcomed 2,527 new learners

Developed 15 new online digital courses

Introduced the AAO-HNSF first ever serious game on Complex Airway Management Simulation to support surgical training and prepare for similar emergent scenarios

Released 400+ new case-based questions with rationales in OTO Quest – Knowledge Assessment Tool

Continued collaborative initiatives with the American Board of Otolaryngology – Head and Neck Surgery (ABOHNS) to support CERTLink™

Unveiled several new Otolaryngology Patient Scenarios (OPS) in OTO Logic, formerly the ABOHNS Self-Assessment Modules (SAMS)—there are now more than 35 OPS modules available

Provided clinical and practice management articles in each edition of the Bulletin (“From the Education Committees”) and added a new monthly column, “Pearls from Your Peers”

Achieved reaccreditation from the Accreditation Council for Continuing Medical Education (ACCME) demonstrating AAO-HNSF education meets the requirements for delivering independent CME that accelerates learning, change, and improvement in healthcare

AAO-HNSF 2021 ANNUAL MEETING & OTO EXPERIENCE

OPENING CEREMONY:
The AAO-HNSF welcomed Neha Sangwan, MD, as the keynote speaker at the AAO-HNSF 2021 Annual Meeting & OTO Experience Opening Ceremony. Dr. Sangwan provided a positive outlook on wellness for the medical community both as a whole and as individuals during her interactive keynote speech titled, “Self-Care in Healthcare.” Her focus on wellness directly supports the AAO-HNS/F Strategic Plan’s goal to cultivate member well-being and resiliency to enhance quality of care and sustainability of our community.

FEATURED VIDEOS:
→ Why OTO?
→ 125 History Video

EDUCATION AND SCIENCE:
→ Offered 300+ hours of CME credit
→ Added new programming options including the Great Debates, Simulation Activities, and ENTrepreneur Faceoff
→ Showcased 500+ Scientific Posters
→ Included 220 Scientific Orals

TOP 10 REPRESENTED COUNTRIES/REGIONS:

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<tr>
<th>Country</th>
<th>Count</th>
</tr>
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<tbody>
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<td>Philippines</td>
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<td>Mexico</td>
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<td>Dominican Republic</td>
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<td>Egypt</td>
<td>40</td>
</tr>
<tr>
<td>Ecuador</td>
<td>28</td>
</tr>
</tbody>
</table>

WHO ATTENDED?

4,100+ Total registered for online and in-person

59% ...... Physician
22% ...... Resident
4%........ Administrator/Advanced Practice
8%........ Medical Student
2%........ Nonphysician
5%........ Speaker/OTO Experience Only

MEETING DAILY:
The Meeting Daily went digital only for 2021 and included the debut of Meeting News Central, the website that housed the Meeting Daily covered content.

CORPORATE PARTNERSHIPS

→ Sold $694,000 in conference-related sponsorships (92% to budget,) which included mostly facilities-based sponsorships, online advertising, ad retargeting, and virtual advertising

→ Sold $1,001,000 (61% to budget) in exhibit space at the Annual Meeting and on the Annual Meeting virtual platform—which included 136 exhibiting companies of which 35 were first-time exhibitors

→ Welcomed our first Podcast Sponsor: Aerin Medical

→ On-boarded three major 125th Anniversary sponsors: Stryker, GSK, and Medtronic

→ Created sponsorship prospectus and additional partnership opportunities for the XXXVII Pan American Congress of Otolaryngology—Head and Neck Surgery
REG-ENT®

- Transitioned structured data from FIGmd to OM1 for data validation and curation allowing for the development of a Reg-ent research platform
- Launched the 2021 performance year dashboard and MIPS reporting module
- Submitted the Qualified Clinical Data Registry (QCDR) self-nomination to the Centers for Medicare & Medicaid Services (CMS) for the 2022 Merit-based Incentive Payment System (MIPS) program to continue supporting our members’ participation and data reporting, and to help foster improvement in the quality of patient care
- Achieved QCDR designation with CMS for performance year (PY) 2021, the sixth year Reg-ent earned this designation
- Completed integration for several academic medical centers (AMCs) and continued with onboarding and technical support to eight AMCs
- Developed, distributed, and evaluated face validity surveys for priority QCDR measures, collaborating with volunteer Reg-ent practices
- Initial practices have shared the first patient reported outcome (PRO) tool on Age-Related Hearing Loss with patients—refinement is taking place based on practice feedback
- Reg-ent contains 7 million individual patients and 27 million patient visits
- Identified a solution for integrating Greenway cloud-hosted practice data to Reg-ent
- Successfully completed 2020 MIPS reporting for 1,075 clinicians—communicated CMS updates on COVID-19-related MIPS exceptions with practices
- Co-hosted, with Reg-ent technical partner FIGmd, a MIPS Submission and Data Validation Audit webinar in January attended by practices reporting 2020 MIPS through Reg-ent
- Redesigned the Reg-ent webpage for improved usability

CORE GRANTS

- Held the virtual CORE Study Section in March with 63 reviewers and three chairs participating
- Reviewed 175 grant applications, with 24 meritorious CORE grants awarded
- Funded $549,885 in CORE grant awards, supported by AAO-HNSF and specialty societies

QUALITY MEASURES

- Contributed quality measures data to the CMS QCDR self-nomination process incorporating measure testing information and performance rate data
- Held discussions with CMS outlining a comprehensive otolaryngology MIPS Value Pathways (MVP) to help members satisfy MIPS reporting requirements—the proposed otolaryngology MVP candidate includes measures and activities related to:
  - chronic rhinosinusitis
  - hearing loss
  - early oral cavity cancer
- Received approval by CMS for 22 specialty-specific AAO-HNSF developed measures for reporting in MIPS
- Made available in the Reg-ent registry 35 reportable measures in MIPS

CLINICAL PRACTICE GUIDELINES (CPG) & EXPERT CONSENSUS STATEMENTS (ECS)

- Published the following CPG and ECS in Otolaryngology–Head and Neck Surgery:
  - ECS: Pediatric Drug-Induced Sleep Endoscopy (DISE)
    - Published January 2021
  - CPG: Opioid Prescribing for Analgesia After Common Otolaryngology Operations
    - Published April 2021
- Continued work on the following CPGs and ECSs in progress:
  - CPG: Tympanostomy Tubes in Children (Update)
    - Anticipated publication date February 2022
  - CPG: Manual Update
  - ECS: Prevention and Management of Dysphagia in Head and Neck Cancer Patients
  - ECS: Persistent OSA After Adenotonsillectomy
- Held a virtual meeting of the Guideline Task Force in July
Launched mENTor, a new AAO-HNS program, connecting medical student members to otolaryngologists who are eager to share their guidance, advice, and personal experiences. To date (10/19/2021), there are 190 medical students participating and 163 physician members signed up to mentor between 1 and 3 students.

Engaged more than 1,800 medical students in a series of five webinars, the largest of which was “Is OTO in Your Future?” that had an audience of over 1,000. Additionally, the Academy participated in the Association of American Medical Colleges (AAMC) Virtual Specialty Forum — 2,650 medical students participated, Academy panelists included SRF members and retired/lifetime members who answered questions and provided information to 700 students.

Grew committee applications for the third year with 331 in 2019, 339 in 2020, and 344 in 2021 and the Committee Handbook was updated and streamlined.

Netted more than 2,000 new and returning members from successful international Facebook campaigns (100 new members and generated over 1,000 leads). In addition, more than 600 previously lapsed members rejoined the organization and a new program messaging physicians abandoning the online join process had a 30% success rate (250 new members).

Began preparations and planning for the XXXVII Pan American Congress of Otolaryngology—Head and Neck Surgery (June 2022) with a Call for Science launched and 300 invited speakers to date.

$78,000 in grant money received
10 VIDEO scripts written and filming completed
EDUCATED physicians and the healthcare team on how to avoid implicit bias when treating:
- Black and Indigenous Patients
- Hispanic Patients
- LGBTQ Patients
- Older Patients
- Patients from Rural Areas
- Patients with Cultural Dress
- Patients with Obesity
- Spanish-Speaking Patients
- Transgender Patients
- Women

Driven again by international physicians and medical students

Grew PAID MEMBERSHIP for the Fifth Year in a Row!

<table>
<thead>
<tr>
<th>Year</th>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>9,949</td>
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<tr>
<td>2018</td>
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<td>2019</td>
<td>10,373</td>
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<td>2020</td>
<td>10,447</td>
</tr>
<tr>
<td>2021</td>
<td>10,597</td>
</tr>
</tbody>
</table>

Launched the GLOBAL GRAND ROUNDS PROGRAM
Combined Participants → 3,020
Countries Represented → 95

TOpic one “Avoiding and Managing Complications in Endoscopic Sinus Surgery”

TOpic two “From UPPP to Neurostimulation”

BREAKDOWN OF GLOBAL PARTICIPATION:
- Asia - 28.5%
- Africa - 6.9%
- Australia/Oceania - 1.4%
- Europe - 18.3%
- Middle East - 17.2%
- North America - 10.3%
- South America - 17.4%

Launch Video Education Series
HOW TO AVOID IMPLICIT BIAS

AMERICAN ACADEMY OF OTOLARYNGOLOGY-HEAD AND NECK SURGERY
ANNUAL REPORT 2021
COMMUNICATIONS

OTOLARYNGOLOGY-HEAD AND NECK SURGERY
Achieved the Highest Impact Factor in Its History: 3.497

DIGITAL AND PRINT COMMUNICATIONS

OTOLARYNGOLOGY-HEAD AND NECK SURGERY:
→ 947,714 full-text downloads in 2021 YTD (as of September 30, 2021) — 3.18% + from same time last year
→ 20,159 podcast downloads from January 1, 2021 to September 30, 2021

OTO OPEN:
→ 94,421 full-text downloads in 2021 YTD (as of September 30, 2021) — 57.24% + from same time last year

PUBLIC OUTREACH AND PATIENT INFORMATION

WORLD SINUS HEALTH AWARENESS DAY:
The Academy sponsored the inaugural World Sinus Health Awareness Day on September 21, 2021, with our partner, Intersect ENT. It was created to give the millions of sinus sufferers around the world access to patient-focused trusted information about their symptoms and conditions, as well as how they can improve these and when they should seek specialized care. A tool kit of resources was disseminated to the otolaryngology community around the world and is available to members and the public throughout the year at www.entnet.org/WSHAD.

ENTHEALTH:
Developed new content for ENThealth.org to promote World Sinus Health Awareness Day and keep current on COVID-19-related information from the World Health Organization and the Centers for Disease Control and Prevention.

MULTIMEDIA

2021 APEX AWARDS FOR PUBLICATION EXCELLENCE:
→ The Academy received two 2021 APEX Awards
★ The Grand Award for Electronic Media for the AAO-HNS COVID-19 Podcast Series
★ Award of Excellence for the AAO-HNS International Recruitment Campaign

VIDEOS:
→ LA OTO Leaders Welcome You to #OTOMTG21: 1,132 Views
→ #OTOMTG21 Call for Science Tips and Guidance Webinar: 784 Views
→ #OTOTMG21 Warm-Up with Daniel C. Chelius, Jr., MD, and Anne Marie Visosky, MD: 659 Views
→ Los Angeles Awaits #OTOMTG21: 210 Views
→ 125 Strong Member Challenge with Sujana S. Chandrasekhar, MD, and Albert L. Merati, MD: 150 views

PODCASTS:
→ Released 12 podcasts in 2021
★ Most downloaded podcast title: “AAO-HNS Trauma Committee Podcast: Acute Head and Neck Injuries” 956 downloads
→ OTO Journal podcasts were made available on Spotify in 2021 https://open.spotify.com/show/5SLTa96JGQT9yvt0mjpKiH

RESIDENT REVIEWER DEVELOPMENT PROGRAM

In its fifth year, the program focused on international outreach by developing a four-course curriculum:
→ Introduction and Approach to Peer Review for Clinicians
→ International Perspective on Publishing and Avoiding Predatory Journals
→ Key Concepts in Statistics
→ Interactive Peer Review Workshop

www.entnet.org/rrdp-international
Expanded the Academy’s cybersecurity defenses by implementing the staff cybersecurity awareness program and included HIPAA training for the Reg-ent℠ staff.

Implemented multifactor authentication for virtual private network access for login projection when staff works remotely.

Worked with Membership to design and implement the Medical Student Mentorship program, mENTor.

Supported various membership recruitment and winback campaigns throughout the year.

Led the successful launch for the redesigned website.

Created a sleek, intuitive, and relevant design.

Conducted extensive content and image review, refresh, and migration.

UPGRADED SEARCH FEATURE
Includes the ability to search across other AAO-HNS/F online properties like the Bulletin, Otolaryngology–Head and Neck Surgery, and OTO Logic.

The main menu highlights the following content areas:

→ About Us
→ Education
→ Quality in Practice
→ Business of Medicine
→ Advocacy
→ Resources Search Page
→ Events
→ Get Involved

Many PDF forms and applications were converted to electronic web form versions, saving time and expediting the application processes.

As the Academy and the specialty move forward together, we are dedicated to continuing to support you in 2022.
The financial results for the fiscal year July 1, 2020 – June 30, 2021 (FY21), were significantly impacted by the cancellation of the 2020 Annual Meeting. A successful virtual meeting replaced the planned in-person meeting but did not generate the same net revenue budgeted to be received from the Annual Meeting in Boston, Massachusetts. Fortunately, the Foundation had meeting cancellation insurance that includes communicable disease coverage. An insurance claim was filed, and a recovery of the lost net revenue is expected to be received and recorded in FY22. No cancellation insurance proceeds are included in the FY21 actual results.

Travel restrictions and other COVID-19-related circumstances led to cost savings across all expense categories. While all 69 staff positions were retained as budgeted, savings were realized in salaries and benefits because of vacancies and lower than budgeted benefit renewals.

The Foundation applied for Paycheck Protection Program loans to retain staff and received two. The first loan of $886,000 was forgiven and recorded as Other Revenue in FY21. The second loan is expected to be forgiven later in 2021 and, if forgiven, will be recorded as revenue in FY22.

Investments had a positive return for the fiscal year and account for the positive contribution to net asset reserves. In total, $4,960,000 will be added to Net Assets without Donor Restrictions, of which $5,183,000 is from investments, offset by a negative $223,000 operating deficit.

Membership dues were within 1% of the fiscal year budget and accounted for 55% of FY21 revenue. The first-year FLEX product was well received, leading to sales at double the amount budgeted. Other income came from publication contracts, Academy Advantage partner royalties, individual donations, and Reg-ent℠ application fees.

As of June 30, 2021, Net Assets without Donor Restrictions were $34,500,000. In addition, Net Assets with Donor Restrictions totaled $8,600,000 of which $4,900,000 are Hal Foster, MD Endowment funds restricted into perpetuity and not to be spent. The Foundation’s Finance and Investment Subcommittee (FISC) monitors investment performance and adherence to the Foundation’s Investment Policy Statement (IPS).

For a copy of the independent audit of AAO-HNS/F’s FY21 financial statements, contact CHanlon@entnet.org.

In May 2021, the Boards of Directors approved a balanced fiscal year 2022 (FY22) budget with revenue and expenses both equal to $19,630,000. The budget includes positive net revenue from an in-person Annual Meeting in Los Angeles, California, although at a reduced net revenue compared to meetings held pre-COVID-19. No member dues increase is budgeted, leaving budgeted dues revenue at the same level as the prior year. Use of Board Designated Net Assets allows for a balanced FY22 budget. The budgeting process is integrated with the AAO-HNS/F Strategic Plan and involves the efforts of elected leadership, the Boards of Directors, Executive Committee, and the FISC.

“Your gift will help us drive transformation and innovation, expand and magnify our programs, and collectively partner for the health and well-being of our members and those that we serve.”

- Carol R. Bradford, MD, MS AAO-HNS/F 2020/2021 President
### Revenue and Support

<table>
<thead>
<tr>
<th>Description</th>
<th>Budget FY21</th>
<th>%</th>
<th>Actual FY21</th>
<th>%</th>
<th>Budget FY22</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership Dues</td>
<td>$6,950,000</td>
<td>37%</td>
<td>$6,877,000</td>
<td>55%</td>
<td>$6,950,000</td>
<td>35%</td>
</tr>
<tr>
<td>Annual Meeting Revenues</td>
<td>6,438,000</td>
<td>34%</td>
<td>1,048,000</td>
<td>8%</td>
<td>5,357,000</td>
<td>27%</td>
</tr>
<tr>
<td>Education and Other Product Sales</td>
<td>1,349,000</td>
<td>7%</td>
<td>1,713,000</td>
<td>14%</td>
<td>1,484,000</td>
<td>8%</td>
</tr>
<tr>
<td>Publication Revenues and Other Royalties</td>
<td>1,704,000</td>
<td>9%</td>
<td>1,610,000</td>
<td>13%</td>
<td>1,587,000</td>
<td>8%</td>
</tr>
<tr>
<td>Annual Fund</td>
<td>150,000</td>
<td>1%</td>
<td>18,000</td>
<td>0%</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td>Corporate Support</td>
<td>300,000</td>
<td>2%</td>
<td>-</td>
<td>0%</td>
<td>250,000</td>
<td>1%</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>65,000</td>
<td>&gt; 1%</td>
<td>-</td>
<td>0%</td>
<td>727,000</td>
<td>4%</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>16,956,000</td>
<td>91%</td>
<td>12,281,000</td>
<td>98%</td>
<td>16,355,000</td>
<td>82%</td>
</tr>
<tr>
<td>Use of Donor Restricted Net Assets</td>
<td>262,000</td>
<td>1%</td>
<td>194,000</td>
<td>2%</td>
<td>238,000</td>
<td>1%</td>
</tr>
<tr>
<td>Use of Board Designated Net Assets</td>
<td>1,565,000</td>
<td>8%</td>
<td>-</td>
<td>0%</td>
<td>3,037,000</td>
<td>15%</td>
</tr>
<tr>
<td><strong>Total Revenue and Support</strong></td>
<td>$18,783,000</td>
<td>100%</td>
<td>$12,475,000</td>
<td>100%</td>
<td>$19,630,000</td>
<td>99%</td>
</tr>
</tbody>
</table>

### Operating Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Budget FY21</th>
<th>%</th>
<th>Actual FY21</th>
<th>%</th>
<th>Budget FY22</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and Benefits</td>
<td>$9,180,000</td>
<td>49%</td>
<td>$8,183,000</td>
<td>64%</td>
<td>$9,329,000</td>
<td>48%</td>
</tr>
<tr>
<td>Occupancy</td>
<td>985,000</td>
<td>5%</td>
<td>909,000</td>
<td>7%</td>
<td>951,000</td>
<td>5%</td>
</tr>
<tr>
<td>Other Operating Expenses</td>
<td>2,175,000</td>
<td>12%</td>
<td>1,206,000</td>
<td>9%</td>
<td>2,715,000</td>
<td>14%</td>
</tr>
<tr>
<td>Annual Meeting Costs</td>
<td>3,564,000</td>
<td>19%</td>
<td>519,000</td>
<td>4%</td>
<td>3,628,000</td>
<td>18%</td>
</tr>
<tr>
<td>Consultants &amp; Professional Fees</td>
<td>1,984,000</td>
<td>11%</td>
<td>1,667,000</td>
<td>13%</td>
<td>2,083,000</td>
<td>11%</td>
</tr>
<tr>
<td>Grants</td>
<td>445,000</td>
<td>2%</td>
<td>214,000</td>
<td>2%</td>
<td>474,000</td>
<td>2%</td>
</tr>
<tr>
<td>Contingency Expense</td>
<td>450,000</td>
<td>2%</td>
<td>-</td>
<td>0%</td>
<td>450,000</td>
<td>2%</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$18,783,000</td>
<td>100%</td>
<td>$12,698,000</td>
<td>100%</td>
<td>$19,630,000</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Net Investment Activity

<table>
<thead>
<tr>
<th>Description</th>
<th>Budget FY21</th>
<th>%</th>
<th>Actual FY21</th>
<th>%</th>
<th>Budget FY22</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue and Support in Excess of (Below) Expenses</td>
<td>-</td>
<td></td>
<td>$(223,000)</td>
<td></td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Net Investment Activity</td>
<td>-</td>
<td></td>
<td>$5,183,000</td>
<td></td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Increase in Net Assets without Donor Restriction</td>
<td>-</td>
<td></td>
<td>$4,960,000</td>
<td></td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>