Board of Trustees Mid-Year Retreat Meeting
General Session

Wednesday, March 1, 2017
Call to Order and Welcome

Boyd R. Buser, DO
President
Invocation

William Mayo, DO
Roll Call / Introduction of Guests

Adrienne White-Faines
CEO
Adoption of Agenda

Boyd R. Buser, DO
President

FY17 Mid-Year Meeting
Osteopathic Pledge of Commitment

I pledge to:

Provide compassionate, quality care to my patients; Partner with them to promote health;

Display integrity and professionalism throughout my career; Advance the philosophy, practice and science of osteopathic medicine;

Continue life-long learning;
Support my profession with loyalty in action, word and deed; and

Live each day as an example of what an osteopathic physician should be.
Mission and Vision Statement

Mission
To advance the distinctive philosophy and practice of osteopathic medicine.

Vision
To be the professional home for all osteopathic physicians
AOA Leadership Reports

Boyd R. Buser, DO
President

FY17 Mid-Year Meeting
AOA Leadership Report

Mark Baker, DO
President-Elect

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AOA Leadership Report

Adrienne White-Faines
CEO

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American Osteopathic Foundation (AOF)

Steve Downey
Executive Director

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Association of Osteopathic State Executive Directors (AOSED)

Angela Westhoff
President

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Lee Vander Lugt, DO
President
National Board of Osteopathic Medical Examiners (NBOME)

John Gimpel, DO
President and CEO

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Student Osteopathic Medical Association (SOMA)

Jordan Hitchens, OMS IV
Member

FY17 Mid-Year Meeting
Health Care Reform – AOA Action

• Letter to Congress, President-elect
  ◦ Letters to Governors with 42 state osteopathic affiliates

• Coalition activities

• CMS proposed rule to stabilize market

• Provide input to Congressional offices
Health Care Reform – Priorities

- Foundation based on prevention and care coordination
- Preservation of patient-physician relationship
- Development of a strong physician workforce
- Ensured coverage and access to care
Health Care Reform – Next Steps

• House meetings with primary care groups
• Evaluate legislation
  ○ ~March 1-7
• CMS proposed market stabilization rule
• Action plan and response
• DO Day (April 5)
Executive Action

Immigration Order
• AOA statement
  o Concern, offers support and resources
  o Training and workforce impact
  o Stifling exchange of talent, knowledge, research

Vaccines
• Pres. Trump forming commission
• AOA statement emphasizing importance and safety
Scope of Practice

DOs

MDs

VA APRN

Assistant Physicians

Physician Assistants

LMU DMS program

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Key Opportunities Ahead

- THCGME Renewal
- DO Nominations
- Hill Briefings
- Reduced Regulatory Burdens

Enhanced Advocacy

DATA
COCA Update

Alissa Craft, DO
VP of Accreditation

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Standards 2017

1: Mission & Governance
2: Leadership & Administration
3: Finances
4: Facilities
5: Learning Environment
6: Curriculum

7: Faculty
8: Scholarly Activity
9: Students
10: GME
11: Assessment & Outcomes
12: Institutional Accreditation

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The American Osteopathic Association’s Commission on Osteopathic College Accreditation (COCA) currently accredits 33 colleges of osteopathic medicine offering instruction at 48 locations in 31 states.
COM Growth

First Year Enrollment

Graduates


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New & Developing COM Standards

Applicant Status → Candidacy Status → Preliminary Accreditation → Full Accreditation
Policies and Procedures

- COCA
- Accreditation Visits
  - Site Visit Agendas
  - Evaluators
  - Visit Frequency
- Accreditation Reports
- Substantive Change
E-Accreditation

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Opportunities: 2018

- CHEA Recognition
- WFME International Recognition
Physician Wellness Taskforce Report

Robert Piccinini, DO
Chair

John Becher, DO
Member

FY17 Mid-Year Meeting
54 Percentage of physicians burned out

29 Percentage of resident physicians suffering from depression

400 Estimated number of physicians committing suicide every year

Sources: Shanafelt et. al., 2012 & 2015; Mata et al., 2015; American Foundation of Suicide Prevention, ND; Andrew, 2015
Mental Well-Being & Osteopathic Medical Students (n=10,187)

- 46% of Students screened for depression fell into the Clinical Concern range*
- 10% of Students indicated they had suicidal ideations within 30 days prior to being surveyed*
  - 147 were classified as high risk for suicide.

Sources: AACOM Mental Health Awareness Taskforce (2015)

Burnout study in osteopathic residents (otolaryngology) (n=684)

- 10% experienced high burnout
- 76% moderate burnout
- 14% low burnout

Sources: Yost et al. (2014)
Causes of Burnout

<table>
<thead>
<tr>
<th>Cause</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Too many bureaucratic tasks</td>
<td>5.3</td>
</tr>
<tr>
<td>Spending too many hours at work</td>
<td>4.7</td>
</tr>
<tr>
<td>Feeling like just a cog in a wheel</td>
<td>4.6</td>
</tr>
<tr>
<td>Increasing computerization of practice (EHRs)</td>
<td>4.5</td>
</tr>
<tr>
<td>Income not high enough</td>
<td>4.1</td>
</tr>
<tr>
<td>Too many difficult patients</td>
<td>4.0</td>
</tr>
<tr>
<td>Insurance issues</td>
<td>4.0</td>
</tr>
<tr>
<td>Maintenance of certification requirements</td>
<td>4.0</td>
</tr>
<tr>
<td>Lack of professional fulfillment</td>
<td>3.9</td>
</tr>
<tr>
<td>Threat of malpractice</td>
<td>3.9</td>
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<tr>
<td>Too many patient appointments in a day</td>
<td>3.9</td>
</tr>
<tr>
<td>Difficult employer, colleagues, or staff</td>
<td>3.7</td>
</tr>
<tr>
<td>The impact of the Affordable Care Act</td>
<td>3.7</td>
</tr>
<tr>
<td>Inability to provide patients with the quality care that they need</td>
<td>3.7</td>
</tr>
<tr>
<td>Compassion fatigue (overexposure to death, violence, and/or other loss in patients)</td>
<td>3.5</td>
</tr>
<tr>
<td>Family stress</td>
<td>3.1</td>
</tr>
<tr>
<td>Inability to keep up with current research and recommendations</td>
<td>3.1</td>
</tr>
</tbody>
</table>

Burnout by Region

Which Physicians are Most Burned Out

- Emergency Medicine: 59%
- Ob/Gyn: 56%
- Family Medicine: 55%
- Internal Medicine: 55%
- Infectious Disease: 55%
- Rheumatology: 55%
- Plastic Surgery: 53%
- Otolaryngology: 53%
- Critical Care: 53%
- Cardiology: 52%
- Urology: 52%
- Neurology: 52%
- Pediatrics: 51%
- Anesthesiology: 51%
- Gastroenterology: 51%
- Nephrology: 50%
- Orthopedics: 50%
- Surgery: 49%
- Pulmonary Medicine: 49%
- Radiology: 49%
- Oncology: 47%
- Dermatology: 46%
- Diabetes & Endocrinology: 46%
- Pathology: 43%
- Ophthalmology: 43%
- Allergy & Immunology: 43%
- Psychiatry & Mental Health: 42%

Consequences of Burnout
(Source: Shanafelt & Noseworthy, 2016)

- Broken Relationships
- Alcohol & Substance Abuse
- Depression
- Suicide
- Decreased quality of care & increased medical errors
- Decreased Patient Satisfaction
- Decreased productivity & professional effort
- Physician Turnover

Decreased productivity & professional effort
- Decreased quality of care & increased medical errors
- Decreased Patient Satisfaction
- Physician Turnover
Suicide rates by age category
Physicians vs General Public
White Males, 26 US states, 1984–92

Completed Suicides per 100,000 person years

Age Range

Physicians | General Public

Peterson & Burnett, 2007
Task Force Members

- Robert G.G. Piccinini, DO (Chair)
- John Becher, DO
- David Escobar, DO
- Vanessa Halvorsen, OMS III
- Anna Hayden, DO
- Caleb Hentges, OMS III
- Angela Kalcecf, M.Ed.
- Pooja Kinkhabwala, DO

Staff Lead: Kenya McRae
Physician Bias


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Activities of Others

- **ACGME** - Well-being of physicians in training and healthy learning environments
- **FSMB** - Workgroup to identify resources and strategies to address physician burnout
- **AMA** - Online CME modules regarding well-being, burnout and resilience (Steps Forward) for physicians
- **NAM** - Action Collaborative on Clinical Well-Being and Resilience
- **AACOM** - Mental Health Awareness Taskforce and focus on well-being of Medical Students
- **Other Organizations** – Mayo Clinic, American Hospital Association, state medical associations, physician health programs, etc.
Members Now
- Issues facing physicians who have graduated and are full members
- Provide services now

Members in the Future
(students, interns & residents)
- Concerted effort to assist
- Cannot abdicate our responsibility (i.e., wait for others to act, or just not participate)
- Be present at these crucial times
## Wellness Grid

### AOA

### Families / Significant Others

### Specialty Societies / Licensing Boards

### COMs

### Training Programs

### State Affiliates & Employers

<table>
<thead>
<tr>
<th>Pre-Student</th>
<th>Student</th>
<th>Intern</th>
<th>Resident</th>
<th>New-Career</th>
<th>Mid-Career</th>
<th>Late-Career</th>
<th>Retired</th>
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<tbody>
<tr>
<td><strong>Wellness</strong></td>
<td>• Education</td>
<td>• Mentorship</td>
<td>• Toolkit</td>
<td>• Train the Trainer</td>
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</table>
- **Website**
  - What to expect and how to stay healthy
  - **Articles** on preparing to be a med student and resilience

- **Cooperating** with AACOM, COMs and other national education groups
  - Links to the schools

- **Marketing /Outreach**
  - Undergrad career centers
  - Include SOMA in efforts
  - Promote AACOM and COMs’ activities

FY17 Mid-Year Meeting
Website (Articles)

Promote activities of AACOM and COMs

Provide national provider information & Crisis hotlines for all states

Work with AACOM/COMs to help students traveling connect with a nearby COM and resources

Education about effective mentorship (work with COMs)

Provide other support as necessary

Marketing/Outreach
  - Promote AACOM and COMs’ activities
  - SOMA

Activities will require continuous updating to remain current
Website

Develop a national dialog of culture change (collaboration)
  - State Affiliates
  - Specialty Colleges
  - American Hospital Association

Train-the-Trainer Program (collaboration)

Marketing/Outreach
  - Training Programs
  - Bureau of Emerging Leaders
Website

Trainer-the-Trainer Program

Lecture Series (Various meetings live and online)
  - Collaborations with Affiliates and Specialty Societies

Partner with Federation of State Medical Boards
  - Encourage physicians to seek help and eliminate fear of retribution or suspension
  - Advocate for changes in licensing guidelines to facilitate in destigmatizing mental health issues

Marketing
  - AOA & Affiliates
Website

Collaborate with the Advocates

- Provide education on recognizing signs and symptoms of burnout, depression, risk of suicide and resilience
- Create media presence
Programs across the life-cycle of physicians

- Collaborating with other key stakeholders (e.g., AACOM, State Affiliates, Specialty Colleges, COMs, FSMB, AHA)
- Website (Toolkit)
- Education (live and online)
  - Effective Mentorship/Modeling
  - Train-the-Trainer Program
  - Lecture Series
- Access to Resources
- Activities / Exercises (included in toolkit and live programs)
- Advocacy

*It would be detrimental for AOA to abdicate its responsibility to other organizations – We must be active!*
How Practicing Physicians & Students Can Avoid Burnout

https://youtu.be/SbTcdzb1HR0
Board Certification Update

Cathy Galligan
COO

FY17 Mid-Year Meeting
First Priority: Osteopathic Continuous Certification
Board Certification Updates

Timeline

June 2016: Task Force I Starts Meeting
October: Recommendations to BOS
November: BOS Face-to-Face
December: Public Comments
02/09/17: Final Rec from BOS Exec Committee

FY17 Mid-Year Meeting
Board Certification Updates
Task Force II Meeting

- Dr. Williams to serve as Chair
- All 7 representatives are members of BOS
- Each represents a different board

Topics for discussion and to reach consensus:
Current State

- Contracts included registration and other ancillary services no longer necessary
- $1M annual expenses for psychometric services
- Testing requires physicians to travel and pen and paper method used frequently to test/score
- Four different platforms with their own item banks for questions

Future State

- New contracts being signed with exam preparation vendors/partners
- AOA hiring Psychometrician to manage
- Contracts with PearsonVUE and Prometric to automate and increase testing sites closer to physician’s home
- Item bank to be centralized with PearsonVUE ExamDeveloper

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Board Certification Service Updates

Other

Current State

- DOs with time-limited ABAM certificates losing Addiction Medicine certification
- Certificates take an inordinate amount of time to process
- Minimal non-dues revenue

Future State

- AOA Addiction Medicine OCC available as of Feb 21. Possible short term re-opening of clinical pathway
- New certificate vendor promising faster turnaround time at a lower cost
- Estimate non-dues revenue of $50K from duplicate certificates and framing royalties
Challenge: Inconsistent communications across 18 certifying boards

Solution: Standardize the notification and reminder process
- Created standard notifications for Expiration, Application, Exam and Results
- Created digital communication templates for each board
- Implemented in January 2017 (manual process); Targeting automated process in March 2017

Solution: Establish process for maintaining contact information

Solution: Recommendation for streamlining other communications
Q1/Q2 marketing efforts will focus on raising awareness with graduating residents and program directors

- Content
  - Editorial in The DO and JAOA
  - Influencer testimonials
  - Peer endorsements (recently certified DOs)
- Digital
  - Banner ads on Osteo.org and The DO
- Direct Mail
- E-Alerts
- Social
  - Facebook, Twitter, LinkedIn (organic and paid)
  - Testimonial videos on YouTube
Bureau of Osteopathic Specialists

- Dedicated to establishing and maintaining high standards for certification
- Seeks to ensure that the DOs it certifies demonstrate expertise and competence
- Deeply committed to delivery of quality healthcare to all patients through continuous improvement of its certification process.
Single Accreditation System Update

Boyd R. Buser, DO
President

Less than two years into the transition!

FY17 Mid-Year Meeting
49% of 1,244 programs
ACGME accredited or pre-accredited

- 65% of 862 residencies
- 13% of 261 fellowships
- 14% of 121 internships
<table>
<thead>
<tr>
<th>Accredited/Submitted Status</th>
<th>Feb 2016</th>
<th>Feb 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Accreditation</td>
<td>14</td>
<td>123</td>
</tr>
<tr>
<td>Initial Accreditation Contingent</td>
<td>1</td>
<td>13</td>
</tr>
<tr>
<td>Continued Pre-Accreditation</td>
<td>25</td>
<td>118</td>
</tr>
<tr>
<td>Pre-Accreditation</td>
<td>88</td>
<td>160</td>
</tr>
</tbody>
</table>
AOA Programs, N=1,244

Accredited (309) / Submitted (304)

Applying (412)

Closed/ Closing (137)

Unsure (82)
Osteopathic Recognition

<table>
<thead>
<tr>
<th></th>
<th>Feb 2016</th>
<th>Feb 2017</th>
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</thead>
<tbody>
<tr>
<td>Initial Recognition</td>
<td>18</td>
<td>69</td>
</tr>
<tr>
<td>Application</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>Total</td>
<td>27</td>
<td>85</td>
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</table>

- Dual: 59%
- AOA: 24%
- ACGME: 17%

FY17 Mid-Year Meeting
AACOM Survey

- 68% of osteopathic “students continue to convey overwhelming interest in ACGME-accredited programs with osteopathic recognition”

- 2017 AACOM survey
Progress

- Four osteopathic physicians to the ACGME Board of Directors
- 50 DOs to 22 Review Committees and the Osteopathic Principles Committee
- Codified osteopathic medicine in GME
- Opportunities for DOs seeking advanced training
- Two new osteopathic committees in ACGME established
- Lorenzo Pence, DO, hired as new SVP of Osteopathic Accreditation at the ACGME
- AOA Certification for program directors and faculty
Progress

- Preliminary year requirements during transition modified
- RCs allow transfers from AOA programs without penalty
- Transitional Year program requirements modified
- AOA specialty board certification pass rates
- Scholarly requirements are being reviewed
- COMLEX acceptable for residents in pre-accreditation seeking fellowships
- 80% of 4+ programs have applied by Dec 31 deadline
Progress

- Participating in *Sponsoring Institution 2025 Task Force*
- Participating in ACGME wellness activities
- DOs on Common Program Requirement Task Force
- Seeking DO site reviewers
- Osteopathic organizations comment on proposed changes to the requirements
- Joint AODME/ACGME education program
- Osteopathic speakers at the ACGME annual education conference

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Close to agreement on training beyond 2020
Application Assistance

- Responding to hundreds of phone calls
- Provided consultants to 39 programs/institutions
- Reaching out to programs:
  - 3 years in length
  - Undecided and closing
  - Initial accreditation to encourage osteopathic recognition
  - Continued pre-accreditation

FY17 Mid-Year Meeting
Key Questions/Opportunities Going Forward

- ABIM announcement
- Proactively closing programs not likely to transition
- FM pass rate standards
- International promotion of osteopathic medicine through Single GME
Research Update

Kenya D. McRae
VP of Research

FY17 Mid-Year Meeting
**Focus on 5 Research Areas:**

1. Chronic Disease and Conditions
2. Pain Management
3. OMM/OMT
4. Osteopathic Philosophy
5. Musculoskeletal Injuries & Prevention

**# of Applications**
- Prior to 2016 – 18 per yr.
- FY 2016: 29

**$ Supporting Research**
- Prior to 2016: $300,000
- FY 2016: $1,040,182
Research Grants & Awards (2016)

OMM/OMT
- Parkinson’s disease (2 projects)
- OMM/OMT in inflammatory bowel disease
- Low Back Pain (LBP)
- OMM/OMT and arthritis
- Obesity and women
- Changes in emotional quotient traits during training
- Value of osteopathic care (Cost-effectiveness study)
- Patient experience/satisfaction

Chronic Disease

OP

MSK

Pain Mgmt.

$1,040,182.22 in awards

FY17 Mid-Year Meeting
<table>
<thead>
<tr>
<th>RFA</th>
<th>Number</th>
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<tbody>
<tr>
<td>Chronic Diseases and Conditions (Diabetes)</td>
<td>6</td>
</tr>
<tr>
<td>Chronic Pain Management</td>
<td>11</td>
</tr>
<tr>
<td>Musculoskeletal Injuries &amp; Prevention:</td>
<td>6</td>
</tr>
<tr>
<td>OMM/OMT (Parkinson’s Disease)</td>
<td>3</td>
</tr>
<tr>
<td>OMM/OMT (OMT Effect on Inflammation)</td>
<td>6</td>
</tr>
<tr>
<td>Osteopathic Philosophy (Cost Effectiveness &amp; Value-Based Care)</td>
<td>3</td>
</tr>
<tr>
<td>Osteopathic Philosophy (Communication, Compassion/Empathy, or Patient Satisfaction)</td>
<td>7</td>
</tr>
<tr>
<td>Osteopathic Medical Students Research Program (NEW)</td>
<td>1</td>
</tr>
<tr>
<td>Physician in Training Research Program (NEW)</td>
<td>0</td>
</tr>
<tr>
<td><strong>Grand Total:</strong></td>
<td><strong>43</strong></td>
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</tbody>
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## New for 2017 – Training Programs

<table>
<thead>
<tr>
<th><strong>Physician in Training</strong></th>
<th><strong>Osteopathic Medical Student</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>DO or MD</td>
<td>OMS at the time of the award</td>
</tr>
<tr>
<td>Resident, Intern, or Fellow</td>
<td>Mentor</td>
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<tr>
<td>Mentor</td>
<td>6 to 12-month grant period</td>
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<tr>
<td>18-month grant period</td>
<td>Grant amount: Up to $5,000</td>
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<tr>
<td>Grant amount: Up to $20,000</td>
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Application Deadlines Extended: May 31, 2017
Awards Announced: August 2017
Launched April 2016
All It Takes Is H.E.A.R.T.

An Early Childhood Development Initiative

- 3 CME modules, each worth 2 hours of 1-B credit
- Ideal for pediatricians, family physicians and obstetricians-gynecologists
- Available for colleges of osteopathic medicine and residency programs to use as part of education curriculum

Hug • Engage • Ask • Read • Talk

Learn more at osteopathic.org/HEART
ON THE FRONTLINES WITH ALZHEIMER’S DISEASE: DIAGNOSIS & MANAGEMENT

AN ONLINE TOOLKIT DEVELOPED BY DOs FOR DOs

- Diagnosis/Screening
- Practice Tools & Resources
- Community Resources

FOR MORE INFORMATION VISIT:

WWW.OSTEOPATHIC.ORG/RESEARCH/ALZ

1 in 9 Americans
6 Leading Cause of Death

Developed in collaboration with Eli Lilly and Company
ER/LA Opioid REMS (CO*RE REMS)

- 2,087 educated (~140% of initial goal)
- Received new grant for 2017-2019

Adolescent Substance Use

- 1,459 educated (208% of initial goal)
- Program successfully completed
Purpose: Developing a medical mobile application (app) on antibiotic stewardship and measuring its impact

- Provides clinical presentations of commonly overused treatments and procedures related to antibiotic use and misuse
- Generates scores based on investigation and management of patient care

Participants: Students, Residents & Physicians
Purpose of Project:
- Continuous collection of data through medical school
- Position the osteopathic profession as the lead for the House of Medicine

Stakeholders’ meeting in November, 2016

Phase 1: Cross-sectional study (2017-2018 academic year)
- Data de-identified
- Report on findings Dec. 2018

Phase 2: Longitudinal study (details forthcoming)

Estimated Costs: $435,000
**Ideas on the Empathy Horizon**

<table>
<thead>
<tr>
<th>Educational Component</th>
<th>Supporting JAOA</th>
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<tbody>
<tr>
<td>• “Empathy – A Touchpoint for Physicians”</td>
<td>• Featured column</td>
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<tr>
<td>• Clearinghouse of empathy articles</td>
<td>• Quarterly</td>
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<tr>
<td>• Blog on empathy</td>
<td>• Original research</td>
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<tr>
<td>• Posting of creative works on empathy</td>
<td>• Highlights of research published in other journals</td>
</tr>
<tr>
<td>• Modular curriculum</td>
<td>✓ Empathy</td>
</tr>
<tr>
<td>✓ Communication</td>
<td>✓ Compassion</td>
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<tr>
<td>✓ Healing</td>
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<tr>
<td>• Online, on demand</td>
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<tr>
<td>• Recommendations to COCA for inclusion in student curriculum</td>
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</tr>
</tbody>
</table>
Don’t Forget…

- **OMED Student Research Competition (Call for Abstracts)**
  - Releasing: March 15, 2017
  - **Deadline Date: July 15, 2017**

- **OMED Research Speaker Sponsorship Awards**
  - Who should apply: Osteopathic Specialty Colleges
  - Supports: OMED Speakers that meet eligibility criteria
  - **Extended Deadline: March 15, 2017**

- **Training Grants**
  - **Application Deadlines Extended: May 31, 2017**
  - Awards Announced: August 2017
Osteopathic Brand & Media Strategy

Charlie Simpson
CCO

FY17 Mid-Year Meeting
Campaign Objectives

• Increase awareness/familiarity of DOs among the target audience
• Increase engagement with the AOA and the “Doctors That Do” campaign through content

Year 2 Strategy:

• Focus our efforts when people are in a health mindset
• Drive consideration of DOs
• Encourage action
# FY17 Plan Snapshot

<table>
<thead>
<tr>
<th>Print Plan</th>
<th>Digital Plan</th>
<th>OOH</th>
<th>Paid Search</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Titles, 16 Insertions 2 Marathon Events</td>
<td>Optimized Plan Focuses on Health Sites, Native Content Distribution</td>
<td>3 Markets, 70%+ Market Reach</td>
<td>Full Year Support</td>
</tr>
<tr>
<td><strong>147.5MM Impressions</strong></td>
<td><strong>47.8MM Impressions</strong></td>
<td><strong>51.6MM A30-49 Impressions</strong></td>
<td><strong>19.5MM Impressions</strong></td>
</tr>
</tbody>
</table>

[Image showing various magazines and digital platforms]
YTD Progress

Goal 266 million impressions
YTD Progress

130 million impressions thru January
Print Media

- Print launched in November 2016 with the bulk of the insertions coming in Q1 2017

<table>
<thead>
<tr>
<th>FY17 Print Plan</th>
<th>2016</th>
<th>2017</th>
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<tbody>
<tr>
<td></td>
<td>November</td>
<td>December</td>
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<tr>
<td>Parents</td>
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<tr>
<td>Women's Health</td>
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<td>Men's Health</td>
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<td>Runner's World</td>
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<td>WebMD</td>
<td>Alice</td>
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<tr>
<td>Matters of Health</td>
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<td>Michael</td>
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</tbody>
</table>

FY17 Mid-Year Meeting
Event Activation

Through our media buy with Runner’s World, we had the opportunity to spread awareness of osteopathic medicine during the Health/Fitness Expos at the Chicago and New York City Marathons

- Associates handed out AOA branded beanies and provided advice to attendees
- Total impressions:
  - 80,000+ Chicago
  - 100,000+ in NYC
Digital: Native Advertising

New for 2017

• For the first flight, we tested 7 pieces of content which delivered over 5.5 million impressions

• Stronger response to content with headlines phrased as a question, a direct call-to-action or an infographic

• While mobile has a high CTR, we see stronger engagement and actions on desktop and tablet
Digital Display & Video Performance

- Through January, digital display tactics delivered nearly 55 million impressions
- *Healthgrades* and *WebMD* are top performing sites with click-through rates 3x industry standard
- Pre-roll video tactic delivered over 4.4 million impressions with nearly 3 million completed views
- 70% video completion rate far exceeds industry average

*WebMD delivers 75% of the “Find Your DO” searches!*
Website Performance

Visitors to DoctorsThatDo.org exceeded 1,000,000

With more than 350,000 physician profiles viewed

FY17 Mid-Year Meeting
Paid Search & Website Performance

• Nearly 7.5 million paid search impressions YTD
• Increased awareness and improved site search ranking has led to:
  • **Higher volume**: 3,479% YOY increase in organic search sessions and 388% YOY increase in direct (entering URL)
  • **Significant increase** in use of osteopathic search phrases delivering highly qualified users to the site
  • **Increased efficiency**: “Find Your DO” searches increased 58%, while cost per lookup decreased 19%
Out-of-Home
Hartford / New Haven, Charlotte, Phoenix
Out-of-Home

- Total impressions: 51.6M
- Phoenix was a strong performer in both web sessions and “Find Your DO” searches
- Charlotte and Hartford/New Haven initially performed slightly above projections before falling in line with national trends after 2 months
- Comparing FY16 to FY17, we saw improvements for our key metrics – web sessions and “Find Your DO” searches - in all 3 markets
- Search volume did not meet FY16 benchmarks likely due to timing and seasonality
Consistent, Steady Improvement

Nielsen Digital Brand Effects Survey

- Brand survey question updated this year from “favorability” to “intent/consideration”
- Lift measured those users who responded with “Definitely will” or “Probably will”
- The study is showing an **86% lift** in the likelihood to consider a DO!
Evolution of Media Approach

Considerations for Next Phase

• Re-evaluate the impact of seasonality
• Consider “always on” tactics
• Re-consider growth market (out-of-home) strategy
• Digital media drives consideration
• Re-evaluate the role of native
• Continue to focus on the health mindset
Evolution of Media Approach

What Idea Helps Us Win?

• DOs treat the whole person, employing empathy, partnership and the best in medical science to do so

Creative Adjustments for 2017-18

• Elevate the conversation to the philosophy of DOs – why and how DOs do what they do
• Underscore that DOs are active in all specialties of medical practice
• Refresh creative assets with new talent
I BELIEVE TREATING A HUMAN BEING STARTS WITH HUMANITY.

DOCTORS OF OSTEOPATHIC MEDICINE

DoctorsThatDO.org
Doctors That DO Campaign is Just One Piece of the Brand Puzzle