

A M E R I C A N OSTEOPATHIC ASSOCIATION

Administrative Guide

2023 Edition

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American Osteopathic Association 142 East Ontario Street Chicago, Illinois 60611-2864

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Introduction

1 This is the Administrative Guide of the American Osteopathic Association (AOA). It is a 2 document that the AOA's Board of Trustees is required to maintain. As described in the AOA's Bylaws, the Administrative Guide serves as a "handy reference book of concise 3 4 statements of the duties" of the AOA's officials, committees, departments, bureaus, and 5 employees. The Administrative Guide serves as a summary of critical components of 6 the constitution and bylaws, the controlling governance documents of the AOA, but this 7 guide is not, in and of itself, controlling or authoritative. 8 9 The Bylaws specify that copies of the Administrative Guide should be available to the 10 following constituencies: divisional societies and other affiliated organizations, to the AOA's officers and other groups or individuals designated by the Board of Trustees. The 11 12 Administrative Guide is intended to provide readers with a guick overview of the AOA's 13 administration and operations. Descriptions found in this Guide are, therefore, brief. 14 Readers seeking greater detail should contact the office of the AOA's Chief Executive 15 Officer (CEO).

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AOA Strategic Plan, Mission, Vision, Values Statements and Priority Objectives

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19 Strategic Plan

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21 The AOA is dedicated to advancing the osteopathic profession consistent with its

22 mission and vision. In order to do so, effective governance and long-range planning are

essential. The AOA appoints a committee on strategic planning periodically to provide

- oversight of this process on two levels: (1) the AOA Strategic Plan is revised and
- updated approximately every three years; and (2) monitoring and reporting progress is done through departmental goals set by AOA staff and leadership with staff reporting to
- 20 done through departmental goals set by AOA stan and leadership with stan reporting to 27 the Board of Trustees. The Strategic Plan is approved by the Board of the Trustees.
- Through the strategic planning process, all units of the AOA leadership and staff have
- been involved in the development, review, and finalization of the plan. In addition, input
- 30 was received from AOA members, osteopathic affiliate leaders and leaders from
- 31 stakeholder organizations. The strategic plan then becomes a resource for determining
- 32 the appropriate allocation of the AOA's resources.
- 33
- 34 Mission, Vision, Values Statements and Priority Objectives
- 3536 Mission
- The strategic plan approved by the Board of Trustees states that the AOA's mission is:
- 38
- 39 The AOA is the professional home for osteopathic physicians and students, providing
- 40 education, board certification and is the champion of the advancement of the distinctive
- 41 osteopathic profession.
- 42 43 Vision
- 44 The Vision of the AOA is The AOA aspires to be the "North Star" of the osteopathic
- 45 profession by advancing the interests of osteopathic physicians and students and

- 46 promoting excellence in patient care consistent with the distinctive osteopathic
- 47 philosophy.
- 48
- 49 Value Statements
- 50 1. Selfless Service: The AOA exists in service to the profession, its members, current
- and future osteopathic physicians.
- 53 2. Integrity: The AOA and its leaders display integrity in action, word, and deed.
- 54
 55 3. Transparency: The AOA respects those it serves through open communication and
 56 transparency.
- 57
- 4. Innovation: The AOA strives to build the box, not live within its confines.
- 5. Advocacy: The AOA passionately advocates for the osteopathic profession and the patients our members serve.
- 62
- 63 6. Collaboration: The AOA empowers the osteopathic community through collaboration 64 and common interests with all whom we serve.
- 65

66 7. Diversity, Equity and Inclusion: The AOA commits to creating and sustaining a

- 67 community that promotes and values diversity, equity and inclusion.
- 68
- 69 Priority Objectives
- 70 1. Advocacy
- 71 2. Affiliate Relations
- 72 3. AOA Board Certification
- 73 4. Credibility
- 5. Diversity, Equity, and Inclusion
- 75 6. Growth
- 76 **7.** Promotion
- 77
- 78

Overview of the AOA's Corporate Structure

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80 The AOA is incorporated in the State of Illinois under the Illinois Not for Profit

81 Corporations Act. It is recognized by the Internal Revenue Service (IRS) as exempt

82 from federal taxation under Section 501(c)(3) of the Internal Revenue Code. The AOA

received its 501(c)(3) status because of its involvement in medical education and

- 84 research.
- 85
- 86 The 501(c)(3) tax exemption provides the AOA with significant advantages, including
- 87 exemption from certain federal, state, and local taxes and the ability to receive tax-
- deductible contributions. However, as a 501(c)(3) organization, there are strict
- 89 limitations on the AOA's activities. The IRS expects that revenues and resources will be
- 90 used to advance the AOA's tax-exempt purposes and monitors the AOA's financial
- 91 activities through detailed financial reporting requirements. Additionally, the AOA is only

92 permitted a limited range of lobbying up to a specific financial limit and the AOA is not 93 permitted to engage in any political activity, such as endorsing candidates for office or 94 contributing to political campaigns or maintaining a political action committee in 95 accordance with federal tax guidelines. 96 97 The osteopathic profession includes a variety of divisional (state), specialty and 98 philanthropic affiliates. The divisional and affiliated organizations are separately 99 incorporated, freestanding organizations. However, as part of the process of becoming 100 an affiliated organization, our bylaws require organizations to provide their basic 101 documents (i.e., constitution and bylaws) on a periodic and recurrent basis and certain other organizational information for the AOA's review and approval. 102 103 104 **Overview of Governance Structure** 105 106 House of Delegates 107 108 The AOA is organized as a federation of the AOA's divisional societies (i.e., state 109 associations and the Association of Military Osteopathic Physicians and Surgeons). The divisional societies administer the affairs of the AOA through a House of Delegates. 110 111 which meets at least once each year, traditionally in July. Affiliated organizations are also represented in the House of Delegates. The House of Delegates is the AOA's 112 113 legislative body. (AOA Constitution, Article VI.) 114 115 Concurrence (agreement) with the Board of Trustees' actions, regarding approval of the AOA annual budget, is required. Such concurrence can be achieved via resolution from 116 117 the Joint Board House Budget Review Committee which states that the House of 118 Delegates concurs (agrees) with the Board of Trustee's approval of the annual budget 119 for the current fiscal year. 120 121 Changes to the Constitution and Bylaws and Code of Ethics of the AOA require approval of the House of Delegates. As a mandatory order of business, each year the 122 123 House elects a President-elect and several members of the Board of Trustees. The 124 Speaker of the House of Delegates is the presiding officer at meetings of the House. The Vice Speaker presides during the absence or at the request of the Speaker. The 125 CEO serves as the Secretary to the House of Delegates. The installation of the new 126 127 president takes place during the House of Delegates meeting. 128 129 Board of Trustees 130 131 The House of Delegates elects the members of the AOA's Board of Trustees, which is 132 made up of 28 positions: President, President-elect, the past presidents from the past 133 two years, First Vice President, Second Vice President, Third Vice President, all of 134 whom serve one year terms; eighteen at-large trustees who serve staggered three-year terms; a student trustee, a postdoctoral trainee trustee, and one trustee who is a new 135 136 physician in practice all of whom serve one-year terms. Beginning in the 2018-19 year,

137 the President-elect may appoint three emerging leaders as advisors to the Board: one

138 student, one postdoctoral trainee, and one new physician in practice all of whom serve

139 one-year terms. These advisors may participate in the Board meetings but are not

140 members of the Board and thus do not vote on matters before the Board of Trustees. 141

For reasons of attorney-client privilege, they may be dismissed from certain executive 142 session discussions.

143

144 The Board of Trustees has authority to "direct the affairs of the Association" between

145 meetings of the House of Delegates. (Bylaws, Article VII, Section 1.). Generally, the

Board of Trustees meets monthly by video conference and face-to-face during at least 146 147 two business meetings each year: an annual meeting prior to the House of Delegates and a mid-year meeting. Additionally, the board may convene a business meeting prior 148 149 to OMED. Other business meetings and special meetings may be called from time-to-

- 150 time when necessary.
- 151

152 **Executive Committee**

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154 When the full Board of Trustees is not in session, a 10-member Executive Committee of

155 the Board of Trustees has authority to "transact business of the Board of Trustees." (Bylaws, Article VII, Section 3.) The Executive Committee is drawn from the following

156

157 positions: President, President-elect, the two Past Presidents on the Board, and the Chairs of the six Departments (Affiliate Relations; Finance; Education; Governmental 158

159 Affairs; Membership; and Research and Public Health). The AOA President may also

160 designate one other trustee who serves as a non-voting advisor to the Executive

Committee. The Executive Committee meets at the discretion of the President. 161

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163 Departments/Bureaus/Committees/Councils

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165 The AOA Board of Trustees typically decides issues based on the advice and recommendations of a network of Bureaus, Committees, Councils, Task Forces and 166 Staff. The AOA President, subject to approval by the Board of Trustees, appoints 167 members and chairs of these groups. The bureau-committee-council-structure is divided 168 169 among six departments: Affiliate Relations, Finance, Education, Governmental Affairs,

170 Membership, Research and Public Health (Bylaws, Article IX).

171

172 Additionally, several Committees of the Board of Trustees are categorized as non-

departmental governance. These include: The Executive Committee and the Ethics 173

174 Review and Board Appeals Committee of the Board of Trustees; The President's

175 Advisory Council; House of Delegates Committee on Credentials; Committee on

176 Administrative Personnel: Committee on Awards: the Committee on AOA Governance

and Organizational Structure (CAGOS); the CAGOS Constitution and Bylaws 177

178 Subcommittee; the CAGOS Basic Documents Subcommittee; and the Bureau of

179 Osteopathic Specialists (BOS).

180

181 The AOA Board of Trustees and/or House of Delegates has the authority to create new

182 governance departments, as well as new Bureaus, Committees, Councils,

183 Commissions, and Task Forces. The Board has discretionary authority to determine

- 184 how best to deploy these groups within the department structure in order to create
- 185 policies consistent with HOD policy directives and provide oversight for the activities of
- 186 the AOA.
- 187
- 188 Staff
- 189

190 The AOA staff is responsible for implementation of the policy set by the House of

- 191 Delegates, Board of Trustees and the Bureaus, Committees and Councils. The Board of
- 192 Trustees is responsible for appointing four administrative officers -- the CEO (Chief
- 193 Executive Officer), the CFO (Chief Financial Officer), the General Counsel (Chief Legal
- 194 Officer) and the Editor-in-Chief – who oversee various aspects of the AOA's day-to-day 195 operations and are subject to the directives of the Board of Trustees through the CEO.
- 196 Of these positions, the CEO serves as the primary administrator and is responsible for
- 197 the hiring and supervision of all other AOA employees.
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- 199
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Overview of Financial Operations

- 201 A key obligation of the AOA's officers and trustees is to review and understand the 202 AOA's financial statements and make decisions that are in the best interests of the 203 AOA. The AOA's fiscal year runs from June 1 to May 31. Spending decisions are made 204 based upon an annual budget that is submitted to the Finance Committee of the Board 205 of Trustees for approval prior to the beginning of the fiscal year and subsequently 206 approved by the full Board of Trustees with the concurrence of expenditures by the
- 207 House of Delegates. Budgeting decisions are made to advance the goals set forth in the AOA's Strategic Plan and other identified organizational priorities. 208
- 209 The Finance Committee has authority to review requests for additional funding and/or
- 210 approval of programs or services. However, as explained in a September 2013 Board
- resolution, the Finance Committee does not need to review or approve "internal budget 211
- reallocations" (budget-neutral repurposing of identified operating expense savings or 212
- 213 excess revenues to fund other specifically identified operating costs) of less than 214 \$150,000. Once acted upon by the Finance Committee the recommendations are then
- 215 sent to the full Board of Trustees for their review and action.
 - 216
- 217 As a measure of financial prudence, the AOA maintains a financial reserve. The reserve 218 serves multiple functions: (a) it is a measure of the AOA's financial strength and ability 219 to thrive, rather than subsisting "hand to mouth"; (b) it is added insurance/"rainy day 220 fund" in the event of disaster or financial downturns; and (c) it is a "savings account" to 221 set aside resources for use when special opportunities arise. The AOA has a policy 222 governing the financial reserve, which is reviewed by the AOA Joint Board / House 223 Budget Review Committee and acted upon by the AOA House of Delegates.
- 224
- 225 The Chief Financial Officer and staff from the AOA's finance department prepare
- 226 monthly financial statements. The information is available for review by the Board of
- 227 Trustees. Financial statements may also be discussed and reviewed by the Finance
- 228 Committee. 229

- 6 -

The AOA's financial statements are audited at the end of each fiscal year by an outside accounting firm selected by the Board of Trustees' Audit Committee and approved by the Board of Trustees. The Audit Committee is comprised of members of the Board of Trustees who do not serve on the Finance Committee. It is responsible for oversight of the audit process and meets with the auditors at the conclusion of the audit process and as needed and appropriate during the audit process. It has the right to meet with the auditors without staff present.

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Overview of Policymaking Process

239 240 The AOA's policy can be set by the House of Delegates or the Board of Trustees (all 241 association policies must be consistent with existing policy directed by the House of 242 Delegates); AOA staff maintains a compendium of official policies. Policies in the House 243 of Delegates are determined by majority vote or as provided for the Rules of Order of 244 the House of Delegates acting on a resolution submitted by a delegate, a divisional 245 society, an affiliated organization or an appropriate AOA Bureau, Committee, Council or 246 Board of Trustees. Typically, resolutions are first reviewed by one of the House of Delegates' Reference Committees, which makes recommendations and submits 247 248 Amendments to the resolutions to the entire House of Delegates for deliberation and 249 action. After approval of resolutions, staff is responsible for implementing the policy and 250 will prepare a report to the next year's House of Delegates to identify steps taken to 251 implement the policies set by the House of Delegates. The AOA staff maintains a 252 tracking tool, which indicates the status and implementation progress on all resolutions 253 dating back to 2017.

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The Board of Trustees can also set policy in certain areas for the AOA and, because of the committee-bureau-council infrastructure and expertise, is the preferred vehicle for

257 setting policies related to education, certification, and accreditation. Bureaus,

258 Committees, and Councils who have completed work on behalf of and/or for the

consideration of the Board of Trustees will be submitted via their Secretary for inclusion

in the next most appropriate meeting of the Board of Trustees. Such BOT business will

261 be handled via motion and does not require a formal resolution. The CEO reviews 262 actions taken by the Board of Trustees and provides updates to the Board regarding

- 263 implementation.
- 264

265 The Board of Trustees reviews resolutions submitted by appropriate AOA Bureaus,

266 Committees or Councils to approve prior submission to the House of Delegates. The

267 Board of Trustees also reviews all resolutions submitted to the House of Delegates and

determines its collective position on each, making such positions available to the House

of Delegates of "support, non-support, or support with qualification".

270 Except where otherwise provided in the AOA's Constitution or Bylaws as an area of

- 271 specific Board of Trustees' responsibility, policy set by the Board of Trustees can be 272 overturned by vote of the House of Delegates.
- 273

AOA policy set by the House of Delegates is subject to a process of automatic sunset review every five years. Some policy may be subject to an early review. Staff, in consultation with the Speaker of the House, identifies policies that should be reviewed.
 The policies are then circulated to the appropriate Bureaus, Committees or Councils for

- evaluation and recommendation. The recommendations are then compiled and
- presented to the House of Delegates for its consideration in determining whether to
- affirm, amend or sunset the policy.
- 281

Although the AOA, through the Board of Trustees or House of Delegates, can make policy decisions on a very broad range of issues, the AOA's Board of Trustees and House of Delegates cannot set policy or make decisions regarding accreditation of colleges of osteopathic medicine. Similarly, the Board and House are not permitted to set accreditation standards. Because of regulations set by the U.S. Department of Education, the AOA's Commission on Osteopathic College Accreditation (COCA) has final decision-making authority on accreditation of colleges of osteopathic medicine.

House of Delegates - Duties

292 The House of Delegates is the legislative body of the American Osteopathic

Association. Through its deliberations, the House sets policy for the Association and reviews and approves the strategic plan and receives the budget from the Board of Trustees. The House also elects members of the Board of Trustees, officers of the Board of Trustees, and officers of the House of Delegates and has authority to set membership dues as well as other duties outlined in the Constitution and Bylaws.

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Board of Trustees - Duties

The AOA Board of Trustees is the administrative and executive body of the Association.
It has the following duties:

304 Directing the management of the affairs of the Association between annual 305 meetings. The Board accomplishes this by: (1) Appointing the Administrative Officers (CEO, CFO, General Counsel, and Editor-in-Chief); (2) providing 306 307 oversight of the AOA CEO in their execution of the AOA's policies and goals as 308 determined by the House of Delegates and Board of Trustees; (3) creating 309 governance departments, Bureaus, Committees, Councils and Task Forces as 310 necessary to carry out the AOA's mission and policy, and (4) confirming the 311 President's appointment of the chairs and members of the organization's 312 governance entities (i.e. Bureaus, Committees, and Councils).

- Overseeing the management of the AOA's finances, including, with the concurrence (agreement) of the House of Delegates, setting a budget, authorizing substantive expenditures outside of the budget, appointing an independent outside certified public accountant to audit the AOA's financial statements to certify the accuracy of the statement of financial condition of the Association to be reported at the annual meeting of the House of Delegates.
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- Serving as the final authority on all questions of an ethical or judicial character.
- Maintaining and revising the Administrative Guide on an annual basis.
- Arranging for the publication (in electronic or printed format) of an official journal of the Association and other publications that may be deemed necessary or are directed by the House of Delegates.

Roles of the AOA Board and Staff

331 332 The AOA is a large organization with employed staff to help carry out its mission. The 333 role of the Board of Trustees is to represent the interests of the members by setting 334 direction for the AOA and then providing general oversight to ensure that the policy and 335 directions are followed and that the financial and substantive performance goals set by 336 the Board are met. Additionally, the AOA's Bylaws include a specific list of 337 responsibilities of the Board. Among their duties is the responsibility to hire and evaluate 338 the performance of the CEO. The CEO, in turn, is responsible of oversight of the staff 339 and implementation of the goals set by the Trustees. Day-to-day operations, as directed 340 by the CEO, are managed and implemented by the staff, which reports to the CEO.

AOA Executive Committee - Duties

The Executive Committee is responsible for conducting the business of the Board of
Trustees between meetings of the full Board of Trustees.

AOA Departmental Chairs - Duties

348 349 Department Chairs are responsible for oversight of the Bureaus, Committees, and 350 Councils that are within their respective Departments within the Board of Trustees governance structure. The Department Chairs serve on the Executive Committee and 351 352 report to the Board of Trustees regarding activities within their Department. As a general 353 matter, the activities of all departments, Bureaus, Committees, and Councils are 354 targeted to advancing the AOA's strategic plan and are executed in close cooperation 355 with the CEO and AOA staff. Upon the expiration of the terms of office of chairs and 356 members of the departments, bureaus, or committees, all records of the same shall be 357 delivered by the chairs to the CEO. All employed staff primarily serve in a department 358 within the operations structure of the AOA and may be assigned to departments, 359 bureaus, and committees, but remain under the jurisdiction of the CEO. Although 360 similarly named departments may exist both within the governance arm of the organization (Board of Trustees) and the operations arm, they serve differing, but 361 362 complementary roles. Governance provides guidance and direction on policy 363 development and directional changes for the organization, while operations primarily 364 manages the day-to-day operations and implements policy. 365 366

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368	Officers of the American Osteopathic Association - Duties
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370	Elected Officers and Order of Succession
371	
372	The Constitution identifies the following five elected positions as officers of the
373	American Osteopathic Association: President, President-elect, First Vice-President,
374	Second Vice-President and Third Vice-President. The President-elect and the three vice
375	presidential positions are elected annually by the House of Delegates to one-year terms
376	of office.
377	
378	The order of presidential succession is specified in the Constitution and Bylaws. The
379	President-elect automatically succeeds to the presidency upon installation at the House
380	of Delegates meeting approximately one year after election to President-elect as part of
381	a 4-year presidential cycle (President-elect to President to Immediate Past
382	President/Treasurer to Past President). If the President is unable to serve during the
383	term of office as President, the President-elect automatically becomes President for the
384	unexpired portion of the predecessor's term before completing the term for which the
385	President-elect was originally elected. If, during the remainder of the unexpired term,
386	the former President-elect becomes unable to serve out the balance of the President's
387	office, then the Board of Trustees determines who serves as President for the
388	remainder of the unexpired term. The Vice-Presidential positions are <u>not</u> part of the
389	presidential succession plan.
390 201	AQA President The President has the following dution:
391	<u>AOA President</u> . The President has the following duties:
392 202	 Serve as Chair of the Board of Trustees, Executive Committee, and the Broaidant's Advisory Council
393 394	 President's Advisory Council. Appoint (with the approval of the Board of Trustees) the chairs and members of
394 395	 Appoint (with the approval of the Board of Trustees) the chairs and members of the various Bureaus, Committees, and Councils unless a position is already filled
395 396	on a multi-year basis or a different method of appointment is specified.
390 397	 Create (with the approval of the Board of Trustees) Task Forces when necessary
398	for investigation of specific issues.
399	 Serve as a member of the Finance Committee and as a member on the
400	Committee on Administrative Personnel.
401	 Participate as a member of Committee on Administrative Personnel (COAP) in
402	conducting the annual performance and compensation review for the CEO.
403	 Represent the AOA at appropriate meetings, functions or appoint someone to
404	attend.
405	 Approve all travel of the AOA Board of Trustees; and
406	 Serve as an ex-officio member of all the AOA's Bureaus, Committees, and
407	Councils.
408	
409	Additionally, following the term of office of AOA President, the President continues to
410	serve for two additional years on the Board of Trustees - first, as Immediate Past
411	President/Treasurer; and then, as Past President.
412	

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413 AOA President-elect. The President-elect performs the duties of the office of the 414 President in the absence or at the request of the President. In the event that the 415 President is unable to complete the term of office, then the President-elect completes 416 the President's term of office before completing the term for which the President-elect 417 was originally elected. 418 419 Immediate Past President/Treasurer. The Immediate Past President/Treasurer plays an active role in the oversight of AOA's financial activities by serving as Chair of the 420 421 Finance Committee. 422 Past President. The Past President is the final year of the Presidential cycle. The Past 423 424 President serves as Chair of the Committee on Administrative Personnel. 425 AOA Vice Presidents. The Vice Presidents in the order of their designation and in the 426 427 absence of the President and President-elect, perform the duties of the Office of the 428 President. The positions are not related to the presidential succession sequence. 429 430 Administrative Officers The Constitution and Bylaws identify the following four administrative officers: A Chief 431 Executive Officer (CEO), a Chief Financial Officer (CFO), a General Counsel, and an 432 433 Editor-in-Chief. These positions are appointed by the Board of Trustees and serve for a term of office determined by the Board of Trustees. The administrative officers are 434 435 responsible for rendering advice, counsel and assistance (where and when appropriate) 436 to the AOA Board of Trustees, management and staff. as an officer of the aoa, the responsibilities of the administrative officers are carried out as directed in the aoa 437 438 bylaws and as otherwise assigned by the board of trustees and the CEO. Non-CEO 439 administrative officers collaborate on operations on a day-to-day basis with the CEO. However, they are also accountable to the Board of Trustees for duties otherwise 440 assigned by the Board of Trustees. 441 442 443 CEO. The CEO has the following duties: 444 Serve as the Chief Executive Officer of the Association. This entails coordinating the work performed by the various governance departments, bureaus, and 445 446 committees of the Association necessary to carry out the policies set by the 447 House of Delegates and Board of Trustees. Except as otherwise provided, all of the AOA's employed staff are supervised by the CEO. 448 449 Serve as the executive secretary of the Association. In this capacity, the CEO is responsible for: making certain that the Association keeps appropriate records of 450 its actions and transactions; keeping and overseeing the Association's official 451 correspondence; maintaining accurate records of the proceedings of the House 452 453 of Delegates and the Board of Trustees; keeping an accurate record of all transactions conducted by the CEO's office, which shall be subject to 454 455 examination by the President or the Board of Trustees. 456 Present an annual report to the House of Delegates and Board. 457 Deliver all AOA property and records to the successor CEO at the expiration of 458 employment; and

459 Perform such other duties as may be prescribed by the Board consistent with the 460 Constitution and Bylaws of the Association. 461 462 Chief Financial Officer. The Chief Financial Officer has the following duties: Management of the funds and assets of the Association, and disbursement of 463 464 funds in the manner prescribed by the Board of Trustees. 465 Collection of dues and assessments. 466 Keep accurate records of the transactions handled by the Chief Financial Officer's office, which shall always be subject to examination by the Board of 467 468 Trustees. The Chief Financial Officer shall prepare reports on at least a quarterly basis for the Board of Trustees and annually for the House of Delegates and the 469 470 Board: and 471 Perform such other duties as may be prescribed by the Board consistent with the 472 Constitution and Bylaws of the Association. Deliver to the successor Chief 473 Financial Officer or to the Board, or their assigned agent, all monies, records, 474 and other property of the Association at the conclusion of employment as Chief Financial Officer. 475 476 477 General Counsel. The General Counsel has the following duties: 478 Serve as the chief legal officer of the Association, responsible for oversight and 479 management of all legal services provided to the Association, its trustees, 480 officers and staff to ensure protection of the Association's legal rights and 481 maintenance of its operations consistent with the limits established by law; Provide legal advice and guidance to the trustees, officers and staff, Bureaus, 482 483 Committees, and Councils of the Association on the legal implications of matters 484 relevant to the Association, including compliance with federal, state and local laws and regulations applicable to a tax-exempt, not-for-profit membership 485 486 organization and adherence to internal organizational policies and procedures; 487 Draft and review contracts and other legal documents, policies, and procedures; research pertinent legal issues; prepare written and oral opinions and position 488 489 statements on issues identified by the Association's trustees, officers, staff, 490 Bureaus, Committees, and Councils. Represent or coordinate the representation of the Association in judicial and 491 492 administrative proceedings; select, retain, and supervise outside counsel, as 493 required, to obtain legal opinions or to handle claims and litigation; and 494 Perform such other duties as may be prescribed by the Board consistent with the 495 Constitution and Bylaws of the Association. 496 497 Editor-in-Chief. The Editor-in-Chief has the following duties: 498 Exercises editorial direction, in accordance with the established policies of the 499 Board of Trustees and House of Delegates, for The DO, The Journal Osteopathic 500 Medicine, and other AOA publications (printed and electronic) under the general supervision of the Chief Executive Officer. 501 502 503 504

AOA Staff and Personnel Issues 505 506 507 The AOA CEO oversees the activities of all employed staff of the AOA. The CEO reports on material staff, and personnel issues to the Committee on Administrative 508 509 Personnel (COAP), which reports to the Board of Trustees. Concerns regarding 510 individual staff members should be brought to the attention of the CEO or the Director of 511 the Department of Human Resources. 512 513 The Board of Trustees' may delegate responsibilities with respect to oversight of 514 personnel issues to the COAP while retaining its responsibilities and authority. The 515 Board of Trustees will review and may take action upon recommendations of the COAP. 516 Departments, Bureaus, Committees, and Councils 517 518 519 The AOA's policy is developed through a network of Bureaus, Committees, Councils, 520 Commissions, and Task Forces, which are arranged under six Departments in the 521 Board of Trustees governance structure. The Department's focus on advancing the 522 specific strategic paths identified in the AOA's Strategic Plan. Each Department is led 523 by a Department Chair, who is a member of the Board of Trustees and the Executive Committee. These departments mirror, but are not synonymous with, the departments 524 525 which reside in organizational operations. 526 527 The different units of organizational structure are generally understood to have the 528 following meanings: 529 530 A "Bureau" is an entity created by the Board of Trustees to provide oversight of a 531 non-Board function. Bureau members are appointed by the President (subject to 532 approval by the Board of Trustees). Membership of Bureaus can be drawn from a 533 combination of AOA members and other individuals from outside the AOA who 534 can provide specific expertise on an issue or issues overseen by the Bureau. 535 Bureaus report to the Board of Trustees through a Department. 536 537 A "Committee" is an entity created by the Board of Trustees to provide oversight 538 of a Board function. Committee members are appointed by the President (subject 539 to approval by the Board of Trustees) but, with the exception of public members or student or postdoctoral trainee/members, the membership is usually 540 541 comprised of Board members. Under Illinois law, a majority of a Committee must 542 be Board members and there must be at least two Board members serving on 543 the Committee. Committees report to the Board of Trustees through a 544 Department. 545 546 A "Council" is an entity created by the Board of Trustees to report to a Bureau or 547 Committee. Councils provide oversight of specific issues within the purview of a 548 larger Bureau or Committee. The Council's membership is appointed by the 549 President (subject to approval by the Board of Trustees) and can be comprised

550 of AOA members and other individuals from outside the AOA who can provide 551 specific expertise on an issue or issues overseen by the Council. 552 553 A "Commission" is an entity created by the Board of Trustees with responsibility 554 for a non-Board function, whose membership shall be appointed by the President 555 (subject to approval by the Board of Trustees). Commission membership can be 556 drawn from AOA members and other individuals from outside the AOA who can 557 provide specific expertise on the issues assigned to the Commission. Commissions report to the Board of Trustees through a Department and are 558 559 subject to budgetary and other constraints but shall have independent decisionmaking with respect to defined subject matter. 560 561 562 A "Task Force" is an entity created by the President (with approval of the Board) of Trustees) to review a specific assigned issue. The President (subject to 563 564 approval of the Board of Trustees) appoints the members of a Task Force, and 565 the members may include a combination of AOA members and other individuals from outside the AOA who can provide specific expertise on the issue assigned 566 to the Task Force. The Task Force should report back to the Board of Trustees 567 568 through a Department regarding its progress and conclusions. Task Forces are 569 expected to resolve their business expeditiously and disband upon completion of 570 their assignments. 571 572 A brief description of the current department-bureau-committee-council structure is set 573 forth below. 574 575 Except as otherwise stated, multi-year appointments to all AOA Bureaus, Committees, 576 and Councils are for staggered terms. 577 578 **Department of Affiliate Relations** 579 580 The Department of Affiliate Relations consists of the Bureau that may be established by 581 the House of Delegates or the Board of Trustees that are dedicated to issues related to 582 collaboration with other organizations, including osteopathic and non-osteopathic 583 entities. 584 585 Bureau of Affiliate Relations. 586 The Bureau of Affiliate Relations (BAR) provides the AOA state and specialty affiliates 587 with a direct link and structured opportunities to participate in the AOA'S policy 588 development process. It also provides the affiliates with a forum to exchange 589 information. The BAR is designed for the state and affiliated organizations to: advise the 590 AOA on pertinent issues; gather and disseminate relevant information; review and 591 provide input into affiliate leader education; oversee affiliate award recognition programs; and educate and mentor each other. The BAR reports to the Board of 592 593 Trustees.

594	
595	Finance Department
596 597 598 599 600 601	The Finance Department consists of committees that may be established by the House of Delegates or the Board of Trustees related to the businesses and operations of the AOA. The Department has general supervisory authority over all AOA activities involving the AOA's finances.
602 603 604 605 606 607 608 609 610 611 612	<u>Finance Committee</u> The Finance Committee plans and prepares the AOA's fiscal program. It reviews and approves the annual budget and budget adjustments. It receives financial statements and other reports from the CFO concerning the AOA's financial status. The Committee reviews all resolutions with fiscal impact prior to Board of Trustees action. Similarly, the House of Delegates cannot authorize an appropriation without first securing the recommendation of the Finance Committee approved by the Board of Trustees, although an adverse ruling on such motions may be overruled by a three-fourths vote of the House of Delegates. The Finance Committee also provides oversight of the financial performance and assets of the Association.
612 613 614 615 616 617 618 619 620 621	<u>Audit Committee</u> The Audit Committee is comprised of three members of the Board of Trustees who do not serve on the Finance Committee. It is responsible for oversight of the audit process, including selection of the audit firm and meeting with the auditors as needed and appropriate during the audit process. It is their responsibility to approve the audit with ratification from the Finance Committee and Board of Trustees. As part of the audit processes and procedures, the Committee meets with the auditors without management (staff) present.
622 623 624 625 626 627 628 629 630 631 632	Joint Board House Budget Review Committee The Joint Board House Budget Review Committee includes members of the Board of Trustees and House of Delegates (appointed by the speaker of the House of Delegates) and serves as a House of Delegates reference committee. The joint Board House Budget Review Committee IS to report to the House of Delegates and obtain concurrence from the House for the upcoming year's budget. Each year, following the Board of Trustees' approval of the annual budget, the budget is reviewed with and reported to the Joint Board House Budget Review Committee. Additionally, the committee also is responsible for review of the AOA's policy governing use and maintenance of a financial reserve.
633	Department of Education
634 635 636 637 638	The Department of Educational Affairs consists of the bureaus, committees, councils, and commission which may be established by the House of Delegates or the Board of Trustees to carry out efficiently the work of the AOA related to the full continuum of osteopathic medical education, including accreditation of the colleges of osteopathic

- 639 medicine, approval of postdoctoral education programs completing the teach out of their
- 640 final Residents and continuing medical education and board certification.
- 641
- 642 Bureau of Osteopathic Education (BOE)
- The BOE provides governance to all educational endeavors of the association, except
- 644 for activities of the Commission on Osteopathic College Accreditation. As part of the
- recommendations from the 2010-11 Educational Policy and Procedures Review
- 646 Committee, BOE was given responsibility for development of policy and procedures
- 647 necessary for the entire continuum of osteopathic medical education. Typically, the
- regular meetings of the BOE occur three times per year.
- 649
- 650 Program and Trainee Review Council (PTRC)
- The PTRC provides oversight for the osteopathic (AOA-accredited) postdoctoral training
- 652 programs that did not transition into the single accreditation system. It is scheduled to
- be sunset after all remaining residents in AOA-accredited programs complete training. It
- 654 reviews residency program recommendations from the specialty college Evaluating
- 655 Committee for final approval, denial or deferral of action and reports on its actions to the 656 BOE.
- 656 BO
- 658 <u>Council of OMED</u>
- The Council of OMED is responsible for governance advice for the programming and
- 660 planning of the annual Osteopathic Medical Education Conference (OMED) of the AOA.
- 661 OMED is the premier source for quality osteopathic Continuing Medical Education.
- 662
- 663 Commission on Osteopathic College Accreditation (COCA)
- The COCA, which is the successor to the former Bureau of Professional Education
- 665 (BPE), is recognized by the United States Secretary of Education as the only
- accrediting agency for colleges of osteopathic medicine (COMs) in the United States.
- 667 The COCA's membership and procedures are described in the Handbook of the
- 668 Commission on Osteopathic College Accreditation.
 - **Department of Governmental Affairs**

670 671

669

- The Department of Governmental Affairs consists of the Bureau and Councils
- 673 established by the House of Delegates and the Board of Trustees to advocate on behalf 674 of the osteopathic profession and its members.
- 675
- 676 Bureau on Federal Health Programs (BFHP)
- 677 The Bureau on Federal Health Programs (established in 1960) provides direction on the
- 678 federal legislative and regulatory activities of the AOA department of governmental679 affairs. The Bureau:
- Studies and evaluates federal health and education issues of interest of
 osteopathic physicians and those they serve;
- Ensures that the policies of the AOA and the directives of the board of trustees
 are followed and promoted;

684	 Provides timely information on federal legislative and regulatory issues to the 					
685	osteopathic medical community;					
686	 Promotes the active involvement of members of the osteopathic medical 					
687	community in grassroots activities that promote the interests of the community,					
688	and					
689	 Provides a forum for the recognition of the Training in Policies Studies (TIPS) 					
690	program.					
691						
692	The Bureau's membership structure includes a Council on State Health Affairs (formerly					
693	the Bureau of State Government Affairs) and a Council on Economic and Regulatory					
694	Affairs (formerly the Bureau of Socioeconomic Affairs). Council appointees may					
695	participate in BFHP meetings at the discretion of the BFHP chair.					
696						
697	Council on State Health Affairs (CSHA)					
698	The CSHA was established in 1949 and changed to its present form in March					
699	1991. It is the representative body created to assure the AOA Board of Trustees					
700	and the osteopathic family that the tenets of the profession are protected and					
701	advanced in all 50 states and Washington, DC. The CSHA carries out this					
702	mission by providing detailed information to state osteopathic associations and					
703	specialty colleges on issues impacting the profession. The CSHA also has the					
704	obligation to deliberate and recommend new policy and policy revisions to be					
705	adopted by the AOA Board of Trustees and the AOA House of Delegates on					
706	state initiatives. The CSHA typically meets three times during the fiscal year.					
707						
708	Council on Economic and Regulatory Affairs (CERA)					
709	The purpose of the CERA, (formerly the Bureau of Socioeconomic Affairs, first					
710	organized in 1998) is to advise on physician payment policy on behalf of the					
711	profession to the AMA CPT Editorial Panel AND AMA/Specialty Society Relative					
712	Value Scale Update Committee (RUC). The Council will guide AOA'S					
713	involvement in federal government regulations covering health care payment and					
714	delivery system reforms and will coordinate with the American Osteopathic					
715 716	Information Association (AOIA) and other AOA affiliates on relevant cross-cutting					
	issues. The Council also has the obligation to deliberate and recommend new					
717 718	policy and policy revisions to be adopted by the AOA Board of Trustees and the AOA House of Delegates. In addition, the Council is to serve as expert advisors					
718	to physicians and their practices on value-based payment arrangements.					
720	to physicialis and their practices on value-based payment analigements.					
	Membership Department					
721	Membership Department					
722	The Membership Department consists of the Duracus that have been established by the					
723 724	The Membership Department consists of the Bureaus that have been established by the House of Delegates or the Board of Trustees related to concerns of members and other					
724 725	6					
725 726	osteopathic physicians. The department has general governance authority over all Association activities directed toward the profession.					
726 727	השטטומווטון מטוויווופט טוופטופט וטיימוט ווופ אוטופטטטוו.					
141						

- 728 Bureau of Membership
- The Bureau of Membership makes recommendations to the Board of Trustees on
- 730 policies affecting AOA membership development including recruitment and retention.
- 731 Members of the Bureau evaluate trends, may conduct research to make policy
- recommendations, review exceptions to policy, review proposals for programs that
- provide tangible member benefits and encourage the membership focus of the
- 734 organization.
- 735
- 736 Bureau of Emerging Leaders (BEL)
- 737 The BEL is the representative body and advocate for all osteopathic medical students,
- osteopathic physicians in postdoctoral training and osteopathic physicians who are no
 more than five years past the completion of postdoctoral training.
- 740 The primary goals of the BEL are to:
- focus on issues important to their colleagues, and
- develop opportunities and resources that will further the AOA's strategic plan and engage students, postdoctoral trainees and new physicians in the osteopathic medical profession and the AOA.
- 745

These opportunities and resources may include events, online content, leadership roles,

- networking, mentorship, and community outreach. The BEL may create working groups.
 The BEL will focus on policy development to best represent their constituents and has
- three delegates, and three alternates attend the annual AOA House of Delegates.
- 750 Bureau of International Osteopathic Medicine (BIOM)
- 751 The BIOM promotes the highest standards of osteopathic medical education and
- practice throughout the world. The Bureau's vision is acceptance of osteopathic
- 753 medicine as a complete system of medical care throughout the world.
- 754 755

Department of Research and Public Health

756

The Department of Research and Public Health consists of the bureau established by
 the House of Delegates or the Board of Trustees that relate to issues of research and
 public health.

760

761 A. T. Still Foundation & Research Institute

The A.T. Still Foundation is a separate organization that funds research activities, rather
than conducting research. Research activities are restricted to clinical research and
research involving osteopathic manipulative treatment / osteopathic principles and
practices. The AOA appoints a committee that oversees the expenditure of funds from
the A.T. Still Foundation. Recommendations for funding may come from the Bureau of
Osteopathic Research and Public Health (BORPH) as well as from other committees of
the AOA. The A.T. Still Foundation generally meets once each year at the time of the

AOA Annual Meeting. The current Foundation has existed since 1935 and is the

- successor to the A.T. Still Postgraduate College of Osteopathy founded in 1906. Income
- for the Foundation is received through proceeds of the Burnett-Timken Trust.
- 772

773	Bureau of Osteopathic Research and Public Health (BORPH)
774	The Bureau of Osteopathic Research and Public Health (BORPH) directs all AOA
775	research and public health activities. These activities include managing all research
776	grant and fellowship programs, developing public health educational programs and
777	initiatives, and advising AOA on public health and research policy. Members also
778	participate in and encourage educational programs on important public health issues
779	and presentations on current clinical research and the research call for abstracts and
780	poster competition at OMED. The BORPH reports to the Board of Trustees.
781	
782	Non-Departmental Governance
783	
784	Committee on AOA Governance and Organizational Structure (CAGOS)
785	The CAGOS is responsible for review and recommendations on governance issues.
786	Additionally, the Committee reviews and makes recommendations with respect to the
787	internal structure of the AOA, including review of committee, bureau, and council
788	structure and the development of new Task Forces, Ad Hoc Committees and/or
789	committees.
790	
791	Subcommittee on AOA Constitution and Bylaws
792	The subcommittee is responsible for reviewing the wording of all proposed
793	amendments to the Constitution, Bylaws and Code of Ethics of the AOA as well
794	as the Administrative Guide. It reports on its recommendations to the Board of
795	Trustees through the Committee on AOA Governance & Organizational
796	Structure.
797	
798	Subcommittee on Basic Documents
799	The subcommittee is the Board's reference committee responsible for the review
800	of the basic documents and other pertinent documentation from the AOA's state,
801	specialty, and non-practice affiliates to ensure that they generally conform with
802	AOA governing documents. Additionally, the subcommittee works with all
803	members of the osteopathic family of organizations to resolve disputes that may
804	arise between affiliated organizations.
805	
806	Committee on Strategic Planning (CSP)
807	The CSP is not a standing committee of the AOA. It will be formed and engaged
808	whenever the AOA is involved in the strategic planning process. It is responsible for the
809	development of a three-year strategic plan to be reviewed and approved by the AOA
810	Board of Trustees and House of Delegates.
811	
812	Committee on Administrative Personnel (COAP)
813	The Committee on Administrative Personnel (COAP) is responsible for the business
814	aspects of AOA staffing and development. The committee approves the increasing of
815	staff complement, within budgeted parameters, and staff benefits (health insurance,
816	etc.). The COAP reports to the Board of Trustees.
010	

817

818 Committee on Awards

- 819 The AOA Committee on Awards is responsible for the determination of certain awards,
- 820 including the annual A.T. Still Memorial Lecturer and all other awards as recommended
- by the Committee to the AOA Board of Trustees.
- 822

823 Bureau of Osteopathic Specialists (BOS)

- The BOS, organized in 1939 to meet the needs resulting from the growth of
- specialization in the osteopathic profession, is the supervisory body for the approved
- specialty certification boards of the American Osteopathic Association. The BOS is
- dedicated to establishing and maintaining high standards of certification for osteopathic
- 828 and non-osteopathic physicians and seeks to ensure that the physicians it certifies
- 829 demonstrate expertise and competence in their respective areas of specialization. The
- 830 membership of the BOS consists of one representative from each of the AOA-approved 831 Specialty Certifying Boards as well as the members of the BOS Executive Committee,
- which consists of the BOS Chair, BOS Vice-Chair, Immediate Past BOS Chair, and the
- 833 Executive Committee members appointed by the AOA President. In addition to the BOS
- 834 Executive Committee, the BOS may have several specialized subcommittees that report
- to the full BOS on their actions and recommendations, including, but not limited to, the
- 836 BOS Appeal Committee, Certification Compliance Review Committee, Conjoint
- 837 Certification Oversight Committee, and the Standards Review Committee.
- 838
- 839 Ethics Review and Board Appeals Committee
- 840 The Ethics Review and Board Appeals Committee hears the appeals of AOA members
- 841 seeking a hearing of various educational issues. It also reviews complaints, researches
- questions of ethics and develops suggested policy for the Board of Trustees in order to develop and refine AOA policy to guide member physicians in their professional lives.
- The Committee's subcommittees report to the Board of Trustees.
- 845

846 <u>Ethics Review Subcommittee</u>

- The Ethics Review Subcommittee of the Ethics Review and Board Appeals
 Committee reviews complaints received regarding alleged ethical misconduct by
 AOA members and, where appropriate, recommends disciplinary action to the
 Board of Trustees. The subcommittee also researches questions of ethics in
 order to develop and refine AOA policy to guide member physicians in their
- professional lives. The subcommittee conducts up to four meetings each year on
 an as-needed basis to review complaints of ethical misconduct.
- 855 Board Appeals Subcommittee
- 856 This subcommittee of the Ethics Review and Board Appeals Committee serves to
- administer the final appeals process of the organization, making its
 recommendations to the Board of Trustees.
- 859
- 860 President's Advisory Council (PAC)
- 861 Each AOA president may select a committee of former AOA Presidents to provide
- advice and counsel concerning various issues that confront the AOA and the

- 863 osteopathic profession. Members of the PAC may attend deliberations of the Board of
- 864 Trustees, unless otherwise requested by the President.
- 865
- 866 House of Delegates Committee on Credentials
- 867 Under the AOA's Bylaws (Article V [House of Delegates], Section 3 [Committee on
- 868 Credentials]), the AOA President is responsible for selecting three or more members of
- the House of Delegates committee on credentials. The Committee is to be provided with
- a list of delegations invited to attend the House of Delegates and the number of
- delegates to which each such delegation is entitled. Additionally, the committee is
- responsible for reviewing credentials of delegates and reporting to the house
- 873 concerning the delegates entitled to be seated in the House of Delegates.

Certificate Number 21123 OF BICE OF THUE SECTRORETTANETY OF STRAVILE Coall to whom these presents Shall Come, Greeting: J. EDWARD J. HUGHES, Secretary of State of the State of Illinois, do hereby certify that the following and hereto attached is a true photostatic copy of the Certificate of Amendment to Articles of Association of THE AMERICAN OSTEHOPATHIC ASSOCIATION, filed July 25, 1938. Me original of which is now on file and a matter of record in this office. In Testimony Muercof, Thereto setimy hand and cause to be affixed the Great Seal of the State of Illinois, Doment the City of Springfield this 286h A.D.19 38, day of July ughes

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meeting aCABLARKARK of the body

I hereby certify that at a regular

STATE OF ILLINOIS,

County of Cook

authorized to adopt amendments to the Articles of Association of The American Osteopathic Association pursuant to the rules of the Association hold on duly 14 A.D.19 38 at tell o'deck is M. pursuant to the rules of said corporation, the following resolution grant alopted, in accordance with the By Laws of said

cornorution:

1101 JUL 25 '38 19

"Be it Resolved that Paragraph Number 2 of the Articles of Association be and the same is hereby amended by striking out the entire paragraph and substituting in lied, thereof the *******

following: The objects of this Association shall be to promote the public health, and the art and science of the osteo-pathic school of practice of the healing art;

By elevating and maintaining high standards of osteopathic education and by advancing the profession's knowledge of surgery, obstatrics, and the prevention, diagnosis and treatment of disease in general;

By stimulating original research and investiga-tion; and by collecting and disseminating the results of such work for the education and improvement of the profession and the ultimate benefit of humanity;

That the evolution of the osteopathic principles shall be an ever-growing tribute to Andrew Taylor Still, whose original researches made possible osteo-pathy as a science.

Be it Resolved that Paragraph Numbered 3 of the Articles of Association be and the same is hereby amended by eliminating the entire paragraph and inserting in lieu thereof the following:

'The management of the aforesaid Association shall be vested in a Board of twenty Trustees, the powers of which may be delegated to an Executive Committee pursuant to the rules of the Association.'"

R.C.ME Caughan SECHETARY

STATE OF ILLINOIS.

County of Cook

I. Arthur E. Allen

being duly sworn, declare on each that I am

PRESIDENT

President of the corporation mentioned in the foregoing certificate, and that the statements therein are true in substance and in fact.

July-

day of

In witness whereof, I have hereunto set my hand and caused the seal of

A. D. 19 35.

July

said Corporation to be affixed, this

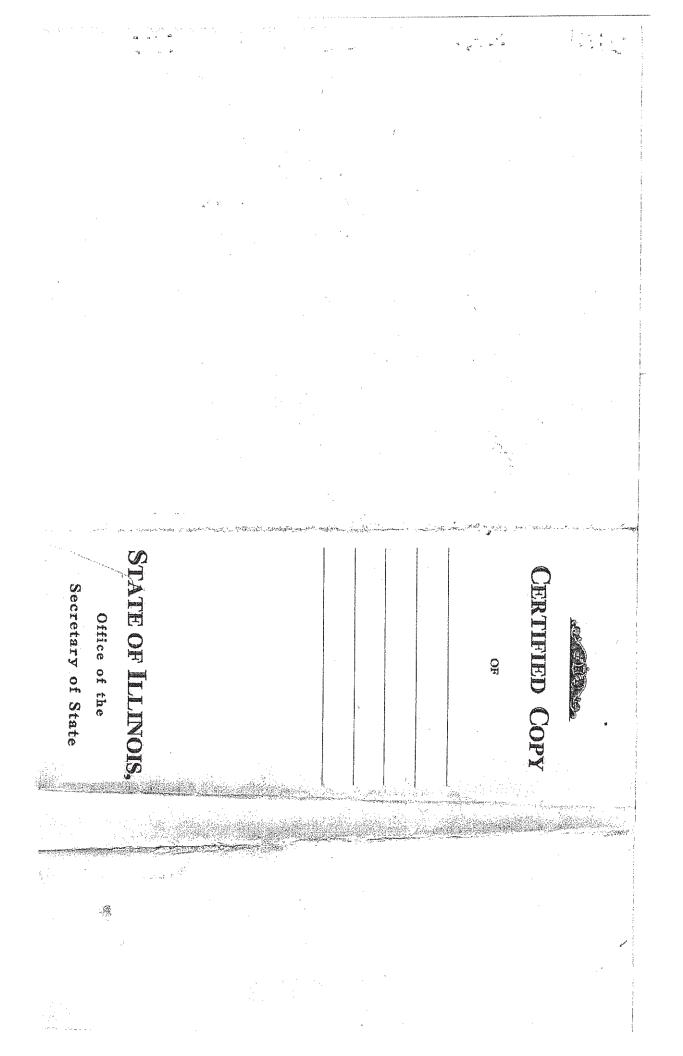
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arthur E. allen

lade day of Subscribed and awarn to before me this A. D. 19 39.

the top of the sublice Star Mary MY COMMISSION EXPINES IAN, 54 JUNI

19-19 Association amending object and changing number of directors The American Ostaopathia Box 1718 24 4 9 Amendment to Articles of Association · Fee for Filing \$1.00 CERTIFICATE OF a de la companya de l Companya de la company No 118811 A CONTRACTOR OF 5 sb -2





osteopathic.org

CONSTITUTION & BYLAWS JULY 2023

CONSTITUTION

Article I - Name

The name of this Association shall be the American Osteopathic Association.

Article II - Objectives

The objectives of this Association shall be to promote the public health, to encourage scientific research, and to maintain and improve high standards of Osteopathic medical education.

Article III - Divisional Societies

This Association shall be a federation of divisional societies organized within state or foreign country boundaries, or within the uniformed services of the United States, which may be chartered by this Association as provided by the Bylaws, and all such organizations or divisions now a constituent part of the American Osteopathic Association are declared to be chartered as federated units of this Association.

Article IV - Affiliated Organizations

Affiliate organizations may be organized in conformity with the Bylaws of the Association.

Article V - Membership

The membership of this Association shall consist of osteopathic and allopathic physicians and of such others who meet the requirements prescribed by the Bylaws of the American Osteopathic Association.

Article VI - House of Delegates

The House of Delegates shall be the legislative body of the Association, shall exercise the delegated powers of the divisional societies in the affairs of this Association, and shall perform such other functions as are set forth in the Bylaws.

Section 1-Composition

The House of Delegates shall consist of delegates elected by the divisional societies and other authorized units, the elected officers and trustees of the Association and of such other members as may be provided for in the Bylaws.

A. <u>Divisional Societies and Uniformed Services Society</u> Four hundred seventy-three delegate positions shall be allocated among the divisional societies for each of the states and the District of Columbia and the affiliated organization that represents osteopathic physicians serving in the uniformed services as follows: each divisional society and the uniformed services affiliate shall be entitled to one delegate and one alternate delegate. The remaining delegate positions shall be allocated among

divisional societies and the uniformed services affiliate based on the proportion of members of this Association who are located in the state represented by that divisional society or, in the case of the uniformed services divisional society, the proportion of members of this Association currently serving on active duty in the uniformed services of the United States. The allocation of additional delegates shall be recalculated each year.

- B. <u>Student Council Representation in Divisional Societies</u> Divisional societies shall be awarded one additional delegate as a student council representative for each college of osteopathic medicine accredited by the Commission on Osteopathic College of Accreditation (COCA) and located in the state represented by that divisional society, such student delegate to be elected according to the Bylaws of the American Osteopathic Association.
- C. <u>Specialty Colleges</u> Each AOA recognized Specialty College shall be represented by one delegate to be selected as provided in the Bylaws of the American Osteopathic Association.
- D. <u>Representation of Osteopathic Postdoctoral Trainees and New Physicians in Practice</u> Osteopathic physicians in postdoctoral training and new physicians in practice shall be represented by three delegates to be selected by the bureau of emerging leaders as provided in the bylaws of the American Osteopathic Association.

Section 2-Presiding Officer

The presiding officer of the House of Delegates shall be the Speaker and, in their absence or at their request, the Vice Speaker shall preside.

Article VII - Officers

Section 1-Elected Officers

The elected officers of this Association shall be the President, President-Elect, First Vice-President, Second Vice-President and Third Vice-President. The First Vice-President shall be a person who has had previous experience as a member of the Board of Trustees. The officers shall be elected annually by the House of Delegates for a term of one year, or until their successors are elected and installed. The President-Elect shall automatically succeed to the presidency upon their installation, during the annual meeting of the House of Delegates following their election to the office of President-Elect. In the case of the inability upon the part of the President to serve during the term of office for which they have been elected, and therefore the office becomes vacant, the President-Elect shall become President for the unexpired portion of the term and continue in that office for the term in which the President-Elect was originally elected. In such case, if the President-Elect is unable to serve for the full unexpired term of the president's office, then the responsibility of filling the office of President shall devolve upon the Board of Trustees.

Section 2-Administrative Officers

The administrative officers shall be Chief Executive Officer, a Chief Financial Officer, a General Counsel, and an Editor-in-Chief who shall be appointed by the Board of Trustees and employed to serve for such term as the Board shall define. The duties of these officers shall be those usual to such officers in their respective offices and such others as are set forth in the Bylaws. The Chief Executive Officer shall be the Secretary of the Association.

Article VIII - Board of Trustees and Executive Committee

Section 1-Board of Trustees

The Board of Trustees shall be the administrative and executive body of the Association and perform such other duties as are provided by the Bylaws. The Board of Trustees of this Association shall consist of twenty-eight members.

- A. Seven elected officers: The President, President-Elect, The Past Presidents for the preceding two years, First Vice-President, Second Vice-President, and Third Vice-President;
- B. Eighteen at-large trustees, six of whom shall be elected annually by the House of Delegates to serve for three years;
- C. One new physician in practice member elected by the House of Delegates to serve for a term of one year. Candidates for the new physician in practice position shall be osteopathic physicians who have completed their postdoctoral training within the past five years Q:\BCCs\Administrative\Administrative Guides\2023 and be nominated by the Bureau of Emerging Leaders. Candidates must be members in good standing of the AOA;
- D. One postdoctoral trainee, to include intern, resident, or a fellow, member elected by the House of Delegates to serve for a term of one year. Candidates for the postdoctoral trainee position shall be enrolled in an Accreditation Council for Graduate Medical Education (ACGME) internship, residency or fellowship. Candidates for the postdoctoral trainee position shall be nominated by the Bureau of Emerging Leaders. Candidates should be members in good standing of the AOA; and
- E. One student member elected by the House of Delegates to serve for a term of one year. Candidates for the student position shall be nominated, in alternating years, by the Council of Osteopathic Student Government Presidents (COSGP) and the Student Osteopathic Medical Association (SOMA).

Section 2-Executive Committee

The Executive Committee of this Association shall consist of the President, Presidentelect, Past Presidents for the preceding two years, the chairs of the Departments of Affiliate Relations, Finance, Education, Governmental Affairs, Membership, and Research and Public Health.

Section 3-Term Limit

For all trustees, with the exception of the President, President-Elect and the Past Presidents for the preceding two years, the aggregate terms of Office of Trustees shall be limited to twelve (12) years, with the exception that a trustee may complete the term in which twelve (12) years or more of service is completed. Time served as a student member, postdoctoral trainee member, or as new physician in practice member shall not be included in calculating the twelve years of service.

Article IX - Amendments

This Constitution may be amended by the House of Delegates at any annual meeting by a

two-thirds vote of the total number of delegates accredited for voting, provided that such amendments shall have been presented to the House and filed with the Chief Executive Officer at a previous annual meeting, who shall cause them to be distributed by US mail or electronic communication to each voting representative of the divisional society and affiliated organization representatives to the House of Delegates, posted on the AOA's website, and communicated in an official publication of the organization not less than two months nor more than four months prior to the meeting at which they are to be acted upon.

Article X - Gender Disclaimer

The American Osteopathic Association is open to all persons and does not discriminate against any persons because of their gender identity; therefore, the wording herein importing the masculine or feminine gender is inclusive of all gender identities and imports no such discrimination.

BYLAWS

Article I - Divisional, District and Affiliated Societies

Section 1-Divisional Societies

Any state, territorial, provincial or foreign osteopathic organization, or an organization of osteopathic physicians serving in the uniformed services of the United States, which may desire to become a divisional society of the American Osteopathic Association and be chartered as a divisional society of this Association, shall apply on a prescribed form, submit evidence that its Constitution, Bylaws, and Code of Ethics generally conform to those of this Association, and maintain an organizational structure which shall generally conform to that of this Association.

Upon such application, the Chief Executive Officer and the Board of Trustees shall investigate and, finding satisfactory proof, shall recommend to the House of Delegates that a charter be issued. The Association shall not issue such a charter to more than one divisional society in a given area.

Section 2-District Societies

Divisional societies may, within their own areas, organize district societies whose relationship to the divisional society shall in all respects conform to that existing between the division and this Association.

Section 3-Affiliated Organizations

Upon application from any organization for a charter as an-affiliated organization, the Board of Trustees and the Chief Executive Officer shall investigate such organization and, upon satisfactory proof of a general agreement in policy and governing rules with those of this Association, shall recommend to the House of Delegates the issuance of such a charter. The Association shall not issue a charter to any organization which duplicates the function or prerogatives of any presently affiliated organization. All organizations which have as their membership osteopathic physicians in good standing with the AOA, whether holding a current charter of affiliation or not, shall have as a medium of communication all publications of the AOA.

Section 4-Amendments to Governing Documents

Any amendments to the Constitution, Bylaws, Code of Ethics, and other governing documents, by whatever name called, of such a divisional society or affiliated organization shall be submitted to the Board of Trustees of the American Osteopathic Association, who shall review such amendments to determine whether, with the proposed amendments, the Constitution, Bylaws, Code of Ethics, or other governing documents would continue to conform generally to those of this Association and, with respect to the divisional society only, whether the organizational structure would continue to conform generally to those of this Association, the divisional society of this Association. Until such proposed amendments are given written approval of the Board of Trustees of the American Osteopathic Association, the divisional society or affiliated organization shall continue to operate under its previously approved Constitution, Bylaws, or other governing documents.

Article II – Membership

Section 1-Classification

The members of this Association shall be classified as follows:

a. Regular Members

- b. Honorary Life Members
- c. Life Members
- d. Associate Members
- e. Student Members
- f. International Physician Members
- g. Allied Members

Section 2-Membership Requirements

a. Applicants for Regular Membership

An applicant for regular membership in this Association shall be a graduate of a college of osteopathic medicine accredited by the American Osteopathic Associations Commission on Osteopathic College Accreditation or a graduate of an allopathic medical school accredited by the Liaison Committee on Medical Education or a graduate of a school of medicine located outside of the United States who completed residency training in a program accredited by the Accreditation Council on Graduate Medical Education and shall be eligible for licensure as an osteopathic or allopathic physician and/or surgeon or shall be in a training program, which is a prerequisite for licensure. Allopathic applicants should have an interest in promoting, advocating for and representing the interests of osteopathic medicine and osteopathic physicians.

Application shall be made on the prescribed form and shall be accompanied by payment of the appropriate dues amount.

Unless specifically noted, an applicant whose completed application and payment of appropriate dues has been received and processed shall be enrolled as a regular member. An applicant whose membership in this Association has previously been withdrawn for reasons other than non-payment of dues, or who has previously been convicted of a felony offense or whose license to practice has at any time been revoked, shall be further required to provide the application to and receive approval from the Bureau of Membership; such approval shall be made by the Bureau of Membership in its discretion.

An applicant whose license to practice is revoked or suspended, or who is currently serving a sentence for conviction of a felony offense, shall not be considered eligible for membership in this Association.

b. Honorary Life Member

Honorary life membership shall be conferred on each President upon conclusion of their term of office.

Such honorary life membership shall not exempt the holder thereof from the maintenance of regular membership in their divisional society or from assessments levied by this Association.

Honorary life membership may also be conferred by the Board of Trustees on a regular member who has been in good standing for 25 consecutive years immediately preceding, and who has rendered outstanding service to the profession at either the state or national level, or who is recommended for such a membership by official action of their divisional society and the Bureau of Membership. Such honorary life members shall have the privileges and duties of regular members including the payment of assessments levied by the Association, but shall not be required to pay dues.

c. Life Member

Life membership may be granted to any regular member who has reached the age of 70 years, or who has completed 50 years of osteopathic practice, whichever comes first, and who has been in good standing for 25 consecutive years immediately preceding. The Bureau of Membership may waive this requirement on individual consideration. Such members shall have the privileges and duties of regular members, but shall not be required to pay dues or assessments beginning the year in which the age of 70 is attained.

Life membership may also be granted by the Board of Trustees or its Executive Committee on recommendation of a divisional society, to any regular member who has become permanently totally disabled. Such members shall have the privileges and duties of regular members, but shall not be required to pay dues or assessments.

d. Associate Member

By specific action of the Board of Trustees, or its Executive Committee, associate memberships may be granted to the following:

Graduates of accredited schools of medicine, dentistry or podiatry holding teaching, research or administrative positions in AOA accredited healthcare facilities and colleges or who practice jointly with regular members of this Association;

Doctors of philosophy or education and other nondoctoral personnel holding teaching, research or administrative positions in AOA accredited healthcare facilities or colleges; administrative employees of this Association, affiliated organizations and divisional societies; and any other professionals as determined by the Board of Trustees, excepting osteopathic physicians and students in colleges of osteopathic medicine.

Such associate members shall be required to pay dues and assessments as determined by these Bylaws. They shall receive a complimentary online subscription to the Association's publications and shall be eligible for such benefits as are periodically established by the Board of Trustees.

Associate members shall not be eligible for membership in the House of Delegates or the Board of Trustees, or to hold any elective offices of this Association.

e. Student Member

Student membership status shall be granted to each osteopathic medical student currently enrolled in a college of osteopathic medicine accredited or pre-accredited by the Commission on Osteopathic College Accreditation.

At such time as a student member graduates from their osteopathic college, they shall automatically become enrolled as a regular member of the Association. Each student member shall receive such publications and other literature as may be directed by the Board of Trustees or the House of Delegates.

f. International Physician Members

By specific action of the Board of Trustees, or its Executive Committee, International Membership may be granted to the following allopathic physicians who are:

Graduates of schools of medicine located outside of the United States on an official list of schools recognized by the AOA, and holding a license for unlimited scope of medical practice including the authority to prescribe without limitation in their country of practice, and these allopathic physicians reside and practice outside of the United States and who

support the goals and objectives of the AOA and the AOA Code of Ethics.

Such International Physician Members will be required to pay dues and assessments as determined by these Bylaws. They shall receive a complimentary subscription to the Association's publications and shall be eligible for such benefits as are periodically established by the Board of Trustees.

International Physician Members shall not be eligible for membership in the House of Delegates or the Board of Trustees, or to hold any elective offices of this Association.

g. Allied Member

By specific action of the Committee on Membership, allied membership may be granted to those licensed allied healthcare providers who are currently employed, with an active member of the AOA, contribute to the practice of that member, are not eligible for any other category of membership and who support the goals and objectives of this Association.

Such allied members shall be required to pay dues and assessments as determined by these Bylaws. They shall be eligible for such benefits as may periodically be determined by the Board of Trustees.

Allied members shall not be eligible for membership in the House of Delegates or the Board of Trustees, or to hold any elective offices of this Association.

By specific action of the Committee on Membership, allied membership may be granted to allopathic physicians holding an MD degree and licensed to practice in the United States who support the AOA mission and subscribe to its Code of Ethics.

Individuals who have received their training and/or degree in osteopathic medicine from a school that is not accredited by the Commission on Osteopathic College Accreditation (COCA) are not eligible for membership in the AOA.

Section 3-Disciplinary Action

The membership of any member of the Association who, in the opinion of the Executive Committee of the Association, purposely or persistently violates the established policy of the Association or who seeks to undermine the unity of the osteopathic profession or of any of its divisional societies or affiliated organizations may be revoked, suspended, or placed on probation by action of the Executive Committee of the Association, after the member has been given notice and an opportunity to be heard before such action is taken. Any individual whose membership has been so revoked, suspended, or placed on probation shall have the right of appeal to the Board of Trustees of the AOA at its next regular meeting, requesting a review of the action of the Executive Committee -, athe Board of Trustees, on review, may in its discretion take such action in regard thereto as it deems appropriate.

Article III - Dues and Assessments

Section 1-Dues

a. Members

The annual dues of all members of the Association (except for allied members discussed in Article III, Section 1(c) and student members discussed in Article III, Section 1(d) shall be determined by the House of Delegates. The Board of Trustees shall be responsible for administration of dues, including determination of the membership year, the schedule for payment of dues, and the suspension of membership for nonpayment of dues. A suspended member may be reinstated upon payment of dues and assessments, provided such payment is received prior to the end of the membership year.

b. Hardship Cases

Upon recommendation of the Bureau of Membership, the Board of Trustees, or its Executive Committee, may approve a policy that identifies circumstances under which the AOA will remit a part or all of the annual dues of a member in good standing who, due to a physical or mental disability maintains a limited practice or is unable to practice.

c. Allied Members

The annual dues rates for allied members shall be determined and administered by the Board of Trustees.

d. Student Rate

Student members shall not be liable for dues or any assessment.

e. International Physician Members

The annual dues rates for International Physician Members shall be determined and administered by the Board of Trustees.

Section 2-Assessments

To meet emergencies the Board of Trustees may levy such assessments as may be necessary, provided that the total of such assessments in any one-year shall not exceed the amount of the annual dues. Failure to pay such assessments shall incur the same penalty as failure to pay dues. Those dropped from membership for nonpayment of dues during the fiscal year in which an assessment is levied shall be required to pay the assessment prior to reapplying for membership.

Section 3-Refunding Dues

No dues will be refunded if a membership is terminated for cause as provided in Article II, Section 3 or Article VII, Section 1, Part H of these bylaws or because of resignation.

Article IV - Code of Ethics

Section 1

The House of Delegates shall establish a Code of Ethics for the information and guidance of the members. Members of the Association, in their daily conduct, shall comply with the provisions of the Code of Ethics. The Code shall cover duties of physicians to patients, duties of physicians to other physicians and to the profession at large, and responsibilities of physicians to the public. The House of Delegates shall not adopt any provisions of the Code of Ethics, which may be in conflict with the Constitution or Bylaws of the Association.

Section 2

The Code of Ethics may be amended by the House of Delegates at any annual meeting by two-thirds vote of the total number of delegates accredited for voting, provided a copy of the proposed amendment is deposited with the Chief Executive Officer at least 90 days before the annual meeting at which it is to be voted upon.

It shall be the duty of the Chief Executive Officer to have the proposed amendment distributed by electronic communication or first class mail, postage prepaid, to each divisional society and affiliated organization entitled to send voting representatives to the

House of Delegates, posted on the AOA's website, and communicated in an official publication of the Association not later than one month before the annual meeting at which the amendment is scheduled for consideration.

The American Osteopathic Association has formulated this Code to guide its member physicians in their professional lives. The standards presented are designed to address the osteopathic physician's ethical and professional responsibilities to patients, to society, to the AOA, to others involved in healthcare and to self.

Further, the American Osteopathic Association has adopted the position that physicians should play a major role in the development and instruction of medical ethics.

Article V - House of Delegates

Section 1-Certification of Delegates and Alternates

a. Divisional Societies

The Chief Executive Officer of this Association shall furnish to the secretary of each divisional society, 75 days before the first day of the annual meeting of the House of Delegates, a statement of the number of regular members of this Association located in the area represented by that divisional society or, in the case of the uniformed services divisional society, the number of regular members of this Association currently serving in the uniformed services of the United States.

Based on that statement, each divisional society shall select, in a manner prescribed by its Constitution and Bylaws, the number of delegates (and their alternates) to the House of Delegates of this Association to which it is entitled under the provisions of the Constitution of the American Osteopathic Association. Delegates and alternates must be regular or student members in good standing of this Association and of the divisional societies, which they represent. Delegates (and their alternates) shall serve during the annual meeting of the House of Delegates and during the interim between annual meetings or until their successors are elected. The secretary of each divisional society shall certify its delegates and alternates to the Chief Executive.Officer of this Association in writing at least 30 days prior to the first day of the annual meeting of the House of Delegates.

In the event that any state, provincial or foreign osteopathic association does not become a chartered divisional society, the regular members of this Association in that jurisdiction, at a regularly called meeting, may elect or appoint one delegate (and alternate) as their representative in the House, and such delegate (and alternate) shall be accredited in the same manner and have the same privileges as those of a divisional society.

b. Specialty Colleges

Each AOA recognized specialty college shall select one delegate and at least one alternate to the AOA House of Delegates in a manner prescribed in its Constitution and Bylaws. No specialty college delegate or alternate shall concurrently serve as a delegate for a divisional society at the AOA's House of Delegates. The Secretary of each specialty college shall certify the name of its delegate and alternate to the Chief Executive Officer of the AOA at least 30 days prior to the first day of the annual meeting of the AOA House of Delegates. Each delegate and alternate must be a member in good standing of this Association and their specialty college.

Section 2-Voting

Each delegate shall have one vote in the House.

Section 3-Committee on Credentials

The Committee on Credentials shall consist of three or more members appointed by the President and it shall be the duty of the Committee to receive and validate the credentials of the delegates to the House and to report all delegates entitled to be seated in the House. The Chief Executive Officer shall furnish the Committee on Credentials a list showing the number of delegates to which each divisional society is entitled. In case any organization has selected more than its legal representation, the Chief Executive Officer shall drop surplus names from the list, beginning at the bottom, and shall notify the divisional society of this action.

Section 4-Seating of Delegates

Delegates having been seated shall remain the accredited delegates throughout the meeting. In the event that an accredited delegates have failed to qualify and assume their seat when the House convenes on the second day of the meeting, their accredited alternates may be seated. If Delegates who, after having been seated, are unable to be present on account of physical disability or other cause acceptable to the House, their alternates may be seated for that roll call period and shall continue as delegates until the previously seated delegate shall return for duty at a subsequent roll call. In that case the alternate delegates who have been seated may, by direction of the House, be dropped from the roll and the previously seated delegates shall return to their seat in the House.

Section 5-Annual Meeting

The annual meeting of the House of Delegates shall be held during June, July or August, and separate from the annual convention or clinical assembly of the Association, upon call of the President. Special sessions of the House of Delegates may be called by the President. The delegates shall be given at least two weeks' notice and the object or objects shall be stated in the call of such special meeting.

Section 6-Presiding Officer

The Speaker of the House of Delegates shall be its presiding officer. The Vice Speaker shall preside over the House of Delegates in the absence of or at the request of the Speaker and assume all duties of the Speaker.

Section 7-New Business

No new business shall be introduced on the last day of the meeting of the House of Delegates except by a two-thirds consent of those members present, provided two-thirds of the seated delegates are in attendance.

Section 8-Quorum

One-half of the accredited delegates of the House shall constitute a quorum.

Section 9-Governing Rules

The meetings of the House of Delegates and of all other bodies of this Association shall be governed by Robert's Rules of Order Newly Revised, except in such instances as are specifically provided for in the Constitution and Bylaws of the Association or in the order of business which may be adopted from time to time. The order of business and any special rules adopted at the beginning of the meeting shall govern the procedure unless unanimously suspended.

Section 10-Representation of Student Councils

The student council of each accredited college of osteopathic medicine, each branch campus and each additional location may be represented in the House of Delegates by its president (and such president's alternate elected by such student council) as a member of the delegation of the divisional society representing the state in which such college of osteopathic medicine and branch campus is located. Each such student delegate shall be accredited in the same manner and have the same privileges as the other members of the divisional society delegation; however, the chief administrative officer of each accredited college of osteopathic medicine and each branch campus shall certify the student council president and alternate to the Chief Executive Officer of this Association in writing or by electronic communication at least 30 days prior to the first day of the annual meeting of the House of Delegates and such Chief Executive Officer shall forthwith similarly certify each student council president and alternate to the secretary of the appropriate divisional society.

Section 11-Representation of Osteopathic Postdoctoral Trainees and/or New Physicians in Practice

Osteopathic postdoctoral trainees and/or new physicians in practice may be represented in the House of Delegates by three individuals who, at the time of the annual meeting, shall be enrolled in postdoctoral training programs or currently a new physician in practice as defined by the association. At least one of the three individuals shall be enrolled in an accredited fellowship training program and at least one of the three individuals shall be enrolled in an accredited residency program. The three individuals and their alternates shall be selected by vote of the AOA's Bureau of Emerging Leaders (BEL). The delegates (and alternate delegates) selected by the BEL shall serve as the representatives of osteopathic postdoctoral trainees and new physicians in practice. Individuals serving as a BEL delegate shall not concurrently serve as a delegate for any other group at the AOA House of Delegates to the Chief Executive Officer of the AOA in writing or by electronic communication at least 30 days prior to the first day of the annual meeting of the AOA House of Delegates. Each delegate and alternate must be a member in good standing of this Association.

Section 12-Representation of Student Osteopathic Medical Association

The Student Osteopathic Medical Association (SOMA) may be represented in the House of Delegates by one member of the SOMA Board selected by vote of the SOMA Board (or such SOMA member's alternate, who shall also be a member of the SOMA Board selected by the SOMA Board). No SOMA delegate or alternate shall also be a member of a divisional society's delegation representing the state in which such SOMA Board member's osteopathic college is located. The SOMA delegate shall be accredited in the same manner and have the same privileges as the other members of the divisional society delegation; however, the Chief Administrative Officer of SOMA shall certify the SOMA delegate and alternate to the Chief Executive Officer of this Association in writing or by electronic communication at least 30 days prior to the first day of the annual meeting of the House of Delegates.

Article VI - Elections

Section 1-Qualifications

Except where positions are designated as public members Membership in both the AOA and a divisional society shall be a requisite for qualification for any officer or for

any member of any department, division, bureau or committee of the Association, however selected, if the incumbent shall be an osteopathic or allopathic physician.

Section 2-Nominations

Nomination of all officers and trustees of this Association, and nomination of the Speaker and Vice Speaker of the House of Delegates, excepting nomination of those otherwise provided for in the Constitution, shall be a regular order of business in the House of Delegates at the annual meeting of the House. Nominations may be made from the floor immediately preceding the balloting. Nominating speeches shall not exceed two minutes.

Section 3-Method of Election

Election of such officers and trustees as are elected by the House of Delegates shall take place during the last day of the annual meeting. All elections shall be by ballot except as hereinafter provided in this section and a majority of all votes cast shall be necessary to elect. If there shall be but one nominee for a given office or trusteeship it shall be the duty of the secretary to cast the elective ballot for that nominee. The Speaker and Vice Speaker of the House shall be elected to serve for one year or until their successors are elected and installed.

Section 4-Installation

The AOA President and President-elect shall be installed in their positions during the Annual Meeting at a time to be designated in the official meeting agenda. All other officers-elect and trustees-elect shall be installed as the final order of business and shall assume the authority of their respective offices upon adjournment of the meeting.

Article VII - Board of Trustees

Section 1-Duties

The Board of Trustees shall:

- a. Direct the management of the affairs of the Association between annual meetings. It shall meet coincident with the annual meeting of the House of Delegates and at other times on call of the President, shall make all arrangements for the annual meetings, shall appoint all standing and special committees not otherwise provided for in these Bylaws, and may fill by appointment any vacancy occurring in its own membership or any other elective office until the time of the next meeting of the House of Delegates. A quorum of the Board shall be a majority of the members thereof.
- b. Appoint a Chief Executive Officer, a Chief Financial Officer, a General Counsel, and the Editor-in-Chief and shall fix the amount of their salaries and the length of their terms of office. It shall fix the duties of the Chief Executive Officer, Chief Financial Officer, General Counsel, the Editor-in-Chief and all other officials, committees, departments and bureaus necessary to the proper execution of the policies of the Association and not fixed by these Bylaws.
- c. Have the responsibility of management of the finances of the Association and shall authorize and supervise, the House of Delegates concurring with, the annual budget for the fiscal year. It shall appoint a certified public accountant to audit the financial records of the Association and certify to the accuracy of the statement of financial condition of the Association to be reported at the annual meetings.

No appropriation shall be made by the House of Delegates except upon recommendation of the Finance Committee approved by the Board of Trustees,

and all resolutions, motions or otherwise, having for their purpose the appropriation of funds, shall first be referred without discussion to the Finance Committee of the Board of Trustees. An adverse ruling on such motions may be overruled by a three-fourths vote of the House of Delegates.

- d. Provide for the publication of an official journal of the Association and such other publications as are deemed necessary or shall be directed by the House of Delegates.
- e. Maintain and revise the Administrative Guide annually. The general purpose of this manual shall be to provide a handy reference book of concise statements of the duties of all officials, committees, departments, bureaus and employees of the Association, to the end that there shall be no conflict of jurisdiction or duplication of effort. Copies of such Guide shall be published on the Association's website and thereby made available to each divisional society and affiliated organization as well as officers of the American Osteopathic Association and other groups or individuals as directed by the Board of Trustees of the Association.
- f. Establish such departments, committees, bureaus, councils, and commissions, and authorize the president's creation of such task forces, as shall be necessary to further the policies of the Association and determined by the House of Delegates and shall determine the duties and powers of such departments, committees, bureaus, councils, commissions and task forces.
- g. Approve from its own membership, based on the President's appointment, the chairs of the departments. The department chairs shall direct the activities of their respective departments. The Board shall also approve, based on the President's appointment, the members of the various committees, bureaus, councils, commissions and task forces under the departments.
- Decide finally all questions of an ethical or judicial character. It shall have h. investigated by the Ethics Review and Board Appeals Committee all charges or complaints of violation of the Constitution, Bylaws, or of grossly unprofessional conduct of any member. The Board shall have the power to censure, place on probation for not exceeding a three-year period, suspend for not exceeding a three-year period or expel a member, as the findings warrant. A member may be cited to appear before it by the Board of Trustees or the Ethics Review and Board Appeals Committee to answer charges or complaints of unethical or unprofessional conduct. Upon the final conviction of any member of an offense amounting to a felony under the law applicable thereto, or the final revocation of, or suspension of, their license to practice in a state on the grounds of having committed a violation of a disciplinary provision of the licensing law by a duly constituted state licensing agency, or the voluntary surrender of their license while under charges of having committed said violation, such member shall automatically be deemed expelled from membership in this Association; a conviction shall be deemed final for the purposes hereof when affirmed by an appellate tribunal of final jurisdiction or upon expiration of the period allowed for appeal. The Bureau of Membership shall be granted the authority to restore to membership a doctor whose license was revoked, and later retroactively reinstated by their licensing board.
 - If, because of a breach of the Code of Ethics, a member shall have been

suspended, or expelled from a divisional society or affiliated organization by proper action of such divisional society or affiliated organization, the Board of Trustees of this Association shall review the record of such decision. The decision may first be referred to the Ethics Review and Board Appeals Committee for recommendations. If the Board shall concur in the action of the divisional society or affiliated organization, such member shall be suspended for the same period of time or expelled from this Association upon the same basis as in the decision of the divisional society or affiliated organization. The Board is authorized to adopt and amend from time to time, in the manner directed by the Board, a Guide for Administrative Procedure regulating the procedure applicable to matters involving violations of the Code of Ethics.

Section 2-Appeal

A minority of one-third or more members of the Board of Trustees present at any session may appeal to the House of Delegates from the decision of the majority on any question at the current meeting.

Section 3-Executive Committee

The Executive Committee shall transact the business of the Board of Trustees between meetings.

Section 4-By-Mail Vote

Between meetings of the Board of Trustees and of the Executive Committee, a by-mail vote, or vote by other means of electronic communications, on any urgent matter may be taken of the members of the Board of Trustees, or Executive Committee, if a consent in writing setting forth the action so taken shall be signed by all of the trustees or members of the Executive Committee entitled to vote with respect to the subject matter thereof, any such vote to be entered into the records at the next meeting of the Board.

Section 5-Indemnification

Each trustee, officer, bureau member, council member, committee member, or employee of the association shall be held harmless and indemnified by the association against all claims and liabilities and all costs and expenses, including attorneys' fees and defense costs, reasonably incurred or imposed upon such person in connection with or resulting from any action, suit or proceeding, or the settlement or compromise thereof, to which such person may be made a party by reason of any action taken or omitted to be taken by such person as a trustee, officer, council member, committee member, employee or agent of the association, in good faith. This right of indemnification shall inure to such person whether or not such person is a trustee, officer, bureau member, council member, committee member, or employee at the time such liabilities, costs or expenses are imposed or incurred and, in the event of such person's death, shall extend to such person's legal representatives.

To the extent available, the Board of Trustees may authorize the Association to purchase and maintain insurance on behalf of any person who is or was a trustee officer, bureau member, committee member, council member or employee of the Association or is or was serving at the request of the Association as a trustee, director, officer, employee, or agent of another corporate entity controlled by the Association against any liability asserted against them and incurred by them in any such capacity, or arising out of their status as such, whether or not the Association would have the authority or power to indemnify them against such liability under the provisions of this section.

Article VIII - Duties of Officers

Section 1-President

The President shall be the chairman of the Board of Trustees and of the Executive Committee and shall perform the duties usually pertaining to the office. The President shall nominate, subject to approval by the Board of Trustees, all appointive officers, unless otherwise specified in the Bylaws and in accordance with the directives contained in the Administrative Guide or as established by the Board of Trustees or the House of Delegates.

Section 2-President-elect

The President-elect shall perform the duties of the office of the President in the absence of or at the request of the President.

Section 3-Vice-Presidents

The Vice-Presidents, in the order of their designation and in the absence or at the request of the President and President-elect, shall perform the duties of the office of the President.

Section 4-Immediate Past President/Treasurer

The immediate past president shall serve as chair of the Finance Committee and hold the office of treasurer and shall perform, or cause to be performed, the functions usually pertaining to that office.

Section 5-Speaker/Vice-Speaker of the House of Delegates

The Speaker or the Vice-Speaker of the House of Delegates shall perform such duties as custom and parliamentary usage require. The Speaker shall appoint reference committees of the House to perform functions for which they are created subject to the approval of the House and shall have such other privileges and duties as may be assigned to them by the House of Delegates, which privileges and duties shall not be in conflict with the privileges and duties assigned by the Constitution and Bylaws to other officers of the Association. The Vice-Speaker of the House of Delegates shall assume the duties of the Speaker in their absence or at their request.

Section 6-Chief Executive Officer

The Chief Executive Officer shall:

- a. Be the chief administrative officer of the Association and the executive and recording secretary of the Association. The Chief Executive Officer shall counsel with the other administrative officers and with the heads of departments in the central office to produce the greatest possible cooperation and efficiency in the conduct of the affairs of the Association under the President and the Board of Trustees and cooperate with the chairmen of various agencies of the Association in the execution of the policies of the Association as outlined by the House of Delegates. It shall be the duty of the Chief Executive Officer to coordinate the work performed by the various departments, bureaus, and committees of the Association.
- b. Direct the joint activities of the Association and the divisional societies as provided by the Bylaws, and may select one or more of the trustees or like officers of the divisional societies, to assist them in this work in their respective areas.
- c. Be responsible for the correspondence of the Association and shall keep accurate

record of the proceedings of the House of Delegates and the Board of Trustees. Be responsible for the supervision of assistance to the divisional societies in all matters according to the policies laid down by the Association and for the supervision of the execution of plans of the Association with regard to colleges, affiliated organizations and campaigns.

- d. Keep on file an accurate record of all transactions of the office, which shall at any time be subject to examination by the President or Board of Trustees, shall make an annual report to the House of Delegates and Board, and shall perform such other duties as are prescribed by the Board not in conflict with the Constitution and Bylaws of this Association.
- e. Be the statistical officer of the Association, and shall have charge of the archives, including legal, historical and scientific records of value to the Association.
- f. Be authorized to provide such assistance as is necessary for the proper conduct of the central office, subject to the directives of the Board of Trustees, and at the expiration of their term shall deliver to their successors all property and papers pertaining to his office.

Section 7 - Chief Financial Officer

The Chief Financial Officer shall:

- a. Have charge of the funds and assets of the Association, cooperate with the Chief Executive Officer under the direction of the Board of Trustees, and disburse such funds only in the manner prescribed by the Board of Trustees.
- b. Be responsible for the collection of dues and assessments as provided in these Bylaws; shall cooperate with like officers of the divisional societies and affiliated organizations and may delegate them to assist them in their respective societies.
- c. Keep on file accurate records of the transactions of the office, which shall at all times be subject to examination by the Board of Trustees. The Chief Financial Officer shall prepare reports quarterly for the Board of Trustees and annually for the House of Delegates and the Board, and at the expiration of the Chief Financial Officer's employment. The Chief Financial Officer shall also deliver to their successors or to the Board, or their assigned agent, all monies, records and other property of the Association subject to their jurisdiction. He shall perform such other duties as may be prescribed by the Board consistent with the Constitution and Bylaws of the Association.
- d. Be provided with such assistance as is necessary to the proper conduct of the office, subject to the directives of the Board of Trustees and the Chief Executive Officer.

Section 8-General Counsel

The General Counsel shall:

- a. Be the chief legal officer of the Association, responsible for oversight and management of all legal services provided to the Association, its trustees, officers and staff to ensure protection of the Association's legal rights and maintenance of its operations consistent with the limits established by law.
- b. Provide legal advice and guidance to the trustees, officers, and staff, bureaus, councils, task forces, commissions and committees of the Association on the legal implications of matters relevant to the Association, including compliance with federal, state, and local laws and regulations applicable to a tax-exempt, not-for-

profit membership organization and adherence to internal organizational policies and procedures.

- c. Draft and review contracts and other legal documents, policies and procedures; research pertinent to legal issues; prepare written and oral opinions and position statements on issues identified by the Association's trustees, officers, staff, bureaus, councils, task forces, commissions and committees;
- d. Represent or coordinate the representation of the Association in judicial and administrative proceedings; and
- e. Select and retain outside counsel, as required, to obtain legal opinions or to handle claims and litigation. Supervises legal work of other Association attorneys and outside counsel.

Section 9-Editor-in-Chief

The Editor-in-Chief shall:

- a. Have the editorial direction, in accordance with the established policies of the Board of Trustees and House of Delegates, of *The Journal of Osteopathic Medicine*, other periodical publications of the Association under the general supervision of the Chief Executive Officer and shall cooperate with all departments of the central office.
- b. Be provided with such assistance as is necessary to the proper conduct of his office, subject to the directives of the Board of Trustees through the Chief Executive Officer.

Article IX - Departments, Bureaus, and Committees

The Board of Trustees and House of Delegates, consistent with the powers given to it by these Bylaws, shall establish and determine the duties of departments, bureaus, councils, commissions, committees, and task forces necessary to further the policies of the Association. The Association's departments shall include the Departments of Affiliate Relations, Finance, Education, Governmental Affairs, Membership, and Research and Public Health. The activities of all departments, bureaus and committees shall, so far as possible, be executed in close cooperation with the Chief Executive Officer. Upon the expiration of the terms of office of chairs and members of the departments, bureaus, or committees, all records of the same shall be delivered by the chairs to the Chief Executive Officer. All employed staff of departments, bureaus, and committees in the offices shall be under the jurisdiction of the Chief Executive Officer.

Except where positions are designated for public members (i.e., non-physicians serving on a bureau or committee who are intended to represent and speak for the interests of the public and consumers of osteopathic medical services), membership in both the AOA and a divisional society shall be a requisite for qualification for service on a bureau, council, or committee of the Association, however selected, if the incumbent shall be an osteopathic or allopathic physician.

Article X - Conventions and Meetings

Whenever referred to in this Constitution and Bylaws, the words annual meeting shall refer to the annual meetings of the Board of Trustees or of the House of Delegates, respectively, and the words annual convention or clinical assembly shall refer to the annual clinical assembly of the Association.

Section 1-Annual Clinical Assembly

The annual clinical assembly shall be held at such time and place as may be determined by the Board of Trustees, provided, however, such action may be changed by the House of Delegates by a two-thirds vote of the total number of delegates accredited for voting.

Section 2-Annual Meetings

The annual meetings of the Board of Trustees shall be held at such time and place as may be determined by the Board of Trustees, provided, however, such action may be changed by the House of Delegates by a two-thirds vote of the total number of delegates accredited for voting.

Article XI – Amendments

Section 1-Bylaws

These Bylaws may be amended at any annual or special meeting of the House of Delegates by a two-thirds vote of the total number of delegates accredited for voting, provided that the amendment shall have been filed with the Chief Executive Officer at least two months before the meeting at which the amendment is to be voted upon. Upon receiving a copy of the amendment, it shall be the duty of the Chief Executive Officer to use reasonable efforts to distribute it by U.S. mail or electronic mail, to all AOA members and each divisional society and affiliated organizations entitled to send voting representatives to the House of Delegates, posted on the AOA's website, and published in an official publication of the Association at least one month before the meeting. The Board of Trustees may revise the proposed amendment if necessary to secure conformity to this Constitution and Bylaws and shall then refer it to the House for final action not later than the day prior to the end of the meeting.

Section 2-Articles of Incorporation

The Articles of Incorporation of this Association may be amended by the adoption of a resolution by the Board of Trustees setting forth the proposed amendment and directing that the amendment be submitted to a vote at a meeting of the House of Delegates, which may be either an annual or a special meeting. Written or printed notice setting forth the proposed amendment or a summary of the changes to be effected thereby shall be posted on the AOA's website and delivered not less than two weeks nor more than 40 days before the date of the meeting, either personally or by mail, by or at the direction of the President, or the Chief Executive Officer, or the officers or persons calling the meeting, to each delegate entitled to vote at such meeting.

Written or printed notice shall further be published in an official publication of the Association and sent in an official email communication to all AOA members not less than two weeks or more than 40 days before the date of the meeting. The proposed amendment shall be adopted upon receiving at least two-thirds of the votes entitled to be cast by the total number of delegates accredited for voting.

Article XII - Gender Disclaimer

The American Osteopathic Association is open to all persons and does not discriminate against any persons because of their gender identity; therefore, the wording herein importing the masculine or feminine gender is inclusive of all gender identities and imports no such discrimination.

AMERICAN OSTEOPATHIC ASSOCIATION

CODE OF ETHICS (2016)

The American Osteopathic Association (AOA) Code of Ethics is a document that applies to all physicians who practice osteopathically throughout the continuum of their careers, from enrollment in osteopathic medical college/school through post graduate training and the practice of osteopathic medicine. It embodies principles that serve as a guide to the prudent physician. It seeks to transcend the economic, political, and religious biases, when dealing with patients, fellow physicians, and society. It is flexible in nature in order to permit the AOA to consider all circumstances, both anticipated and unanticipated. The physician/patient relationship and the professionalism of the physician are the basis for this document.

The AOA has formulated this Code to guide its member physicians in their professional lives. The standards presented are designed to address the osteopathic physician's ethical and professional responsibilities to patients, to society, to the AOA, to others involved in healthcare and to self.

Further, the AOA has adopted the position that physicians should play a major role in the development and instruction of medical ethics.

Section 1

The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. Information shall be divulged by the physician when required by law or when authorized by the patient.

Section 2

The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

Section 3

A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept patients for reasons of discrimination, including, but not limited to, the patient's race, creed, color, sex, national origin sexual orientation, gender identity, or disability. In emergencies, a physician should make her/his services available.

Section 4

A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient's care when she/he withdraws from the case so that another physician may be engaged.

Section 5

A physician should make a reasonable effort to partner with patients to promote their health and shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

Section 6

The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by their rules and regulations.

Section 7

Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities which are false or misleading.

Section 8

A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless he is actually licensed on the basis of that degree in the state or other jurisdiction in which she/he practices. A physician shall designate her/his professional degree in all professional uses of her/his name. Indications of specialty practice, membership in professional societies, and related matters shall be governed by rules promulgated by the American Osteopathic Association.

Section 9

A physician should not hesitate to seek consultation whenever she/he believes it is in the best interest of the patient.

Section 10

In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

Section 11

In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable hospital rules or regulations.

Section 12

Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

Section 13

A physician shall respect the law. When necessary a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

Section 14

In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

Section 15

It is considered sexual misconduct for a physician to have sexual contact with any patient with whom a physician-patient relationship currently exists.

Section 16

Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

Section 17

From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment or their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner.

Section 18

A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

Section 19

When participating in research, a physician shall follow the current laws, regulations and standards of the united states or, if the research is conducted outside the united states, the laws, regulations and standards applicable to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.

AOA INTERPRETS SECTIONS OF CODE OF ETHICS (1996 - PRESENT)

Interpretation of Section 3

This section notes that a physician-patient relationship must be founded on mutual trust, cooperation and respect - a patient must have complete freedom to choose his or her physician, and a physician must have complete freedom to choose patients whom he or she will serve.

Section 3 does not address a patient's discriminating against a physician based on the physician's race, creed, color, sex, national origin, sexual orientation, gender identity or disability; and a patient may express a desire to not be treated by a particular physician or by a physician with certain characteristics.

Therefore, the AOA interprets section 3 of its code of ethics to permit but not require an osteopathic physician to treat a patient when the physician reasonably believes the patient is experiencing a life- or limb-threatening event, even though the patient may have previously expressed a desire to not be treated by a physician based on the physician's race, creed, color, sex, national origin, sexual orientation, gender identity or disability. (July 2014)

Interpretation of Section 7

This section is designed to discourage practices, which would lead to false, misleading or deceptive information being promulgated.

Section 7 does not prohibit advertising, so long as advertising is designed as making proper factual information available to the public. People seeking healthcare are entitled to know the names of osteopathic physicians, the types of practices in which they engage, their office hours, place of their offices, and other pertinent factual information. On the other hand, the public should be protected

from subjective advertising material designed to solicit patients, which is essentially misleading. Such material would include attempts to obtain patients by influence or persuasion, employing statements that are self-laudatory and deceptive; the result of which is likely to lead a patient to a misinformed choice and unjustified expectations. (July 1985)

Guide to Section 8

This guide applies to AOA members' professional (as opposed to organizational) stationery, office signs, 2 telephone directories, and to other listings referred to by the general public. (July 2016)

Part I-Indications of Specialty Practice

1. Osteopathic physicians who are certified by the AOA or who devote themselves exclusively to a specialty may designate such specialty in one of the following ways: Practice Limited to Internal Medicine (or other practice area), or Internal Medicine.

The listing of terms in each of the two categories is illustrative and should act as a guideline.

Part II-Membership in Professional Organizations

The public has little or no knowledge of what membership in various professional organizations entails. Accordingly, use of the names or initials of such organizations tends to indicate unusual professional competence, which is usually not justified. Professional stationery should contain no indication whatever of membership in professional organizations or of any present or past office held in any professional organization.

Designation of membership in various professional organizations is permissible on organizational stationery (AOA, divisional and district society, practice organizations, etc.) provided the organizational stationery is not used in practice correspondence.

Part III-Osteopathic Identification

The following, in order of preference, are considered proper on practice stationery and office signs:

- 1. John Doe, DO
- 2. John Doe, Osteopathic Physician & Surgeon
- 3. John Doe, Doctor of Osteopathy

The following are not considered proper on practice stationery or office signs:

- 1. Dr. John Doe (this is considered improper even if the doctor signs his name John Doe, DO). The osteopathic identification should be printed.
- 2. Dr. John Doe, Specialist in Osteopathic Medicine. The term specialist should be avoided in this circumstance.

Part IV-Degrees (other than DO)

It is strongly recommended that only the degree DO appear on professional stationery. However, the following additional guides are offered: No undergraduate degree (BA, BS, etc.) should be used.

Graduate degrees (MA, MS, PhD, etc.) should not be used unless the degree recognizes work in a scientific field directly related to the healing arts. Therefore, advanced degrees in scientific fields such as public health, physiology, anatomy, and chemistry may be used but their use is not recommended.

Honorary degrees relating to scientific achievement in the healing arts or other achievements within the osteopathic profession (such as administrative excellence or educational achievement) may be used if the honorary nature of the degree is indicated by use after the degree of the abbreviation "Hon."

Law degrees may be used if the physician carries on medical-legal activities.

Part V-Telephone Directory Listings

- 1. It is desirable for divisional societies to have an established program to implement these guidelines and, where necessary, to meet with representatives of the telephone companies in furtherance of that objective.
- 2. In classified directories, it is recommended that DOs be listed under the heading "Physicians and Surgeons-(DO)" and that there be a cross-reference to that heading from the heading "Physicians and Surgeons-Osteopathic." This letter heading is also acceptable as the main listing if it has long been the heading customarily used in the community.
- 3. In telephone directory listings of doctors, it is recommended that the doctor's name be followed by the abbreviation DO.
- 4. The abbreviation "Dr" is not recommended because it is misleading. "Dr" can refer to dentists, doctors of medicine, etc. "Phys" is also misleading because it can refer to MDs.
- 5. In telephone directories, no indication of certification or membership in any osteopathic professional organization should appear by initials or abbreviations, because such would generally be confusing.
- 6. In classified telephone directories it is not improper to indicate "Practice limited to" or simply to name the field of specialty.

Interpretation of Section 17

Section 17 relates to the interaction of physicians with pharmaceutical companies.

- 1. Physicians' responsibility is to provide appropriate care to patients. This includes determining the best pharmaceuticals to treat their condition. This requires that physicians educate themselves as to the available alternatives and their appropriateness so they can determine the most appropriate treatment for an individual patient. Appropriate sources of information may include journal articles, continuing medical education programs, and interactions with pharmaceutical representatives.
- 2. It is ethical for osteopathic physicians to meet with pharmaceutical companies and their representatives for the purpose of product education, such as, side effects, clinical effectiveness and ongoing pharmaceutical research.
- 3. Pharmaceutical companies may offer gifts to physicians from time to time. These gifts should be appropriate to patient care or the practice of medicine. Gifts unrelated to patient care are generally inappropriate. The use of a product or service based solely on the receipt of a gift shall be deemed unethical.

4. When a physician provides services to a pharmaceutical company, it is appropriate to receive compensation. However, it is important that compensation be in proportion to the services rendered. Compensation should not have the appearance of a relationship to the physician's use of the employer's products in patient care.

Position Papers/Ethical Content

Position papers adopted by the AOA House of Delegates define official AOA policy. Many of the position papers further clarify issues with ethical content.

Specific areas and papers related to them are:

A. Responsibilities to the patient:

--Confidentiality of patient records

- --Counseling female patients on reproductive issues
- --Death: Right to die
- --Physician treating minors without parental consent
- --Patient confidentiality

--Patient's bill of rights

--Patient-physician relations

B. Responsibilities to society:

--Abused persons

- --Ethical and sociological consideration for medical care
- --Healthcare institutional responsibilities
- --Impaired physician, assistance
- --Medicare and Medicaid Abuse
- --Medicare and Medicaid ethical physician arrangements

--Substance abuse

C. Responsibilities to the AOA:

- --Active institutional membership--AOHA
- --Dual degrees
- --Industry gifts to physicians

--Professional association by DOs

D. Responsibilities to others involved in healthcare:

--Acupuncture

--Osteopathic medicine in foreign countries

E. Responsibilities to self:

--Medicare-physician coverage

--Osteopathic Manipulative Treatment (OMT) programs

--Physician administered OMT

1. "Stationery" includes letterheads, billheads, professional cards, checks, prescription blanks and any other stationery products used in practice.

2. The guide applies to door signs, listings in building lobbies, and outside signs.

3. DOs with limited licenses may obtain rulings on permissible designations on requests addressed to the AOA Committee on Ethics.



AMERICAN OSTEOPATHIC ASSOCIATION

HOUSE OF DELEGATES

PRIMER

Originally named Handbook of Governing Bodies First drafted 1966, modified 2011, 2014, 2016, 2023

> American Osteopathic Association 142 East Ontario Street Chicago, Illinois 60611-2864

HOUSE OF DELEGATES

INTRODUCTION

The House of Delegates ("HOD" or "House") is the legislative body of the American Osteopathic Association ("AOA" or "Association"). As such, it speaks for the members of the Association and for the osteopathic profession. This Handbook has been prepared so that all who participate in the annual meeting of the HOD may have a better understanding of the methods and rules under which it operates.

Since the HOD traditionally meets only once a year, many important actions must be taken at the annual meeting. In order that the many resolutions placed before the HOD may be considered carefully and expeditiously, it is necessary to have a well-established routine for the conduct of business.

This routine demands the close cooperation of the delegates of the House, the members of the Board of Trustees ("BOT") and its officers, and the AOA staff. The delegates of the House have the duty of considering not only the wishes of their societies and their geographical regions, but also the welfare of the Association and of the osteopathic profession as a whole.

The following pages contain information regarding the organization and operation of the HOD. A careful reading of this material will give each member of the House an informed view of the activities and procedures that lead to the establishment of policy for the AOA and for the osteopathic profession.

GENERAL INFORMATION FOR DELEGATES AND ALTERNATES

<u>Meeting Overview</u>: The annual meeting of the HOD is held during the month of June, July or August and separate from the AOA's Annual Convention and Scientific Seminar (OMED). The AOA President may call special sessions of the House. The Delegates shall be given at least two weeks' notice; the call will include the purpose(s) of the special session.

<u>Delegates</u>: The AOA will provide to the chief executive officer/executive director of each divisional society, **seventy-five (75) days** prior to the first day of the annual meeting of the House of Delegates, a statement of the number of Regular Members of this Association located in the state, district or territory represented by that divisional society. In the case of the uniformed services divisional society, the notice shall include the number of regular members of this Association currently serving in the uniformed services of the United States.

This information is also made available on the HOD website. A list of all delegates and alternate delegates is published on the HOD website and becomes part of the meeting proceedings.

It is the prerogative of the Speaker to determine the order of business at any meeting and may vary the order if it will expedite the business of the House, subject to any objections sustained by the House. The HOD, by majority vote, may change the order of business at any meeting.

The introduction of business to the AOA House is through the presentation of resolutions on behalf of a delegation. Reports from the Board of Trustees and AOA Bureaus, Councils and Committees on topics of interest to physicians or in response to previously adopted or referred resolutions also are routinely received as business.

The resolutions are referred to a reference committee for consideration. A reference committee is a special committee that serves to expedite the business of the House and is the venue at which delegates, alternate delegates and others can support, oppose, voice concern or otherwise articulate their point of view on resolutions under consideration.

Following the testimony received in open session, the reference committee deliberates in executive session and prepares a report with recommendations to the full House. It is the HOD that ultimately takes action on all items of business.

Composition of the House of Delegates

All delegates and alternate delegates are required to be members of the AOA. The House of Delegates shall consist of delegates elected, or otherwise appointed, by the divisional societies and other authorized units, the elected officers and trustees of the Association and of such other members as may be provided for in the Bylaws. Each divisional society shall be entitled to at least one delegate.

The House includes:

• A total of **473 delegate positions** will be allocated among the Divisional Societies for each of the states, the District of Columbia, and osteopathic physicians serving in the

Uniformed Services (Military).

- Each Divisional Society and Military automatically receives one delegate. The remaining delegate positions will be allocated among the Divisional Societies and Military based on the proportion of members of the AOA who are located in the state represented by that divisional society or in the case of the Military, the proportion of members of the AOA currently serving on active duty in the uniformed services of the United States.
- The allocation of the remaining delegates will be recalculated each year.
- Each recognized Specialty College is entitled to one delegate and alternate. Specialty college delegate and/or alternate cannot serve as a member of the divisional society delegation to the AOA House of Delegates.
- The Bureau of Emerging Leaders (BEL) will designate three delegates and three alternates. The BEL will be represented in the HOD by one Resident delegate, one Fellowship delegate, and one New Physician in Practice Delegate selected by vote of the BEL. The Resident, Fellowship, or New Physician in Practice delegates or alternates cannot also serve as a member of a divisional society or specialty college delegation.
- Each osteopathic medical college (and branch campus) accredited by this Association will be represented in the AOA House of Delegates by its student council president. An alternate delegate shall be elected by the applicable student council. Both the student council president and an alternate delegate, when seated, will be seated as a member of the delegation of the divisional society representing the state in which the osteopathic college is located.
- The Student Osteopathic Medical Association (SOMA) will be represented in the House by one member of the SOMA Board selected by vote of the SOMA Board. The SOMA delegate or alternate cannot serve as a member of a divisional society delegation representing the state in which such SOMA Board Member's osteopathic college is located.

AOA elected Officers and Trustees are ex officio members of the HOD.

Delegate seating for the HOD Business Meetings is at the discretion of the Speaker. The Speaker strives to rotate delegate seating assignments to ensure that no one society sits in front (or in back) too often. Societies can request to be seated near other societies but must do so well in advance of the meeting.

Delegate Responsibilities

During the HOD meeting, delegates have a number of responsibilities, including serving on HOD committees, participating in caucuses, and testifying at reference committee hearings. After the reference committees present their reports, the delegates have the opportunity to testify and vote on the recommendations of each reference committee.

Prior to the HOD meeting, delegates should work with their colleagues to draft resolutions for consideration at HOD meetings. Following the meeting, delegates should report highlights of HOD meetings to the leadership or membership of the organizations they represent.

Role of Alternate Delegates

Alternate delegates do not have the privilege of access to the floor but may be seated in the visitors' section until they serve in the "delegate" capacity – at which time they would move to the delegate table.

Alternate delegates may testify on resolutions and reports in reference committees and participate in caucuses. Because alternate delegates technically are not HOD members, they cannot introduce resolutions or vote. However, they can be temporarily credentialed to substitute for a delegate, and thus, speak and debate on the HOD floor, offer amendments to pending matters, and make motions and vote on the outcome of items of business. In order to access the floor, an alternate delegate must be formally recredentialed as a delegate, as described under Rules of the House of Delegates section.

Seating of Alternate Delegates:

If a delegate cannot attend a meeting of the House of Delegates, then an alternate may be seated. Alternate delegates do not have the privilege of access to the floor but may be seated in the visitors' section until they serve in the "delegate" capacity – at which time they would move to the delegate table.

Alternate delegates sit apart from the delegates in a reserved seating area during the formal HOD sessions. Reserved seats for alternate delegates are not pre-assigned.

Seating at reference committee hearings and other programming is unassigned for all participants.

Credentials:

Official credentials are available in advance to the chief executive officers/executive directors of the divisional societies, specialty colleges, Bureau of Emerging Leaders, the Student Osteopathic Medical Association, and the deans of accredited colleges of osteopathic medicine for distribution to their selected delegates and alternates. These credentials must be presented to the Committee on Credentials at the time of registration.

Registration:

Registration for delegates and alternates is conducted from 6:30 a.m. on Friday the first day the House of Delegates convenes, until adjournment. (Early registration is available on Thursday, from 2 - 6 p.m.).

Orientation:

The Speaker and Vice Speaker of the House conduct an orientation for new members of the House of Delegates and other delegates and alternates interested in attending on Friday (8 a.m.) prior to the opening of the House (9 a.m.).

Access to Floor:

Members of the House of Delegate who wish to secure the floor for any purpose shall address the Speaker and identify themselves by name and delegation. Access to the floor of the House is limited to the officers and properly certified delegates of the HOD, the elected and appointed officers of the AOA; the past presidents; and when requested by the Speaker, the chairs of AOA departments, bureaus, committees and councils; the chief executive officers/executive directors of AOA affiliated groups; and members of the AOA staff. Special Seated Ambassadors also have access to the floor of the HOD and during reference committee meetings.

Meetings begin promptly. Delegates, alternate delegates, and guests are urged to arrive early and be in their seats 15 minutes before the stated time. Similarly, delegates are urged to schedule their departures after the meeting adjourns on the last day, so that they can give full consideration to that day's business items.

Special Seating (non-delegate invitations) <u>Ambassador</u>

- <u>Qualifications</u> A national medical organization may apply to the AOA Board of Trustees for official ambassador status in the House of Delegates. The membership of the organization shall be national in scope and have similar interests as the AOA regarding health care policy. Each organization, upon application, must demonstrate compliance with these requirements.
- <u>Rights and Privileges</u> Organizations with ambassador status are entitled to send one representative to meeting(s) of the AOA House of Delegates. The Ambassador is permitted voice in the AOA reference committee meetings and on the floor of the House of Delegates. Ambassadors would not have the right to introduce business, introduce an amendment, make a motion or vote.
- Ambassadors are invited to attend:
 - Open meetings of the AOA House of Delegates, including reference committees;
 - Caucus meetings upon invitation of that group; and
 - Official meal and reception functions of the AOA House of Delegates, including the President's inaugural reception.

Official Observer

- <u>Qualifications</u> A national medical organization may apply to the AOA Board of Trustees for official observer status in the House of Delegates. The membership of this organization shall be national in scope and have similar interests as the AOA regarding health care policy. Each organization, upon application, must demonstrate compliance of these requirements.
- <u>Rights and Privileges</u> Organizations provided observer status are entitled to send one representative to meeting(s) of the AOA House of Delegates. These representatives, upon invitation from the AOA Speaker, will be given the right to speak and debate on the floor of the HOD to issues within their organization's expertise. Official Observers

would not have the right to introduce business, introduce an amendment, make a motion or vote.

- Observers are invited to attend:
 - Open meetings of the AOA House of Delegates, including reference committees;
 - Caucus meetings upon invitation of that group; and
 - Official meal and reception functions of the AOA House of Delegates, including the President's inaugural reception.

Special Invited Guest Seat Definition

 <u>Qualifications</u> - This Special Invited Guest Seat (SIG) category would be open to national health care organizations that have already established a relationship with the AOA to work towards issues and goals of mutual benefit (e.g., health system reform, health and wellness initiatives, etc.). The membership base of these organizations would be categorized as health care allies.

A national health care organization whose membership base are allied professionals, may apply to the AOA Board of Trustees to be considered as a special invited guest (SIG) in the House of Delegates. The organization must be national in scope and have similar goals and concerns to the AOA regarding health care issues. Each organization, upon application, must demonstrate compliance of the requirements noted above.

- <u>Rights and Privileges</u> Organizations provided SIG status would be entitled to send one representative to meeting(s) of the AOA House of Delegates. These representatives would be recognized as attendees of the HOD meeting, but would not have the right to introduce business, introduce an amendment, make a motion or vote.
- Special Invited Guests (SIG) are invited to attend:
 - Open meetings of the AOA House of Delegates, including reference committees;
 - Caucus meetings upon invitation of that group; and
 - Official meal and reception functions of the AOA House of Delegates, including the President's inaugural reception.

Schedule of House Meetings:

The annual sessions of the House of Delegates are as follows:

- <u>Friday</u>: The House of Delegates typically convenes at 9 a.m. Matters relating to the organization of the House, presentation of various reports from the President, Chief Executive Officer, appointed officers, staff members, chairs of departments.
 - HOD reference committee sessions are usually scheduled at 1:30 p.m. and the individual chairs determine the length of the sessions.
 - The HOD reference committees hold open hearings with the time and location announced by the Speaker. The membership of the reference committees are listed in the Agenda of the House of Delegates. All members of the AOA are

invited to attend the hearings of these committees.

- <u>Saturday</u>: Nominations of all officers, trustees, and of the Speaker and Vice Speaker of the House of Delegates is a regular order of business typically beginning at 7:30 a.m.
 - Reports of the reference committees of the House of Delegates will begin at approximately 9 a.m.
- <u>Sunday</u>: Election of all officers, trustees, the Speaker and Vice Speaker of the House of Delegates is a regular order of business at approximately 7:30 am on the last day of the meeting of the House.

OPERATION OF THE HOUSE OF DELEGATES

Meetings begin promptly. Delegates, alternate delegates, and guests are urged to arrive early and be in their seats 15 minutes before the stated time. Similarly, delegates are urged to schedule their departures after the meeting adjourns on the last day, so that they can give full consideration to that day's business items.

<u>Officers</u>: The Speaker of the House of Delegates is the presiding officer. The Vice Speaker presides over the House in the absence or at the request of the Speaker and assumes all duties of the Speaker. The Speaker and Vice Speaker are members of the HOD, with all of the associated rights and privileges. The Secretary of the House is the CEO of the AOA.

<u>Duties of House of Delegates</u>: The House of Delegates serves as the legislative body of the Association while the Board of Trustees serves as the administrative executive body. The duties of both are defined in the Constitution and Bylaws of the Association.

The powers and duties of the House as defined in Article VI of the Constitution and Article V of the Bylaws, make it the authoritative body of the Association on matters within its purview. The House can determine Association policy, enact, amend and repeal the AOA's Constitution and Bylaws and the Code of Ethics, and create special committees. The House also has the duty of electing officers and trustees of the AOA and the Speaker and Vice Speaker of the House. It also concurs with the annual budget as per the Constitution and Bylaws.

The Board of Trustees provides for the maintenance and supervision of the AOA offices, hires the CEO, Chief Financial Officer, General Counsel, and the AOA Editor-in-Chief. The staff prepares and the Board approves the annual budget, supervises financial affairs, approves the appointments of the chairs of departments, bureaus, committees and councils (selected by the President-elect) selects the time and place of the annual meeting and clinical assembly, and reviews all reports and makes recommendations to the House of Delegates.

<u>Resolutions and Communications to House of Delegates</u>: Resolutions and communications involving AOA policy come to the House of Delegates from several sources: the President of the AOA, the Board of Trustees and its bureaus, committees and councils, the divisional societies and affiliated organizations.

The Board of Trustees reports annually to the House of Delegates on the Association's activities during the past year through the CEO or president, or designee. Divisional societies and affiliated organizations frequently direct resolutions on the establishment of policy to the House of Delegates. District societies, when seeking similar action, should pursue such action through their divisional societies.

The employed staff of the AOA may also make recommendations to the House but only through an appropriate entity such as the BOT or an individual bureau, committee, or council. The HOD receives many recommendations for consideration each year and is responsible for acting on them to the best of their ability to meet the changing needs of the Association and of the profession.

The deadline for Resolutions to be processed is typically in early May. Late resolutions may be accepted following approval.

In an effort to "Green the AOA's Footprint," business of the AOA House of Delegates will be available in downloadable form on the <u>Annual Business Meeting of the AOA webpage</u> located on AOA Website. The resolutions will be available prior to the meeting of the HOD and will be available in three versions – one inclusive document, by reference committee report and as single resolutions. Other materials available via the site <u>Annual Business Meeting of the AOA webpage</u> will include:

- (1) Agenda and Reports -- contains the agenda of the House, AOA delegates roster, list of delegates and alternates, members of the reference committees, rules and order of business and the annual reports.
- (2) Communications -- letters received from affiliated organizations that are informational in nature.
- (3) Supplemental Reports -- reports received after posting of the agenda.
- (4) Resolutions -- items for action.
- (5) Amendments to Constitution and Bylaws of the AOA.
- (6) A report to the House of Delegates regarding any amendment to the basic documents of any of AOA's affiliated organizations

Only late resolutions approved by the Committee on Rules and Order of Business and reports of the HOD Reference Committees will be provided as paper versions.

Delegates and alternates are asked to bring the above materials to the meetings of the House. It is the responsibility of the Delegates and Alternates to come prepared by reviewing the various reports and resolutions they are being asked to deliberate.

RULES OF THE HOUSE OF DELEGATES (for more detail see Appendix A and B)

<u>Seating of Delegates</u>: A delegate having been seated shall remain the credentialed delegate throughout the meeting. In the event that a credentialed delegate has failed to qualify and assume their seat when the House convenes on the second day of the meeting, the designated alternate may be credentialed and seated. If a delegate, having been seated, is unable to be present due to physical disability or other cause(s) acceptable to the House, an alternate may be credentialed and seated for that roll call period and continue as a delegate until the previously seated delegate returns for duty at the subsequent roll call. In that event, the alternate delegate who has been seated may, by direction of the House, be dropped from the roll and the previously seated delegate shall return to their seat in the House.

<u>Quorum</u>: One-half of the accredited delegates of the House shall constitute a quorum.

<u>Rules of Order</u>: The meetings of the House of Delegates and of all other bodies of the AOA are governed by *Roberts's Rules of Order Newly Revised 12th Edition*, except in such instances as are specifically provided for in the Constitution and Bylaws of the Association or in the order of business that may be adopted from time to time. The order of business and any special rules adopted at the beginning of the meeting will govern the procedure unless unanimously suspended. Any special order of business must be submitted to the Committee on Rules and Order of Business for approval.

<u>Reports</u>: All reports of officers and committees, except supplemental reports, are made available electronically to each delegate and alternate delegate prior to the opening of the House of Delegates. This includes all resolutions and communications for consideration by the House received up to that time. All supplemental reports are presented to each delegate before such report is considered by the House.

Reports shall not be read verbatim to the House of Delegates, except by consent of two-thirds of the members present and voting.

<u>Referral of Report and Resolutions</u>: Prior to each session of the House, the Speaker of the House will prepare a list of recommended business referrals to reference committees. This list will be available at the opening meeting of the House and be subject to amendment or approval on vote by the HOD. The Speaker has the power to refer any resolution to a special committee, or the House may recommend the appointment of a special committee.

<u>Resolutions on the Appropriation of Funds</u>: No funding appropriation(s) can be made by the House except upon recommendation of the Finance Committee. All resolutions, motions or otherwise, requiring the appropriation of funds must first be referred without discussion to the Finance Committee of the Board of Trustees. An adverse ruling on such motions may be overruled by a three-fourths vote of the House. A statement of estimated fiscal impact be included with all resolutions, including those without a funds appropriation request. This information is generated by staff and reviewed and approved by the Finance Committee.

<u>Introduction of New Business on Last Meeting Day</u>: No new business shall be introduced on the last day of the House of Delegate's meeting except by a two-thirds consent of those members present, provided two-thirds of the seated delegates are in attendance.

<u>Presentation of Resolutions and Other Items of Business</u>: Within the limitation of the rule on the presentation of new business on the last meeting day of the House of Delegates, any delegates may present an item of business from the floor. Resolutions and other items of business should be presented on behalf of bureaus, committees, councils, or AOA-chartered and affiliated organizations by a credentialed delegate. These items must be presented as far in advance as possible and provided to the Secretary of the House so that copies are made available to House members.

<u>Amendments to Constitution, Bylaws and the Code of Ethics</u>: The Constitution may be amended by the House at any annual meeting by a two-thirds vote of the total number of delegates credentialed for voting, provided that the amendment(s) will have been presented to the House and filed with the CEO at a previous annual meeting. These amendments must be published in the JOM no less than two months nor more than four months prior to the meeting at which they are to be deliberated. Amendments to the Constitution are first presented as "read-only" for consideration and considered for action at the following year's annual meeting of the House.

The Bylaws may be amended by the House at any annual or special meeting by a two-thirds vote of the total number of delegates accredited for voting, provided that the amendment shall have been filed with the CEO at least **two months** before the meeting at which the amendment is to be deliberated. Upon receiving a copy of the amendment, the CEO will have the amendment(s) published in the JOM at least **one month** before the meeting. At this meeting, the Board of Trustees may revise the proposed amendment if necessary to secure conformity to the Constitution and Bylaws and then refer it to the House for final action no later than the day prior to the end of the meeting. Changes to the Bylaws take effect upon adoption. There is not "read-only" provision for initial consideration as exists with proposed amendments to the Constitution.

The Code of Ethics may be amended by the House of Delegates at any annual meeting by two-thirds vote of the total number of delegates credentialed for voting, provided a copy of the proposed amendment is filed with the CEO at least **90 days** before the annual business meeting at which it is to be deliberated. Upon receipt of the proposed amendment(s), the CEO will have the proposed amendment published in the JOM not later than one month before the annual meeting at which the amendment is scheduled for consideration.

<u>Voting</u>: The method of voting in the House of Delegates is usually determined by the Speaker of the House who may call for a voice vote, show of hands, standing vote, electronic vote, roll call of the delegations, and/or ballot vote.

If the result of a vote is uncertain or if a division is called for, the Speaker will have the option of asking for a standing vote of delegates. The standing vote count will be made by tellers appointed by the Speaker and reported to the Secretary. It is essential that voters remain standing until the Speaker has indicated that the count is completed. The same procedure is then followed for recording the negative vote. The Committee on Credentials is charged with supervising the counting of roll call votes in the House of Delegates, as specifically requested by the Speaker.

<u>Nominations</u>: Nomination of all officers and trustees of the AOA, and nomination of the Speaker and Vice Speaker of the House of Delegates, except nominations of those otherwise provided for in the Constitution, will be a regular order of business in the House during the annual meeting. Nominations may be made from the floor immediately preceding the balloting. Nominating speeches should not exceed two minutes.

<u>Elections</u>: Election of officers and trustees and the Speaker and Vice Speaker shall take place during the annual meeting of the House. Only properly credentialed delegates are permitted to participate in the elections of the House. Contested elections are held under the supervision of the Committee on Credentials.

All elections shall be by ballot except as outlined in this section and a majority of all votes cast are necessary to elect. In recording such a vote, each divisional society shall be given one vote for each 20 regular members of the AOA located in the area represented by that division and such votes may be cast by any one of the delegation then seated or divided among the various members of the delegation as the delegation shall decide. If there is one nominee for a given office or trusteeship, it is the duty of the secretary to cast the elective ballot for that nominee.

Conflict of Interest:

Members of the House of Delegates who have a substantial financial interest or a leadership position in a commercial enterprise, which interest will be materially affected by a matter before the House of Delegates, must publicly disclose that interest before testifying at a reference committee on the matter or speaking on the floor of the House of Delegates on the matter.

Conduct of Business by the House of Delegates:

Each member of the House of Delegates and the AOA Officers resolutely affirm a commitment to be courteous, respectful and collegial in the conduct of House of Delegate actions. Although differences of opinion may lead to spirited debate, ad hominem attacks are prohibited. Video or audio recording or streaming of house proceedings is prohibited, unless otherwise approved in writing in advance by the Speaker, Vice Speaker and Secretary of the HOD.

REFERENCE COMMITTEES OF HOUSE OF DELEGATES

<u>Reference Committees</u>: There are nine (9) reference committees of the House of Delegates. All are appointed by the Speaker of the House except the Committee on Credentials and the Joint Board/House Budget Review Committee whose members are appointed by the Speaker and the President. In choosing members for HOD committee service, the Speaker is encouraged to appoint a committee diverse in terms of specialty and geographic representation, race, ethnicity, age, gender, and sexual orientation.

The following is a general description of the items assigned to each of the reference committees or (in the case of Rules and Order of Business, non-reference special committee):

CREDENTIALS:

The Committee is appointed by the President. It receives and validates the credentials of the delegates and alternates, maintains a continuous digital roll call, determines the presence of a quorum, supervises voting and election procedures and makes recommendations on the eligibility of delegates and alternates to a seat in the House when a seat is contested.

RULES AND ORDER OF BUSINESS:

This Committee presents the agenda and recommends for approval such rules as are necessary for the conduct of the business of the House and make recommendations on acceptance of late resolutions. The report of this Committee is prepared in collaboration with the officers of the House and is presented at the opening of the annual session. The committee is not a reference committee and does not normally hold open hearings but does provide sponsors of "late resolutions" an opportunity to explain the reasons for the lateness of the resolution.

RESOLUTIONS:

This Committee drafts resolutions expressive of the sense of the meeting.

EDUCATIONAL AFFAIRS:

This Committee considers matters relating to osteopathic education, colleges of osteopathic medicine, postdoctoral training programs and other matters as determined by the Speaker. These resolutions are numbered in a 200 series (e.g., 200, 201, etc.).

PROFESSIONAL AFFAIRS:

This Committee considers matters relating to osteopathic healthcare facilities, advocacy, legislation, membership and conventions, and other matters as determined by the Speaker. These resolutions are numbered in a 300 series (e.g., 300, 301, etc.).

PUBLIC AFFAIRS:

This Committee considers matters relating to public and industrial health, research, wellness and well-being, and other matters as determined by the Speaker. These resolutions are numbered in a 400 series (e.g., 400, 401, etc.).

CONSTITUTION AND BYLAWS:

This Committee considers the choice of words, phraseology, style and merits of all proposed amendments to the Constitution, Bylaws, and the Code of Ethics, and makes recommendations as necessary. These resolutions are numbered in a 500 series (e.g., 500, 501, etc.).

AD HOC COMMITTEE:

This Committee considers materials relating to physician practice / socioeconomic issues, affiliate relations, health insurance and communication activities, and other items determined by the Speaker. These resolutions are numbered in a 600 series (e.g., 600, 601, etc.).

JOINT BOARD/HOUSE BUDGET REVIEW:

This Committee is composed of four members from the Board of Trustees, appointed by the President; four members from the House of Delegates, appointed by the Speaker; and the Treasurer of the Board of Trustees, as a Consultant. It acts as a reference committee to review the AOA strategic plan and budget. These resolutions are numbered in a 700 series (e.g., 700, 701, etc.).

GENERAL PROCEDURES FOR REFERENCE COMMITTEES

<u>Duties/Responsibilities</u>: The primary responsibility of a reference committee is to recommend to the House an appropriate course of action on matters that have been placed before it. This duty should be accomplished by:

- evaluating all resolutions received by the committee,
- receiving testimony during reference committee meetings,
- basing its recommendations on the best information and advice that is available, and
- making decisions in the best interests of the public and the profession.

It is not the duty of the reference committee to attempt to prevent the House from taking action on any matter that has been presented. Nor is it the committee's duty to accept automatically and without deliberation the opinions of its own members or the opinions of those who have testified.

The reference committee fulfills its duty when it takes into consideration all of these factors and advises the House to approve, disapprove, amend, postpone, or replace by a substitute resolution, any resolution that has been placed before it.

<u>Authority</u>: Reference committees have a good deal of authority but must act within the standing rules of the House and within the framework of the Constitution and Bylaws. The reference committees may not only recommend action on resolutions before them but may also propose resolutions on their own initiative. They may call upon the officers, members of the Board of Trustees, committees, and the members of the staff when they desire to gain information. They may make an explanation of the committee's decision before recommending to the House that a resolution be approved, disapproved, amended, postponed or replaced by a substitute resolution.

<u>Referral of Items of Business to Reference Committees</u>: The reference committees receive items of business for consideration by referral from the House of Delegates. At the opening meeting of the House, the list of referrals prepared by the Speaker is presented to the House for approval. Hearing no objection, the list stands as presented. The House, at its discretion, may refer a resolution to a different reference committee.

Other items of business may be referred to a reference committee by the Speaker of the House during the course of business. A listing of all resolution referrals made to the reference committees will be made available as soon as possible after the House recesses. This list, in effect, constitutes the agenda for the meetings of the reference committees.

<u>Conduct of Hearing</u>: The primary duty of a reference committee is to receive and evaluate opinions so that it may present a well-informed recommendation to the House. Opinions are received during the open hearing that is conducted by the reference committee. During actual deliberations of the committee, the committee and its staff will meet in executive session.

All members of the AOA have the right to attend reference committee hearings and participate in the discussion, whether or not they are members of the House of Delegates. Guests may be permitted to provide testimony if appropriate and with prior approval from the Speaker.

<u>Duties of the Chair</u>: The chair of the reference committee should preside at both of the above meetings and should carry out the usual duties of a chair in maintaining order, facilitating the transaction of business and in ruling on length and pertinence of discussion.

The chair should not permit the making of motions or the taking of formal votes at an open hearing, since the objective of the hearing is to receive information and opinions and not to make decisions of any sort that would bind the reference committee in its subsequent deliberations. The final motions should be held in executive session as noted above.

The chair should ensure that all who want to be heard are heard but should be watchful against prolonged holding of the floor by one or more persons at the expense of others who may wish to counsel with the committee. The chair, with the consent of the committee, may place reasonable limitations on discussion and debate.

Committee members may ask questions to be sure that they understand the opinions being expressed or may answer questions if a member seeks clarification; however, the committee members are not to engage in debate with those presenting testimony or express opinions during the hearings. Their responsibility is to listen carefully and evaluate all the opinions presented so that the reference committee may provide the voting body with a carefully considered recommendation.

It is the responsibility of the chair to review and approve the reference committee report, as prepared by AOA support staff, prior to publication. The chairs should coordinate this activity with their reference committee secretaries.

<u>Testimony</u>

Each individual speaking to an issue must be recognized by the reference committee chair while at a microphone. When called upon, the individual should:

- Identify oneself by name;
- Specify whether testifying as an individual, or offering testimony on behalf of a delegation, caucus or Section (and if so, state the name of the group);
- Disclose any conflicts of interest with respect to the issue at hand. AOA policy
 defines a conflict of interest as "having a substantial financial interest or leadership
 position in commercial enterprise, which interest will be materially affected by a
 matter." A substantial financial interest is further defined as 5% or greater ownership
 stake and/or receiving \$25,000 or more annually from a commercial entity.
- Clearly state his or her intent in offering comments provide testimony in support or opposition of the resolution or recommend a compromise position or a substitute resolution or resolved.
- Offer general background or propose alternative language, if appropriate; and
- Direct testimony to the Reference Committee, not to other hearing participants.

Wording for alternative language or a proposed substitute resolution should be submitted in writing to reference committee staff. Written material that accompanies the testimony may also be presented to the reference committee staff for discussion at the committee's executive session.

Executive Session

Following its open hearing, a reference committee goes into executive session to deliberate and to construct its report. It has the prerogative to call into its executive session anyone it may wish to hear or question. The reference committee reviews the testimony that was submitted and discusses its options for disposing of each item. During executive session, the reference committee may review existing AOA policy and directives, background material from other sources, or medical journals. The reference committee may also consider substitute resolutions that were presented during the open hearing. Legal counsel and other AOA senior leadership team members are available to all reference committees during their deliberations.

A reference committee has wide latitude in its efforts to facilitate expression of its recommendations on assigned business. A reference committee may choose to amend a resolution, consolidate kindred resolutions by constructing a single substitute, or recommend that an item be adopted, not adopted or referred.

<u>Secretarial Assistance</u>: Each reference committee will be provided with staff to assist the committee in the development of their report. These staff have expertise in the committee's defined responsibilities and should be used as a valuable source of information and experience. Verbatim minutes of the reference committee will not be taken; however, committee staff will assist in the development of a cohesive report that will be acted upon by the House as a whole.

<u>Preparation of Report</u>: The reports of the reference committees to the House are nothing more than the comment and the recommendation of the committee on the materials that it has had under consideration.

All recommendations to the House must be placed in the standard resolution form. Resolutions should be worded with the utmost clarity and must contain only a single topic. Resolutions containing more than one topic must be divided so that the House can vote intelligently on a single question. The wording of a resolution is most important, since an improperly worded resolution will not give the delegates a clear and immediate idea of the question on which they are being asked to vote.

If the report of a committee contains no resolutions, the reference committee should merely state that it has noted the report and make such comment as it may desire. It is not proper to recommend that the report be "received" or "approved". If the reference committee wishes to approve some item in the report, it must draft a suitable resolution. The reports should be as brief as possible. Long sections of material that the delegates already have before them, should not be repeated.

<u>Reports</u>: Every effort should be made by the members of a reference committee to reach unanimous agreement. If this is not possible, the committee shall work together in good faith to present a report.

<u>Presentation of Reports to House of Delegates</u>: The reports of the reference committees are presented by their Chair and / or the Vice Chair.

The Speaker will announce the order that the reference committee reports will be heard and acted upon.

In the event of debate or discussion, the Chair and members of a reference committee are free to reply to any questions or to comment. If the Chair desires, they may call on a member of a bureau, committee, or council, member of the Board of Trustees or staff to supply the information requested. The Chair of the committee, however, should be prepared to comment on the position that their committee has taken.

Guidelines, a Tutorial on Parliamentary Procedure and HOD Resolution Protocol are noted in Appendixes A and B of this document.

Tutorial on Parliamentary Procedure Everything You Wanted to Know but were Afraid to Ask!

Introductory Comments

To assist in the smooth operation of the American Osteopathic Association's House of Delegates deliberations, the AOA Speaker and Vice Speaker have developed a "Tutorial on Parliamentary Procedure."

While this Tutorial in no way replaces the Rules of Order as defined by Roberts's Rules of Order Newly Revised 12th Edition, it does provide a concise summary of the parliamentary procedures used to facilitate the business of the House of Delegates.

TUTORIAL GUIDE

- 1. Say "I move", instead of "I make a motion".
- 2. In Resolutions, amendments to "Resolves" are discussed before any "Whereas" amendments.
- 3. Resolutions will be stated to the House in the following way --- "I present for consideration Resolution 109";
 - a. "the Committee recommends it be <u>approved</u> and I so move".
 - b. "the Committee recommends it be <u>amended</u> as follows and <u>approved</u>, and I so move".
 - c. "the Committee recommends it be <u>disapproved</u>. To start debate, I move the Resolution be approved". (All motions should be stated in the affirmative.) If you agree with the decision of the Committee, you will vote "**nay**", against the Resolution.
 - d. Since resolutions come from a Committee, they do not need a second.
- 4. All amendments will be "old material crossed out", or printed in red in PowerPoint, and NEW MATERIAL IN **BOLD** CAPS". This will not be printed on every Resolution.
- 5. A Resolution or Motion, once the House has begun, may be withdrawn <u>only by the</u> <u>Delegation</u>. Only the maker (author) of the motion may ask for withdrawal.
- 6. Regardless of whether or not the maker of a motion accepts a "friendly amendment," it must be opened to debate and voted on formally, unless adopted by "unanimous consent."

- 7. Amendments to the original motion or resolution are "1st order." Amendments to a pending amendment are of "2nd order." Only one amendment of each order can be pending at any time. No amendment above the 2nd order will be allowed until disposition of the pending 2nd order amendment is resolved.
- 8. Amendments, and amendments to amendments, must be seconded.
- 9. Do not misuse the motion to "Table":
 - a. "<u>Postpone temporarily</u>" (motion to table) terminates at the end of the current meeting. It supersedes all other motions except recess and adjourn, it requires a second, is not debatable, and requires a majority vote. It may be taken from the table only during the current meeting, which requires a motion and a second, is not debatable, and requires a majority vote.

The purpose of the motion to lay on the table is to set aside routine business to turn to something more urgent. Because it is not debatable, requires a majority vote, and has a high precedence, members are sometimes tempted to use the motion to kill the main motion. This is an improper use of the motion to table and is an example of how parliamentary procedure earns the adverse term - "railroading"

Another misuse of the motion to lay on the table is to confuse the motion with the motion to postpone to a certain time. Often, when a member wishes to postpone a main motion until later in the same meeting or until a later meeting (only the following meeting according to Robert's Rules), the member uses the motion to lay on the table rather than the proper motion: the motion to postpone to a certain time.

b. "<u>Postpone definitely</u>" sets a definite future time or date for debate. It needs a second, can have brief debate, is amendable only to time or date, and needs a majority.

If a member wishes to suppress action on a main motion, they should move to postpone it indefinitely, which is debatable. Improper use of the motion to table allows tyranny of the majority – there is nothing wrong with majority rule as long as it includes the right of the minority to speak.

- c. Confusion results between the motion to postpone definitely and the motion to lay on the table (postpone temporarily). Often, members use the motion to table when they really mean to postpone definitely. There is no such motion as "to table until the next meeting."
- d. Finally, and probably most importantly, someone of ill-will could move to "table" a sensitive issue, no debate would be allowed, and it would require only a majority vote. The assembly might then forget "to remove it from the table", and it would die a quiet, unnoticed death when the final gavel ending the meeting came down.

- 10. Saying "Call the question" means to vote immediately. It requires a second, is not debatable, requires a two-thirds majority, and must stand alone and not in combination with any other motion.
- 11. A "Motion to Reconsider" can be made only by a member of the prevailing side.
- 12. All members who wish to comment in debate should have a turn before another member speaks yet again.
- 13. When discussing a Motion, Resolution, or Amendment, please state up front, whether you speak in SUPPORT OF, or OPPOSITION TO, the item at hand.
- 14. Respect other members by taking discussion outside of the room and by turning off cell phones and other portable electronic devices.

HOD PRIMER APPENDIX B

HOUSE OF DELEGATES RESOLUTION PROTOCOL

AOA affiliates, AOA bureaus, committees or councils, the AOA President and the AOA Board of Trustees to the House of Delegates, may introduce resolutions. Resolutions are submitted to ask the AOA to take a formal position or action on a particular subject (e.g., health care reform, public health issues, physician socioeconomic / practice concerns), revise and/or negate current policies of the AOA, or to modify AOA's Constitution and Bylaws. Resolutions may also request the AOA take a direct action, for example, advocate on a particular issue, study an issue for report back at a date-certain meeting, write a letter on behalf of a particular issue or concern, etc. These "directives," if approved, are normally given to one of the various bureaus, councils and committees of the AOA for handling. Below are recommendations to assist in the preparation of a resolution.

A resolution template is available for use by all authors. This template (link from osteopathic.org) provides an outline of the resolution document and notes the following:

- Title succinct name of resolution,
- Author group(s) introducing resolution,
- Whereas statements clear, concise 1 2-line statements noting the rationale and reasoning for presenting the resolution,
- Resolved statements clear, concise 1-line statements of intent, actionable request, and/or affirmative actions. Resolved statement(s) should serve as stand-alone items of policy and/or terms of intent.
- Background information this section is created by staff to reflect current AOA policy, recount the historical action on that specific, and related, topics and other relevant background that may be useful to the delegates.
- Fiscal Impact estimated financial impact to the AOA.

Available to all members of the AOA and the public are two searchable tools: the <u>Resolution</u> <u>Portal</u> and the <u>Policy Portal</u>. These tools provide the ability to review the full resolution as well as the policy statements approved by the House of Delegates including sunset policy review, from 2017-2021 and is searchable by date and/or title. This program, updated annually within 30 days of the conclusion of the House of Delegates meeting, reflects all actions from that meeting. Prior to submitting a resolution, the author(s) should search the listing of aoa policy statements to ensure there is not a conflicting policy or to find policy that currently exists that could be modified to serve the need of the author(s). Policies set by the House of Delegates are part of a 5-year sunset review process. The AOA's bureaus, committees and councils review each policy. As part of this process, those entities review the policy and respond to the following questions:

- Are the policies still relevant?
- Has the policy directive been met?
- Are there recommended modifications and/or updates that should be made to the existing policy?
- Should the policy be afforded additional review based on changes in medical practice, changes in laws and legislation, etc.?
- Should the policy be merged with another policy to make it a stronger statement?
- Should the policy be sunset (discontinued)?

AOA policies are consistently used when advocating on behalf of osteopathic physicians, osteopathic medical students, the osteopathic profession, and patients to assist in the development of legislation and regulatory language assisting DOs, osteopathic medical students and patients. They may also be utilized in the governance of the Association.

American Academy of Osteopathy (AAO) (118349)

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Osteopathic Physicians and Surgeons of California (OPSC) (118280)

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Pennsylvania Osteopathic Medical Association (POMA) (118314)

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Fax:		
E-mail: scoms@scdos.org		
Website: <u>www.scdos.org</u>		

South Dakota Osteopathic Association (SDOA) (118317)

CONTACT	AFFILIATE OFFICERS
Inactive	

Tennessee Osteopathic Medical Association (TOMA) (118318)

CONTACT	AFFILIATE OFFICERS	AFFILIATE OFFICERS	
Executive Director Betsy Hilt, CAE bhilt@oakridgeamc.com 5133 Harding Pike, B-10, #380 Nashville, TN 37205 Phone: 1(800) 808-8662 Fax: (615) 530-1037 E-mail: info@tomanet.org Website: www.tomanet.org	President Michelle Dilks, DO 280 Billy Bible Rd Greeneville, TN 37745 mkdilks@gmail.com	President-elect Travis Groth, DO 4901 Craigs Chapel Rd Greenback, TN 37742 tjgroth@gmail.com	

Texas Osteopathic Medical Association (TOMA) (118319)

CONTACT	AFFILIATE OFFICERS	
Executive Director	<u>President</u>	President-elect
Jill Sutton, CMP	Katarina Lindley, DO	Damon A. Schranz, DO
j <u>ill@txosteo.org</u>	191 Condor View	855 Montgomery St, FL 2
7719 Wood Hollow Dr, Ste 200 Austin, TX 78731	Weatherford, TX 76087 <u>klindley1@gmail.com</u>	Fort Worth, TX 76107 damon.schranz@unthsc.edu
Phone: (512) 708-8662		
Fax: (512) 708-1415		
E-mail: toma@txosteo.org		
Website: <u>www.txosteo.org</u>		

CONTACT	AFFILIATE OFFICERS	
Executive Director	President	President-elect
Marcelle Maxfield	David Crimin, DO	Frederick Dressen, DO
director@uoma.org	167 S Ivy Circle	2168 W Kimber Lane
	Ivins, UT 84738	Riverton, UT 84605
310 E 4500 S, Suite 500	dcrimin@rvu.edu	<u>dressenf@gmail.com</u>
Salt Lake City, UT 84107		
Phone: (801) 747-3500 x251		
Fax:		
E-mail: director@uoma.org		
Website: <u>www.uoma.org</u>		

Utah Osteopathic Medical Association (UOMA) (118320)

Vermont State Association of Osteopathic Physicians & Surgeons (VSAOPS) (118321)

CONTACT	AFFILIATE OFFICERS	
Executive Director	<u>President</u>	President-elect
Stephanie Winters	Kenneth G. Borie, DO	Nat Harlow, DO
swinters@vtmd.org	3 Maple St	203 Bear Hill Rd
	Randolph, VT 05060	Randolph, VT 05060
134 Main Street	kborie@giffordmed.org	nat harlow@hotmail.com
Montpelier, VT 05602		
Phone: (802) 223-7898		
Fax:		
E-mail: <u>swinters@vtmd.org</u>		
Website: <u>www.vsaop.wildapricot.org</u>		

Virginia Osteopathic Medical Association (VOMA) (118322)

CONTACT	AFFILIATE OFFICERS	
Executive Director	<u>President</u>	President-elect
Maria S. Harris	Jeffery Groesbeck, DO	Carl Hoegerl, DO
voma@voma-net.org	162 Orchard View Ln	1017 Elwood Ter N
	Winchester, VA 22602	Forest, VA 24551
1403 Pemberton Road, Suite 305	jgroesbe@valleyhealthlink.com	choegerl@liberty.edu
Richmond, VA 23238-4474		
Phone: (804) 269-0136		
Fax: (866) 231-8520		
E-mail: <u>voma@voma-net.org</u>		
Website: <u>www.voma-net.org</u>		

CONTACT	AFFILIATE OFFICERS	
Executive Director Roseanne Andersen executivedirector@woma.org PO Box 1187 Gig Harbor, WA 98335 Phone: (425) 677-3930 Fax: (206) 933-6529 E-mail: <u>executivedirector@woma.org</u> Website: <u>www.woma.org</u>	President David Escobar, DO 4311 256th St NE Arlington, WA 98223 drdavidescobar@gmail.com	Vice President Mark Baldwin, DO 1701 W Yakima Ave Yakima, WA 98902 mbaldwin@pnwu.edu

Washington Osteopathic Medical Association (WOMA) (118323)

West Virginia Osteopathic Medical Association (WVOMA) (118324)

CONTACT	AFFILIATE OFFICERS	
Executive Director Penny P. Fioravante	<u>President</u> Michael Antolini, DO	<u>President-elect</u> TBD - November 2023
penny@wvoma.org	185 Miller Ln Hico, WV 25854	
400 North Lee Street Lewisburg, WV 24901	mantolini@osteo.wvsom.edu	
Phone: (304) 793-6842 Cell: (304) 395-4031		
Fax: (304) 647-6211		
E-mail: <u>penny@wvoma.org</u> Website: <u>www.wvoma.org</u>		

Wisconsin Association of Osteopathic Physicians and Surgeons (WAOPS) (118325)

CONTACT	AFFILIATE OFFICERS	
Executive Director	<u>President</u>	President-elect
Maggie Gruennert, CMP	Tony Thrasher, DO	Amy Ewan, DO
maggie@badgerbay.co	9559 W Prairie Grass Way	734 Ross Ave
563 Carter Ct, Ste B Kimberly, WI 54136	Franklin, WI 53132 <u>tthrasher@atsu.edu</u>	Schofield, WI 54476 amyhartwig@hotmail.com
Phone: (920) 560-5641		
Fax:		
E-mail: <u>waops@badgerbay.co</u>		
Website: <u>www.waops.org</u>		

Wyoming Association of Osteopathic Physicians and Surgeons (WAOPS) (118326)

CONTACT	AFFILIATE OFFICERS
Inactive	

Colleges of Osteopathic Medicine August 2023

The American Osteopathic Association's Commission on Osteopathic College Accreditation (COCA) currently accredits 40 colleges of osteopathic medicine (COMs) operating at 65 different sites offering instruction to approximately 36,500 medical students for the coming academic year. This includes 34 fully accredited COMs with 18 additional locations and 7 branch campuses, as well as 6 pre-accredited COMs.

"Next Accreditation Visit" is when the COM will undergo its next comprehensive site visit.

"Established" means the year the first class matriculated at the COM, additional location, or branch campus.

ACOM

Alabama College of Osteopathic Medicine 445 Health Sciences Blvd Dothan, AL 36303 Phone: 334-699-2266 James Jones, DO, FAODME, Dean and Senior Vice President Established: 2013 Accreditation Status: Accreditation Next Accreditation Visit: AY 2023-2024

ARCOM

Arkansas College of Osteopathic Medicine 7000 Chad Colley Blvd Forth Smith, AR 72916 Phone: 479-308-2243 Shannon Ramsey Jimenez, DO, FACOFP, MPF, Dean Established: 2017 Accreditation Status: Accreditation with Heightened Monitoring Next Accreditation Visit: AY 2024-2025

ATSU-KCOM

A.T. Still University Kirksville College of Osteopathic Medicine
800 W. Jefferson
Kirksville, MO 63501
Phone: 660-626-2286
Margaret A. Wilson, DO, Dean
Established: 1892
Accreditation Status: Accreditation with Exceptional Outcome
Next Accreditation Visit: AY 2030-2031

ATSU-SOMA

A.T. Still University School of Osteopathic Medicine in Arizona 5850 E. Still Circle
Mesa, AZ 85206
Phone: 480-219-6000
Sharon Obadia, DO, FNAOME, Dean
Established: 2007
Accreditation Status: Accreditation with Exceptional Outcome
Next Accreditation Visit: AY 2027-2028

BCOM

Burrell College of Osteopathic Medicine 3501 Arrowhead Drive Las Cruces, NM 88001 Phone: 575-674-2266 William Pieratt, DO, FACP, Dean and Chief Academic Officer Established: 2016 Accreditation Status: Accreditation with Heightened Monitoring Next Accreditation Visit: AY 2023-2024

BUCOM

Baptist Health Sciences University College of Osteopathic Medicine 1115 Union Avenue, CB-224 Memphis, TN 38104 Phone: 901-572-2527 Peter Bell, DO, MBA, HPF, FACOEP, FACEP, Founding Dean Established: 2024 Accreditation Status: Pre-Accreditation Next Accreditation Visit: AY 2027-2028

CHSU-COM

California Health Sciences University College of Osteopathic Medicine 2500 Alluvial Avenue Clovis, CA 93612 Phone: 559-712-4200 John Graneto, DO, M.Ed., Dean and Vice President of Health Affairs Established: 2020 Accreditation Status: Pre-Accreditation Next Accreditation Visit: AY 2024-2025

CUSOM

Campbell University-Jerry M. Wallace School of Osteopathic Medicine 4350 US-421 Lillington, NC 27546 Phone: 855-287-6613 Brian A. Kessler, DO, FACOFP, Dean and Chief Academic Officer Established: 2013 Accreditation Status: Accreditation Next Accreditation Visit: AY 2023-2024

DMU-COM

Des Moines University College of Osteopathic Medicine 8025 Grand Ave West Des Moines, IA 50312 Phone: 515-271-1400 Steven J. Halm, DO, FAAP, FACP, Dean Established: 1898 Accreditation Status: Accreditation Next Accreditation Visit: AY 2028-2029

DUQCOM

Duquesne University College of Osteopathic Medicine 600 Forbes Avenue Pittsburgh, PA 15282 Phone: 412-396-1454 John M. Kauffman, DO, FACOI, FACP, Founding Dean and Professor of Medicine Established: 2024 Accreditation Status: Pre-Accreditation Next Accreditation Visit: AY 2027-2028

ICOM

Idaho College of Osteopathic Medicine 1401 E. Central Drive Meridian, ID 83642 Phone: 208-696-4266 Kevin Wilson, DO, FACOI, FACP, Dean and Chief Academic Officer Established: 2018 Accreditation Status: Accreditation Next Accreditation Visit: AY 2028-2029 Page **3** of **17**

KansasCOM

Kansas Health Sciences Center Kansas College of Osteopathic Medicine 217 E. Douglas Ave Wichita, KS 67202 Phone: 909-831-1724 David Ninan, DO, FAOCA, CPE Dean Established: 2022 Accreditation Status: Pre-Accreditation Next Accreditation Visit: AY 2022-2023

KCU-COM

Kansas City University College of Osteopathic Medicine 1750 Independence Ave Kansas City, MO 64106 Phone: 800-234-4847 Joshua Cox, DO, FACOFP, Executive Dean and Vice Provost, Medical Affairs *Additional Location: KCU-COM-Joplin* Established: 1916 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2028-2029

KCU-COM Joplin

(Additional Location of KCU-COM)

Kansas City University College Osteopathic Medicine-Joplin 2901 St Johns Blvd Joplin, MO 64804 Phone: 417-208-0630 Joshua Cox, DO, FACOFP, Executive Dean and Vice Provost, Medical Affairs Established: 2017 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2028-2029

LECOM

Lake Erie College of Osteopathic Medicine 1858 W. Grandview Blvd Erie, PA 16509-1025 Phone: 814-866-6641 Silvia M. Ferretti, DO, Dean of Academic Affairs, Senior Vice President, and Provost *Branch Campus: LECOM-Bradenton Additional Location: LECOM-Seton Hill, LECOM-Elmira* Established: 1993 Accreditation Status: Accreditation Next Accreditation Visit: AY 2024-2025 **LECOM-Bradenton**

(Branch Campus of LECOM)

Lake Erie College of Osteopathic Medicine-Bradenton 5000 Lakewood Ranch Blvd Bradenton, FL 34211-4909 Phone: 941-756-0690 Mark Kauffman, DO, MS, Med.Ed., PA, Associate Dean of Academic Affairs Established: 2004 Accreditation Status: Accreditation Next Accreditation Visit: AY 2024-2025

LECOM-Elmira

(Additional Location of LECOM)

Lake Erie College of Osteopathic Medicine at Elmira 1 LECOM Place Elmira, NY 14901 Phone: 607-442-3500 Silvia M. Ferretti, DO, Dean of Academic Affairs, Senior VP, Provost Established: 2020 Accreditation Status: Accreditation Next Accreditation Visit: AY 2024-2025

LECOM-Seton Hill

(Additional Location of LECOM)

Lake Erie College of Osteopathic Medicine at Seton Hill 20 Seton Hill Dr Greensburg, PA 15601 Phone: 724-552-2880 Silvia M. Ferretti, DO, Dean of Academic Affairs, Senior VP, Provost Established: 2009 Accreditation Status: Accreditation Next Accreditation Visit: AY 2024-2025

LMU-DCOM

Lincoln Memorial University-DeBusk College of Osteopathic Medicine 6965 Cumberland Gap Pkwy Harrogate, TN 37752 Phone: 423-869-7200 Christopher Loyke, DO, Dean and Chief Academic Officer *Additional Location: LMU-DCOM-Knoxville* Established: 2007 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2032-2033

LMU-DCOM-Knoxville

(Additional Location of LMU-DCOM)

Lincoln Memorial University-DeBusk College of Osteopathic Medicine 9737 Cogdill Road Knoxville, TN 37932 Phone: 865-338-5800 Christopher Loyke, DO, Dean and Chief Academic Officer Established: 2019 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2032-2033

LUCOM

Liberty University College of Osteopathic Medicine 306 Liberty View Lane Lynchburg, VA 24505 Phone: 434-592-6400 Joseph Johnson, DO, FACOOG (Dist), Dean Established: 2014 Accreditation Status: Accreditation Next Accreditation Visit: AY 2024-2025

MSUCOM

Michigan State University College of Osteopathic Medicine 965 Wilson Rd East Lansing, MI 48824 Phone: 517-355-9616 Andrea Amalfitano, DO, PhD, DABMG, Dean *Additional Locations: MSU-COM-Detroit, MSU-COM-Macomb* Established: 1971 Accreditation Status: Accreditation Next Accreditation Visit: AY 2027-2028

MSUCOM at Detroit Medical Center

(Additional Location of MSUCOM) Michigan State University College of Osteopathic Medicine at Detroit Medical Center 4707 St Antoine Detroit, MI 48201 Phone: 517-884-9600 Andrea Amalfitano, DO, PhD, Dean Established: 2009 Accreditation Status: Accreditation Next Accreditation Visit: AY 2027-2028 Page 6 of 17

MSUCOM at Macomb University Center

(Additional Location of MSUCOM)

Michigan State University College of Osteopathic Medicine at Macomb University Center 44575 Garfield Rd Clinton Township, MI 48038 Phone: 586-263-6731 Andrea Amalfitano, DO, PhD, Dean Established: 2009 Accreditation Status: Accreditation Next Accreditation Visit: AY 2027-2028

MU-COM

Marian University College of Osteopathic Medicine 3200 Cold Spring Rd Indianapolis, IN 46222-1960 Phone: 317-955-6000 Amanda Wright, DO, Dean Established: 2013 Accreditation Status: Accreditation Next Accreditation Visit: AY 2023-2024

MWU/AZCOM

Midwestern University/Arizona College of Osteopathic Medicine 19555 N. 59th Avenue Glendale, AZ 85308 Phone; 623-572-3300 Lori Kemper, DO, Dean Established: 1996 Accreditation Status: Accreditation Next Accreditation Visit: AY 2028-2029

MWU/CCOM

Midwestern University/Chicago College of Osteopathic Medicine 555 31st Street Downers Grove, IL 60515 Phone: 630-696-4400 Thomas Boyle, DO, FACOEP, FACEP, Dean Established: 1900 Accreditation Status: Accreditation Next Accreditation Visit: AY 2022-2023 NoordaCOM

Noorda College of Osteopathic Medicine 198 East 1600 South Street Provo, UT 84606 Phone: 385-375-8724 John Dougherty, DO, FACOFP, FAOASM, FAODME, Dean and Chief Academic Officer Established: 2021 Accreditation Status: Pre-Accreditation Next Accreditation Visit: AY 2025-2026

NSU-KPCOM

Nova Southeastern University Kiran C Patel College of Osteopathic Medicine 3300 S. University Drive Fort Lauderdale, FL 33328 Phone: 954-242-1400 Elaine M. Wallace, DO, Dean *Additional Location: NSU-KPCOM-Clearwater* Established: 1981 Accreditation Status: Accreditation

Next Accreditation Visit: AY 2024-2025

NSU-KPCOM Clearwater

(Additional Location of NSU-KPCOM)

Nova Southeastern University Kiran C Patel College of Osteopathic Medicine - Clearwater 3400 Gulf to Bay Blvd Tampa, FL 33759 Phone: 813-574-5200 Elaine M. Wallace, DO, Dean Established: 2019 Accreditation Status: Accreditation Next Accreditation Visit: AY 2024-2025

NYITCOM

New York Institute of Technology College of Osteopathic Medicine 101 Northern Boulevard Old Westbury, NY 11568-8000 Phone: 516-686-3747 Nicole Wadsworth, DO, FACOEP, FACEP, Dean *Additional Location: NYITCOM-Jonesboro, AR* Established: 1977 Accreditation Status: Accreditation Next Accreditation Visit: AY 2029-2030

NYITCOM at Arkansas State

(Additional Location of NYITCOM)

New York Institute of Technology College of Osteopathic Medicine at Arkansas State P.O. Box 119 State Univeristy, AR 72467 Phone: 870-972-2786 Nicole Wadsworth, DO, FACOEP, FACEP, Dean Established: 2016 Accreditation Status: Accreditation Next Accreditation Visit: AY 2029-2030

OSU-COM

Oklahoma State University Center for Health Sciences College of Osteopathic Medicine 1111 W. 17th Street Tulsa, OK 74107 Phone: 800-799-1972 Dennis Blankenship, DO, Dean *Additional Location: OSU-COM-Cherokee Nation* Established: 1973 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2032-2033

OSU-COM-Cherokee Nation

(Additional Location of OSU-COM)

Oklahoma State University College of Osteopathic Medicine - Cherokee Nation 19500 E. Ross St. Tahlequah, OK 74464 Phone: 918-525-6191 Dennis Blankenship, DO, Dean Established: 2020 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2032-2033

OU-HCOM

Ohio University-Heritage College of Osteopathic Medicine 191 W Union Street Athens, OH 45701 Phone: 800-345-1560 Kenneth H. Johnson, DO, FAAO, Executive Dean and Chief Medical Affairs Officer *Additional Locations: OU-HCOM-Cleveland, OU-HCOM-Dublin* Established: 1976 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2031-2032

OU-HCOM - Cleveland

(Additional Location of OU-HCOM)

Ohio University-Heritage College of Osteopathic Medicine - Cleveland 4180 Warrensville Center Rd Warrensville Heights, OH 44122 Phone: 800-345-1561 Kenneth H. Johnson, DO, FAAO, Executive Dean and Chief Medical Affairs Officer Established: 2015 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2031-2032

OU-HCOM - Dublin

(Additional Location of OU-HCOM)

Ohio University-Heritage College of Osteopathic Medicine - Dublin 6775 Bobcat Way Dublin, OH 43016 Phone: 800-345-1562 Kenneth H. Johnson, DO, FAAO, Executive Dean and Chief Medical Affairs Officer Established: 2014 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2031-2032

PCOM

Philadelphia College of Osteopathic Medicine
4170 City Ave
Philadelphia, PA 19131-1610
Phone: 800-999-6998
Peter Frederick Bidey, DO, MSEd, FACOFP, Dean and Chief Academic Officer
Branch Campus: PCOM-GA
Additional Location: PCOM-Moultrie
Established: 1898
Accreditation Status: Accreditation with Exceptional Outcome

Next Accreditation Visit: AY 2028-2029

PCOM-GA

(Branch Campus of PCOM)

Georgia Campus-Philadelphia College of Osteopathic Medicine 625 Old Peachtree Rd Suwanee, GA 30024 Phone: 678-225-7500 Andrea Mann, DO, FAAP, Dean Established: 2005 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2028-2029

Page 11 of 17

PCOM-Moultrie

(Additional Location of PCOM)

Philadelphia College of Osteopathic Medicine-Moultrie
2050 Tallokas Road
Moultrie, GA 31768
Phone: 229-668-3110
Peter Frederick Bidey, DO, MSEd, FACOFP, Dean and Chief Academic Officer
Established: 2019
Accreditation Status: Accreditation with Exceptional Outcome
Next Accreditation Visit: AY 2028-2029

PNWU-COM

Pacific Northwest University of Health Sciences College of Osteopathic Medicine 111 University Pkway, Suite 202 Yakima, WA 98901 Phone: 509-452-5100 Thomas Scandalis, DO, FAOASM, Dean Established: 2008 Accreditation Status: Accreditation Next Accreditation Visit: AY 2024-2025

Rowan-VirtuaSOM

Rowan-Virtua School of Osteopathic Medicine One Medical Center Drive Stratford, NJ 08084 Phone: 856-566-6000 Richard T. Jermyn, DO, FAAPMR, Interim Dean *Additional Location: Rowan-VirtualSOM-Sewell* Established: 1976 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2031-2032

Rowan-VirtuaSOM-Sewell

(Additional Location of Rowan-VirtuaSOM) Rowan-Virtua School of Osteopathic Medicine 1474 Tanyard Rd Sewell, NJ 08080 Phone: 856-566-6001 Richard T. Jermyn, DO, FAAPMR, Interim Dean Established: 2021 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2031-2032

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RVUCOM

Rocky Vista University College of Osteopathic Medicine 8401 Chambers Rd Parker, CO 80134 Phone: 303-373-2008 Heather Ferrill, DO, MS, MEdL, Dean *Branch Campus(es): RVU-MCOM Additional Location: RVU-COM-South Utah*

Established: 2008 Accreditation Status: Accreditation Next Accreditation Visit: AY 2025-2026

RVU-MCOM

(Branch Campus of RVU-COM)

Rocky Vista University - Montana College of Osteopathic Medicine 4130 Rocky Vista Way Billings, MT 59106 Phone: 406-901-2700 David J. Park, DO, FAAFP, FACOFP, Founding Dean, VP Established: 2023 Accreditation Status: Accreditation Next Accreditation Visit: AY 2025-2026

<u>RVUCOM-South Utah</u>

(Additional Location of RVU-COM)

Rocky Vista University College of Osteopathic Medicine - Southern Utah 255 E. Center St Ivins, UT 84738 Phone: 435-222-1236 Heather Ferrill, DO, MS, MEdL, Dean Established: 2017 Accreditation Status: Accreditation Next Accreditation Visit: AY 2025-2026

SHSU-COM

Sam Houston State University College of Osteopathic Medicine 925 City Central Ave Houston, TX 77340 Phone: 936-294-4719 Thomas J. Mohr, MS, DO, FACOI, FAOGME, Dean Established: 2020 Accreditation Status: Pre-Accreditation Next Accreditation Visit: AY 2023-2024

Page 13 of 17

TouroCOM

Touro College of Osteopathic Medicine 230 W. 125th Street New York, NY 10027 Phone: 646-981-4500 Kenneth J. Steier, DO, MBA, MPH, MHA, MGH, Executive Dean *Additional Locations: TouroCOM-Middletown, TouroCOM-Great Falls* Established: 2007 Accreditation Status: Accreditation Next Accreditation Visit: AY 2023-2024

TouroCOM-Middletown

(Additional Location of TouroCOM)

Touro College of Osteopathic Medicine - Middletown 60 Prospect Ave Middletown, NY 10940 Phone: 646-981-4501 Kenneth J. Steier, DO, MBA, MPH, MHA, MGH, Executive Dean Established: 2023 Accreditation Status: Accreditation Next Accreditation Visit: AY 2023-2024

TouroCOM-Great Falls

(Additional Location of TouroCOM)

Touro College of Osteopathic Medicine - Great Falls 2801 18th Avenue South Great Falls, MT 59405 Phone: 646-981-4502 Kenneth J. Steier, DO, MBA, MPH, MHA, MGH, Executive Dean Established: 2014 Accreditation Status: Accreditation Next Accreditation Visit: AY 2023-2024

TUCOM

Touro University College of Osteopathic Medicine-CA 1310 Club Dr Vallejo, CA 94592 Phone: 707-638-5200 Tami Hendriksz, DO, FACOP, FAAP, Dean *Branch Campus(es): TUNCOM* Established: 1997 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2031-2032

Page 14 of 17

TUNCOM

(Branch Campus of TUCOM)

Touro University Nevada College of Osteopathic Medicine 874 American Pacific Henderson, NV 89014 Phone: 702-777-8687 Wolfgang G. Gilliar, DO, FAAPMR, Dean and Chief Academic Officer Established: 2004 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2031-2032

UIWSOM

University of the Incarnate Word School of Osteopathic Medicine 4301 Broadway San Antonio, TX 78235 Phone: 210-283-6994 John T. Pham, DO, Dean and Chief Academic Officer Established: 2017 Accreditation Status: Accreditation Next Accreditation Visit: AY 2027-2028

UNECOM

University of New England College of Osteopathic Medicine 11 Hills Beach Rd Biddeford, ME 04005 Phone: 800-477-4863 Jane E. Carreiro, DO, Dean and VP, Health Affiars Established: 1978 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2027-2028

UNTHSC/TCOM

University of North Texas Health Science Center/Texas College of Osteopathic Medicine 3500 Camp Bowie Blvd Fort Worth, TX 76107-2644 Phone: 817-735-2200 Frank A. Filipetto, DO, CPPS, FACOFP, Dean Established: 1970 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2027-2028

UP-KYCOM

University of Pikeville-Kentucky College of Osteopathic Medicine 147 Sycamore St Pikeville, KY 41501-1194 Phone: 606-218-5400 Joe Kingery, DO, MBA, FACOFP, FAAFP, Dean Established: 1997 Accreditation Status: Accreditation Next Accreditation Visit: AY 2028-2029

VCOM

Edward Via College of Osteopathic Medicine 2265 Kraft Dr Blacksburg, VA 24060 Phone: 540-231-4000 Jan M. Willcox, DO, FACOFP-dist., Dean *Branch Campuses: VCOM-Auburn, VCOM-Carolinas, VCOM-Louisiana* Established: 2003 Accreditation Status: Accreditation with Heightened Monitoring Next Accreditation Visit: AY 2024-2025

VCOM-Auburn

(Branch Campus of VCOM) Edward Via College of Osteopathic Medicine-Auburn 910 S. Donahue Dr Auburn, AL 36382 Phone: 334-844-1928 Heath Parker, DO, Dean Established: 2015 Accreditation Status: Accreditation with Heightened Monitoring Next Accreditation Visit: AY 2024-2025

VCOM-Carolinas

(Branch Campus of VCOM) Edward Via College of Osteopathic Medicine-Carolinas 350 Howard Street Spartanburg, SC 29303 Phone: 864-398-5000 Matthew D. Cannon, DO, Dean Established: 2011 Accreditation Status: Accreditation with Heightened Monitoring Next Accreditation Visit: AY 2024-2025

Page 16 of 17

VCOM-Louisiana

(Branch Campus of VCOM)

Edward Via College of Osteopathic Medicine-Louisiana 4408 Bon Aire Drive Monroe, LA 71230 Phone: 318-342-7100 Mark A. Sanders, DO, JD, MPH, LLM, MS, FACOFP, Dean Established: 2020 Accreditation Status: Accreditation with Heightened Monitoring Next Accreditation Visit: AY 2024-2025

WCUCOM

William Carey University College of Osteopathic Medicine
710 William Carey Parkway, WCU Box 207
Hattiesburg, MS 39401
Phone: 601-318-6572
Italo R. Subbarao, DO, MBA, Dean
Established: 2010
Accreditation Status: Accreditation with Heightened Monitoring
Next Accreditation Visit: AY 2024-2025

WesternU/COMP

Western University of Health Sciences/College of Osteopathic Medicine of the Pacific 309 East 2nd Street / College Plaza Pomona, CA 91766-1854 Phone: 909-623-6116 David A. Connett, DO, FACOFP-dist., Acting Dean *Additional Location: WesternU/COMP-Northwest* Established: 1978 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2032-2033

WesternU/COMP-Northwest

(Additional Location of WesternU/COMP) Western University of Health Sciences/College of Osteopathic Medicine of the Pacific-Northwest 200 Mullins Drive Lebanon, OR 97355 Phone: 541-259-0200 David A. Connett, DO, FACOFP-dist., Acting Dean Established: 2011 Accreditation Status: Accreditation with Exceptional Outcome Next Accreditation Visit: AY 2032-2033

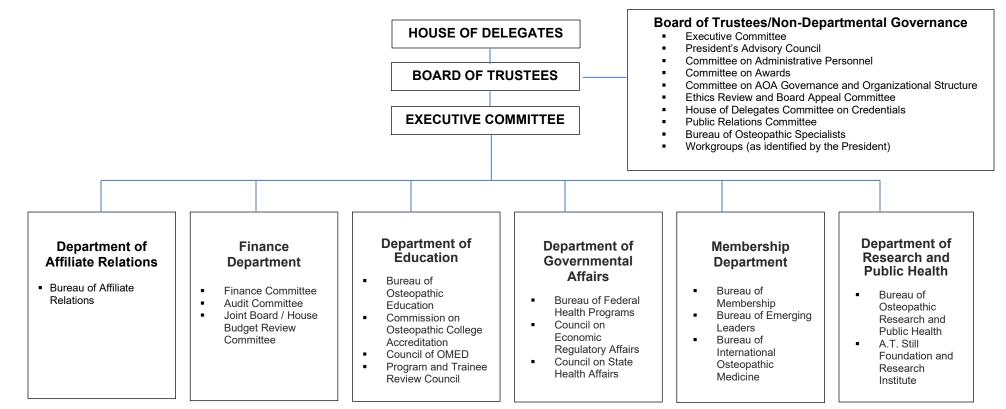
Page 17 of 17

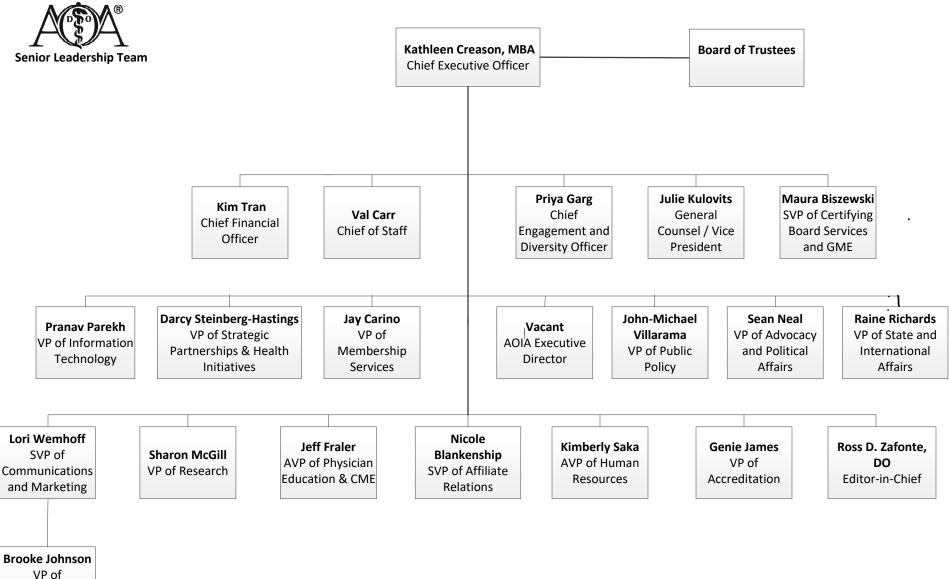
WVSOM

West Virginia School of Osteopathic Medicine 400 North Lee Street Lewisburg, VW 24901 Phone: 304-647-6270 Linda Boyd, DO, Dean and VP, Academic Affairs Established: 1974 Accreditation Status: Accreditation Next Accreditation Visit: AY 2029-2030



GOVERNANCE ORGANIZATIONAL CHART



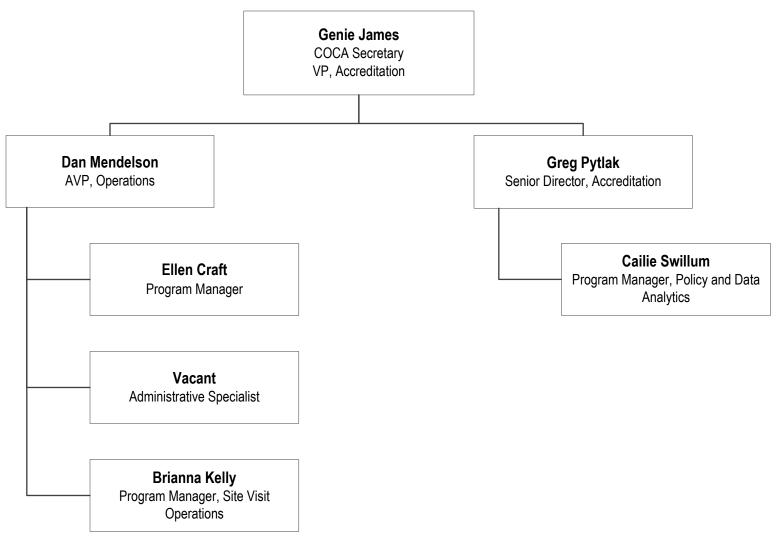


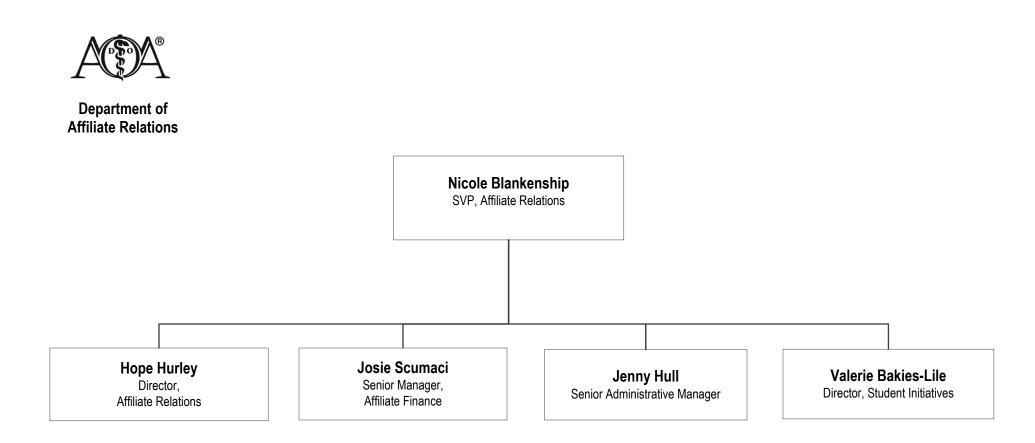
Communications

and Marketing

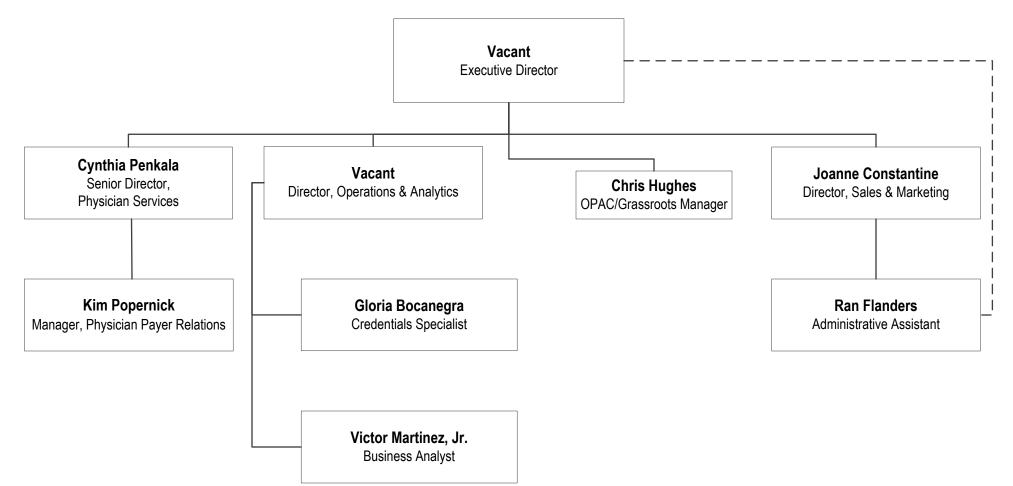


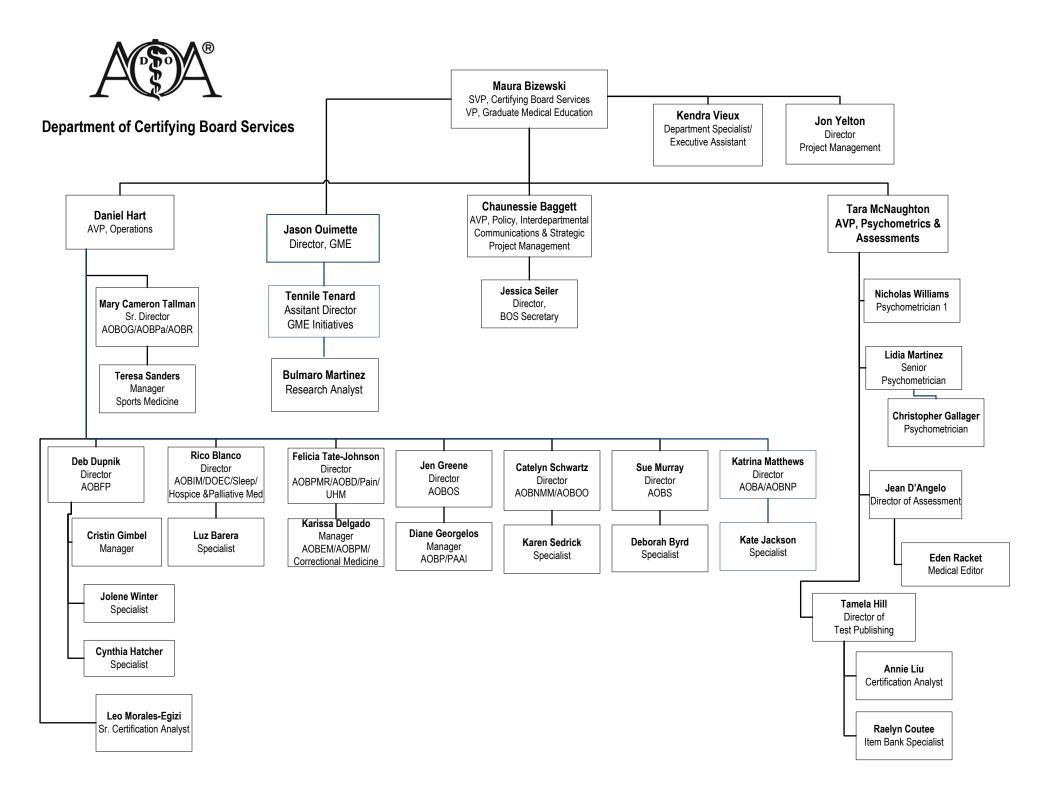
Department of Educational Affairs – Division of Accreditation





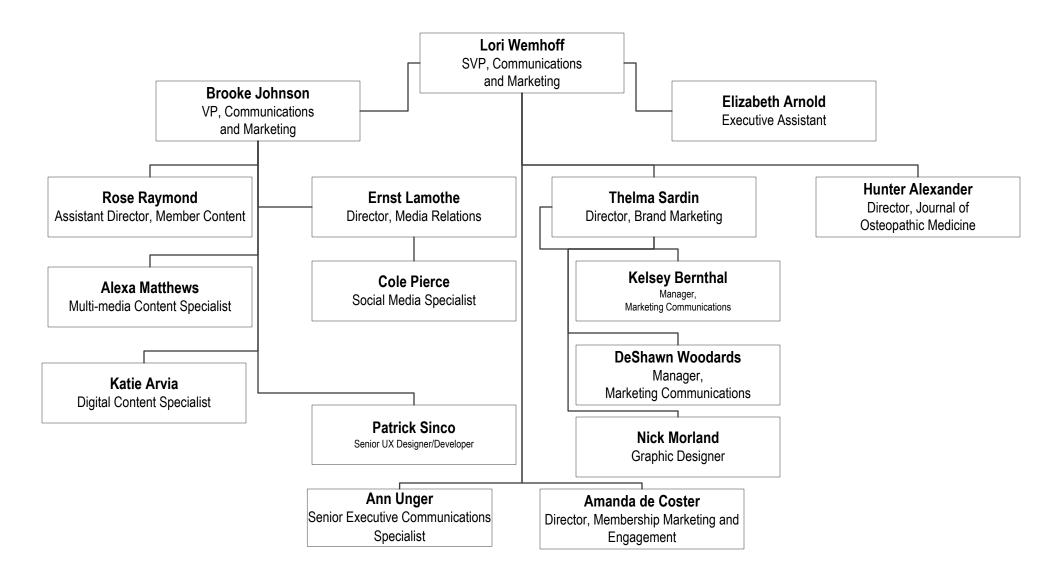






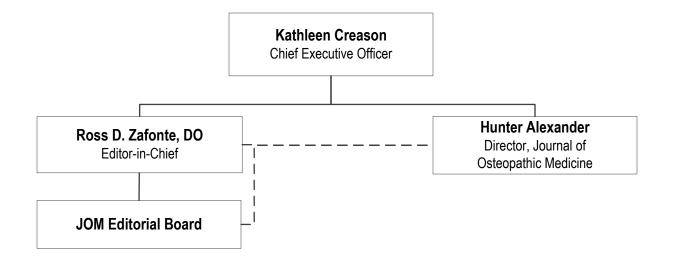


Department of Communications and Marketing



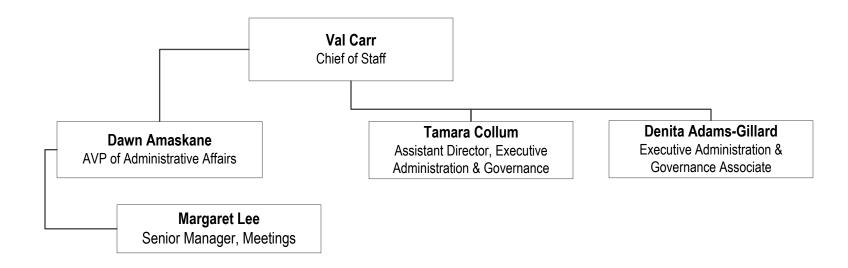


Department of Communications and Marketing – Journal of Osteopathic Medicine



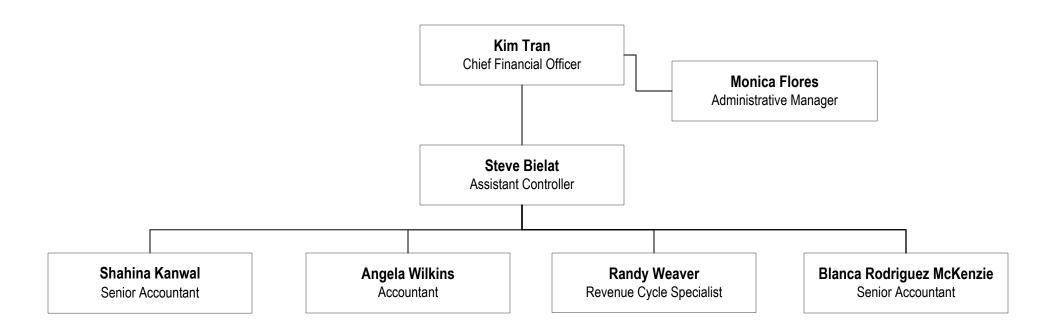


Department of Executive Administration & Governance



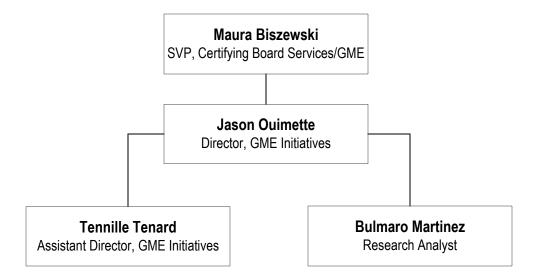


Department of Finance



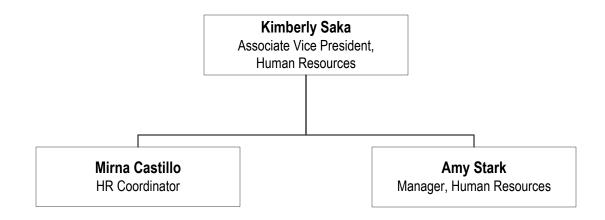


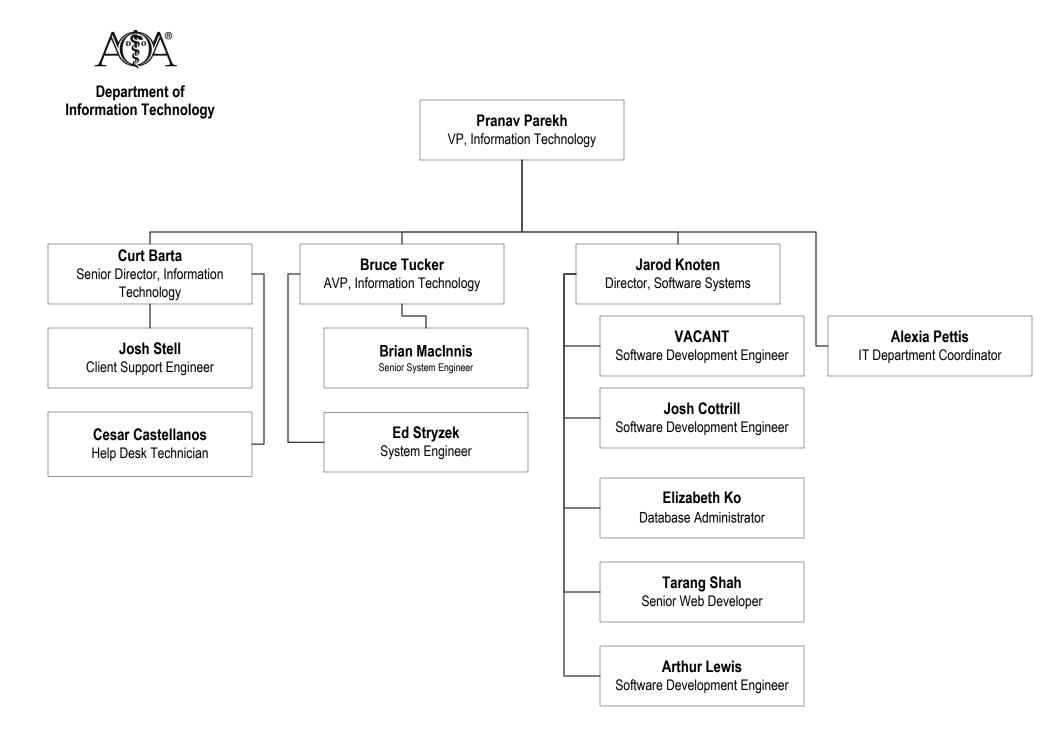
Department of Educational Affairs – Division of Graduate Medical Education





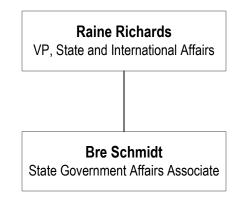
Department of Human Resources





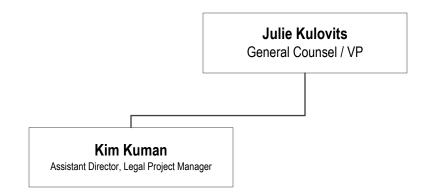


Department of State and International Affairs



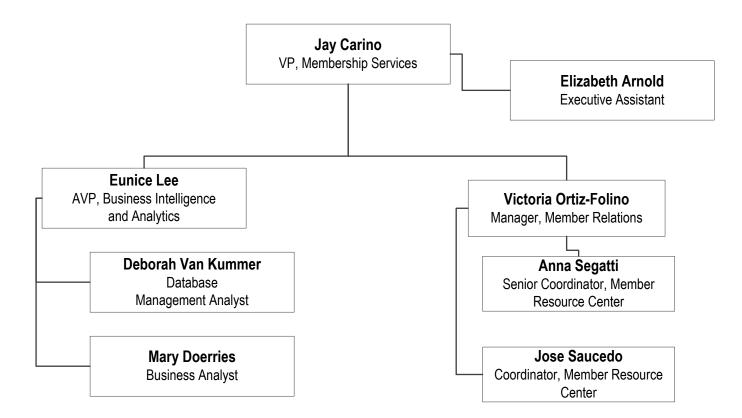


Department of Legal Affairs



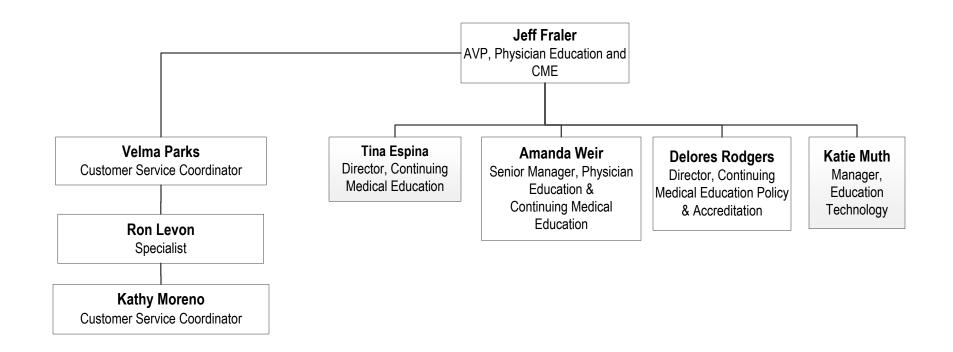


Department of Membership



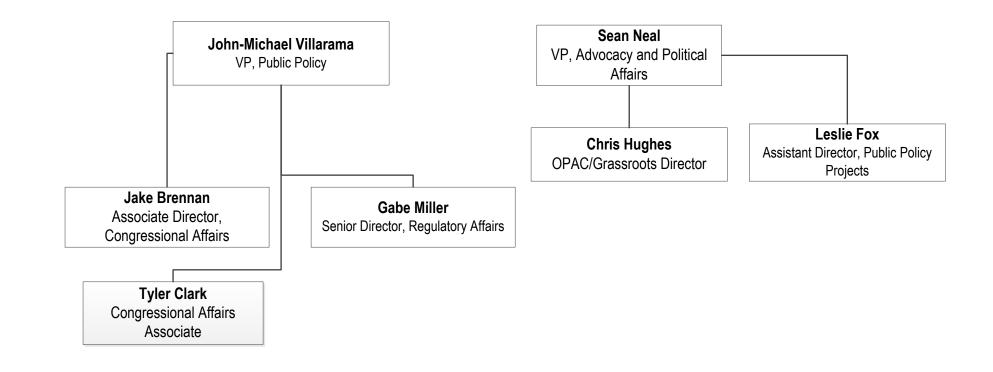


Department of Educational Affairs – Division of Physician Education and CME



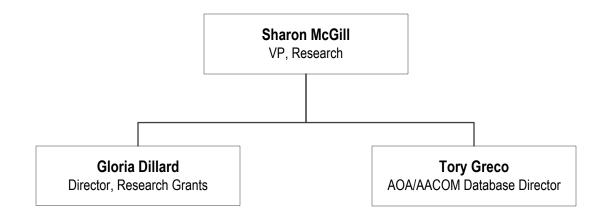


Department of Public Policy





Department of Research





Department of Executive Administration & Governance – Division of Strategic Partnerships & Health Initiatives

