Dear colleagues,

In addition to the unprecedented challenges of navigating the global pandemic, the past year delivered significant opportunities for organizational introspection, adaptation and resilience. Alongside the rest of the world, the AOA is reexamining and redefining how we work, how we provide value and how we measure success. We’re building a blueprint for the future that we believe will help us emerge from the COVID-19 crisis as a stronger and more impactful ally and advocate for our members.

At the outset of the fiscal year, we challenged our team to reimagine how we meet the osteopathic profession’s need for education, connection and community—both within the virtual environment necessitated by COVID, as well as the post-pandemic world. We first set our sights on transforming the AOA’s annual conference, OMED, from a traditional in-person meeting to a fully virtual experience offering 180+ hours of top-rated didactic education, networking opportunities and wellness programming. In addition, we morphed the AOA’s annual DO Day event into a virtual leadership and advocacy summit offering two days of education and professional development programming. Both meetings received great reviews and have changed the way we will deliver educational content in the future. Though we look forward to returning to in-person meetings, we will move forward using a hybrid approach to ensure a high degree of convenience and flexibility for all members of our profession. The AOA’s role isn’t to define your needs, but to fulfill them.

We also responded swiftly and strongly last fall when the osteopathic medical profession came under attack from members of the media and celebrities who mischaracterized and questioned the credentials of osteopathic physicians, specifically Sean Conley, DO, who served as Physician to the President of the United States from 2018-21. The AOA deployed a rapid response plan to educate the public and dispel inaccuracies in the media, resulting in increased public awareness of the education, training and value that DOs, and their unique credentials, bring to the healthcare system. Through the efforts and specific intent of our leaders and staff, we seized control of the narrative and replaced the misinformation and falsehoods with accurate and appropriate facts. We will continue to advocate for osteopathic physicians and medical students when situations like this arise, just as we advocate for the profession every day through our grassroots efforts and partnerships with our state affiliates and specialty colleges. We are taking these efforts a step further with a new osteopathic brand awareness campaign, which will launch this summer in national print, digital, television and radio markets.

The following sections of this report provide more detail on these initiatives, as well as others we’ve established to advance the osteopathic profession and provide value to our members. We look forward to working with our osteopathic family in the year ahead to ensure continued growth and success.

Sincerely,

Thomas L. Ely, DO
2020-21 AOA President

Kevin M. Klauer, DO, EJD
AOA Chief Executive Officer
We advocated for DOs & osteopathic medical students

Through grassroots efforts:
The AOA deployed more than 36 federal and state grassroots advocacy alerts in FY21, which generated more than 16,516 actions. Included in this total are 1,629 individual tweets that were directed at media outlets to combat misinformation about the osteopathic profession. Collectively, these legislative policy efforts helped secure the following policy changes:

- A resolution to balance billing disputes that is fair to physicians while ending surprise medical billing for patients.
- Suspension of mandatory cuts to Medicare Part B payments for 2021.
- Increased funding for personal protective equipment and other essential medical supplies for healthcare professionals.
- Financial relief for physicians through the Provider Relief Fund.

With a transformed DO Day:
More than 850 people registered for DO Day 2021, including individuals who registered for extended access to on-demand educational content. Of this total, approximately 400 DOs and medical students from 44 states participated in 288 Congressional meetings. One of the most visible metrics indicating success for DO Day is the measurable impact on legislative activity. This year, DO Day meetings with lawmakers and staff helped secure wins on three major issues:

- $330 million increase in funding for the Teaching Health Center Graduate Medical Education (THCGME) Program.
- $140 million to fund the initiative in the Dr. Lorna Breen Provider Protection Act.
- Delay of the 2% sequestration cut in Medicare payments planned for March 2021 until the end of the year.

850
DOs, osteopathic medical students and supporters of the profession registered for DO Day 2021

$330M
increase in funding for the Teaching Health Center Graduate Medical Education (THCGME) Program

$140M
to fund the initiative in the Dr. Lorna Breen Provider Protection Act
We advocated for DOs & osteopathic medical students

Through state government affairs:
In FY21, the AOA partnered with osteopathic affiliates to send more than 20 grassroots alerts and more than 30 letters covering 18 legislative issues to lawmakers and osteopathic physicians in 28 states. So far, these activities have resulted in 13 advocacy wins, including:

• Enhanced coverage and payment for telemedicine in Arkansas and Maryland.
• Defeat of non-physician clinician scope of practice expansion legislation in Illinois, Louisiana, Mississippi, North Carolina, Texas and Virginia.

Through federal advocacy:
In FY21, the AOA joined together with osteopathic affiliates on at least seven federal sign-on letters. Three of these letters contributed to the following policy wins:

• Expansion of the Paycheck Protection Program to include 501(c)(6) organizations.
• Withdrawal of the Most-favored Nation drug pricing rule, which would have negatively impacted access to Medicare Part B drugs.
• Prevention of Medicare payment cuts.

With regulatory affairs outreach:
In FY21, the AOA submitted more than 15 comment letters to federal agencies advocating the AOA’s position on telehealth services, payment and quality measurement for physician and hospital services, drug pricing for Medicare Part B and D, value-based payment requirements for state Medicaid programs, HIPAA, health information technology and equity in clinical practice.
We defended the osteopathic profession

From misinformation in the media:
In October, the osteopathic medical profession came under fire when the credentials of Sean Conley, DO, who served as physician to former President Donald Trump, were questioned by members of the media and some celebrities. Several media reports incorrectly implied that osteopathic physicians (DOs) are less qualified than allopathic physicians (MDs).

In response, the AOA’s staff and Board of Trustees mobilized an aggressive internal and external campaign to set the record straight and correct inaccuracies across print, television and social media channels, resulting in 838,000 social media impressions and dozens of corrections in media outlets, including the Washington Post and Los Angeles Times.

From offensive advertising:
Last fall, a digital advertisement for FIGS, a professional scrub manufacturing company, showed a scrubs-clad woman wearing a “DO” name badge and holding an upside-down copy of a book titled “Medical Terminology for Dummies.” In response to this insulting and defamatory representation of DOs and female physicians, the AOA demanded immediate removal of the ad. Within hours, the AOA initiated contact with the three principal owners of the company to discuss the offensive ad and outline a path forward that included:

- A published statement of apology.
- OMED attendance by 15 members of the FIGS marketing team to gain a more accurate and informed understanding of the osteopathic profession.
- A $100,000 donation in support of the AOA’s efforts toward advancing diversity and gender equity in medicine, and enhancing understanding of the osteopathic profession.

838,000
social media impressions and dozens of corrections in media outlets, including the Washington Post and Los Angeles Times

15
members of the FIGS marketing team participated in OMED to build a deeper understanding of the osteopathic profession

$100,000
donation in support of the AOA’s efforts toward advancing diversity and gender equity in medicine, and enhancing understanding of the osteopathic profession
We defended the osteopathic profession

From scope of practice overreach:
In May, the AOA launched a strong public statement in response to actions taken by the American Academy of Physician Assistants to change the title “Physician Assistant” to “Physician Associate.” Calling for truth in advertising, intellectual honesty and transparency with the use of professional designations of non-physicians, the statement encouraged collaborative discussions among stakeholder organizations to find common ground.

The statement has been viewed more than 43,000 times on the AOA’s website and garnered more than 100,000 views on social media, prompting an outpouring of appreciation from members of the osteopathic profession, as well as positive comments from MDs and PAs. One DO wrote to the AOA: “I am incredibly gratified to see a physician’s professional organization take a stand against encroachment on scope of practice by mid-level providers and the use of misleading titles that confuse patients and erode the meaning of ‘doctor.’”

From policies that create a competitive disadvantage:
In January, the AOA and seven individual physicians filed suit against the American Board of Internal Medicine (ABIM) in the U.S. District Court in Philadelphia, Pennsylvania. The lawsuit challenged an ABIM policy requiring program directors to be ABIM-certified in order to qualify their residents for the ABIM exam. The policy disadvantages DOs certified by the American Osteopathic Board of Internal Medicine (AOBIM), who are fully qualified to serve as ACGME residency program directors.

The AOA and individual physicians have asked the court to enter an injunction barring the ABIM from implementing the policy, arguing there is not data to suggest that AOBIM-certified program directors are less qualified or effective then their ABIM-certified counterparts.

When students and residents face discrimination:
The AOA continually advocates on behalf of osteopathic medical students and residents who encounter discrimination from audition rotation sites and residency programs that exclude DO applicants. In the past year, AOA advocacy has led to policy updates at the following institutions to end discriminatory practices and expand opportunities for osteopathic applicants:

- **Washington University**: Corrected restrictive application language that excluded DOs from eligibility for clinical rotations.
- **University of Virginia**: Updated published criteria for the UVA internal medicine residency program to include DOs.
- **San Francisco Plastic Surgery Match**: Expanded requirements for the San Francisco Plastic Surgery Residency Matching Program to include DO applicants eligible for AOA Board Certification.
- **Hospital for Special Surgery (HSS)**: Corrected published language excluding osteopathic medical students from clinical rotations.
- **Johns Hopkins**: Addressed inequitable registration fees for visiting medical students from non-LCME accredited schools participating in clinical electives.
- **University of Southern Alabama**: Interceded to challenge the practice of excluding osteopathic medical students from participating in orthopedics and general surgery rotations.
- **Albert Einstein College of Medicine**: Worked with school officials to reverse inequitable policies excluding osteopathic medical students from rotations.
- **University of New Mexico**: Updated published application requirements to include both DO and MD candidates for visiting student rotations.
Through a revitalized brand awareness campaign:
Over the past year, the AOA has developed a comprehensive new brand awareness campaign aimed at increasing understanding of the unique approach DOs bring to medicine. The new campaign features 18 DOs representing a broad spectrum of specialties and practice settings.

In addition to informing consumers about the benefits of osteopathic medicine, the new campaign aims to foster pride and enthusiasm among DOs and medical students. Beginning this summer, campaign ads and other assets will be leveraged across multiple platforms, including digital, print, television, radio and social media. The campaign kicked off with televised ads in select markets during the summer Olympic games and will extend through 2022.

By sharing our story:
This past spring, the AOA partnered with content marketing company Mediaplanet to develop and launch a cross-platform media campaign showcasing the osteopathic medical profession. The campaign was prominently featured in the March 24 issue of USA Today, which was circulated to more than 600,000 readers in more than 15 of the country’s largest media markets.

The digital version was delivered via web platforms, social media, e-newsletters, blogs and other online distribution channels, and included participation from the American Osteopathic, the Federation of State Medical Boards, AACOM, and more. Total digital reach included more than 500 markets.
Through the Certifying Board Services Ambassador Program:
Research shows that program directors have a significant influence on residents’ decisions regarding board certification, which is why the AOA launched the Certifying Board Services (CBS) Ambassador Program in February. This program is designed to build relationships with residency program directors and establish AOA Board Certification as the obvious preferred choice for DOs.

The program connects AOA board-certified physician ambassadors with ACGME residency programs to:

• Ensure that program directors understand the inherent value of AOA Board Certification as the only pathway to osteopathically-distinct board certification.
• Share materials that program directors can use to educate residents about AOA Board Certification.
• Encourage program directors (per ACGME policy) to inform residents of all their certification options.
• Educate program directors about the AOA’s 80 years of excellence in competency for board certification.

With longitudinal assessment & remote exams:
The AOA continues work to deliver added value, quality and convenience for all DOs through initial and Osteopathic Continuous Certification. During the past year, the AOA has made great strides in launching innovative solutions that provide a more user-friendly approach toward earning and maintaining board certification.

• This past year, 94% of all written certification exams and 100% of all oral certification exams were proctored remotely. Additional oral exams are set to transition online in the coming months, with the goal of having all exams fully transitioned in early 2022.
• All AOA certifying boards have either replaced or are in the process of replacing the high-stakes in-person recertification exams required for OCC Component 3 with longitudinal assessment. Partnering with the National Board of Osteopathic Medical Examiners, the AOA launched longitudinal assessment on the CATALYST platform earlier this summer, with full transition of all boards to the platform expected by end of 2022.

By welcoming ABMS-certified DOs home:
In November, the AOA announced that osteopathic physicians certified by an American Board of Medical Specialties (ABMS) board can receive reciprocal certification from the AOA’s Certifying Board Services. This opportunity was made available to all DOs certified by an ABMS member board prior to Nov. 21, 2020, and is time-limited.

The new opportunity is designed to bring DOs home, allowing our colleagues to gain AOA certification without encountering obstacles, examinations or added costs. More than 700 ABMS-certified osteopathic physicians have applied for AOA Board Certification through the reciprocity campaign. Since launch of the program, applications have been received in 25 specialties and 39 subspecialties. Maintenance of certification requires participation in Osteopathic Continuous Certification.
With another successful combined match:
Following record-breaking numbers for the first-ever combined National Resident Matching Program (NRMP) Match in 2020, this year’s match resulted in placements for 6,597 new DO residents, a net increase of 359 DO students from the prior year. Final placement numbers will be shared soon, and are expected to align with the 99.3% rate reported in 2020.

Participants matched into residency programs in 39 specialties, which represents a modest increase in specialty areas compared to the previous year. The specialty breakdown for the 2021 Match is consistent with the osteopathic profession’s historic emphasis on careers in primary care, with 55.8% choosing family medicine, internal medicine, pediatrics and combined primary care residencies.

By promoting Osteopathic Recognition:
Throughout the transition to a single accreditation system, the AOA collaborated with AACOM and ACGME to ensure the preservation of osteopathic distinctiveness, with ACGME establishing Osteopathic Recognition as one of their programmatic designations. All ACGME-accredited programs may receive Osteopathic Recognition by offering education in osteopathic principles and practice.

As of May 31, 2021:
- 260-plus programs have received Osteopathic Recognition.
- More than 3,000 residents are training in designated osteopathic positions, including more than 120 allopathic physicians.

We supported the future of DOs in GME

6,597
new DO residents

260+
programs have received Osteopathic Recognition
We enhanced CME offerings

With a virtual OMED 2020:
The AOA hosted more than 3,800 DOs, medical students and others for the first-ever virtual OMED conference in October. The four-day conference offered nearly 180 hours of didactic programming from 13 osteopathic specialty colleges—all delivered via an easy-to-use interactive online platform. In addition to specialty-focused sessions, OMED highlights included inspiring keynotes from Diana Nyad and Charlie Cook, physician wellness segments, and a full day of education focused on pain management.

With streamlined reporting capabilities:
Last fall, the AOA announced that DOs could begin submitting AOA Category 1 and 2 CME activities online, avoiding the hassle of faxing and mailing attestation forms and documentation. Self-reported Category 1 activities from non-AOA-accredited sponsors are now processed and recorded within 5-7 business days, which is much improved from prior performance. Self-reported Category 2 activities, including AMA PRA Category 1 Credit®, are now posted instantly. The online service is a benefit of membership, and available to non-members with an annual subscription fee.

Through Joint Providership:
In Summer 2020, the AOA launched a new CME Joint Providership program. In addition to AOA Category 1A, 1B, 2A and 2B credit, the new program enables the AOA to offer AMA PRA Category 1 Credit® for CME programming directly or through joint providership with its constituencies. In the past year, the program has accredited 44 activities with AMA PRA Category 1 Credit.
With a new scientific journal:
After 119 years of publishing as the Journal of the American Osteopathic Association (JAOA), the Journal of Osteopathic Medicine (JOM) launched its first issue under a new name in January. The JOM moved from print to online, open access. This format is at the forefront of publishing in the world of medical journals, especially those that feature NIH-funded research. The AOA is committed to providing equitable, free, and expansive public access to the journal’s body of academic research demonstrating the value and efficacy of osteopathic medicine.

With a new osteopathic research database:
In May, the AOA announced launch of the Osteopathic Research Database, a new member benefit designed to increase access to osteopathic research. The search tool is the only online database of its kind dedicated exclusively to osteopathic medicine, featuring nearly 9,000 research abstracts and references on osteopathic medicine topics. Indexed citations include articles from the Journal of Osteopathic Medicine, the Journal of the American Osteopathic Association and PubMed, dating back to 1960. Natural language search capabilities facilitate searches by keyword, title, author and publication year. The database will be updated regularly with new citations and indexed articles.
With an updated AOA Strategic Plan:
In April, the AOA unveiled a new Strategic Plan, which will guide the association’s work in service of its members and the osteopathic profession during the next five years. The culmination of a nine-month planning process informed through virtual focus groups and membership survey findings, the new Strategic Plan aims to redefine, redirect and revitalize the impact of the AOA within the osteopathic profession and in the lives of more than 168,000 osteopathic physicians and medical students.

In addition to identifying seven priority objectives and supporting strategies for implementation, the Strategic Plan establishes the following Mission and Vision Statements that redefine the AOA’s purpose, values and outlook for our members and profession:

**Mission:** The AOA is the professional home for osteopathic physicians and students, providing education, board certification and is the champion of the advancement of the distinctive osteopathic profession.

**Vision:** The AOA aspires to be the “North Star” of the osteopathic profession by advancing the interests of osteopathic physicians and students and promoting excellence in patient care consistent with the distinctive osteopathic philosophy.

Through a renewed focus on diversity, equity and inclusion:
In April, the AOA adopted a new plan aimed at creating and sustaining a community that promotes and values diversity, equity and inclusion, including the equitable delivery of health care.

The AOA’s plan includes four major objectives:
1. Develop and maintain an inclusive workplace environment that welcomes and incorporates diverse perspectives and backgrounds at all levels within the organization.
2. Create processes and programs to ensure our physician leadership is reflective of the osteopathic community and that the profession more broadly reflects the patient populations it serves.
3. Demonstrate the organizational impact of diversity, equity and inclusion on our professional community, membership, leadership and workforce.
4. Communicate our progress with internal and external stakeholders.
Under the leadership of a newly-reorganized Department of Affiliate Relations, the AOA greatly increased the level of resources, support and assistance provided to osteopathic state affiliates and specialty colleges in 2021, including the following:

- A fully redesigned Affiliate News weekly newsletter, which provides affiliate leaders with relevant news, announcements and resources.
- The launch of a redesigned online Affiliate Workspace, providing access to timely and relevant affiliate updates, resource libraries, association management resources and more.
- Reinstatement of the Bob E. Jones, CAE, Award, which recognizes outstanding affiliate executive leaders for outstanding service to the osteopathic profession.
- The launch of AOA 101, a video series that provides affiliate leaders with an overview of each AOA department and the services they offer.
- Continuation of the popular CEO Quarterly Affiliate Calls, which garnered a 25% increase in attendance compared with the previous year.
- A total of 11 Affiliate Town Hall Meetings focused on topics of interest for osteopathic affiliate leaders and staff.
- Optional inclusion of osteopathic affiliates on the AOA dues invoice. A total of 29 organizations participated in the program in 2021, a 70% increase from the previous year.

29 affiliate organizations opted in for inclusion on the AOA dues invoice

25% increase in attendance for CEO Quarterly Affiliate Calls
The hard work and successes won over the last year position the AOA to deliver even greater support, resources and service to our members and profession in the coming year. We look forward to working on behalf of more than 168,000 DOs and osteopathic medical students in the U.S. to advance the following goals for 2021-22:

- Enhance pride in the osteopathic profession, through:
  - Ambassadorship
  - Internal branding and pride
  - Professional advocacy

- Promote osteopathically-distinctive practice, through:
  - AOA Board Certification
  - Osteopathic Recognition
  - Osteopathically-distinct CME
  - Osteopathic brand campaign

- Embrace the future of our profession, through:
  - Mentorship of premedical students
  - Support for osteopathic medical students
  - Diversity, equity and inclusion
  - Leadership development
### STATEMENT OF FINANCIAL POSITION

#### ASSETS

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<tr>
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<td><strong>CASH &amp; INVESTMENTS</strong></td>
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<td>Dale Dodson</td>
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#### LIABILITIES & NET ASSETS

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#### NET ASSETS

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<td>Osteopathic Research Development Fund</td>
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<td><strong>TOTAL LIABILITIES &amp; NET ASSETS</strong></td>
<td>$72,840,406</td>
<td>$88,008,364</td>
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*Due to COVID-19 pandemic-related deferral of revenue from Certifying Board Services.*
YEAR TO DATE STATEMENT OF ACTIVITIES
FISCAL PERIOD JUNE 1 THROUGH MAY 31, 2021

**YTD REVENUES FY 2021 Actual**

- Certifying Boards: $4,402,581
- Accreditation: $3,722,152
- Meetings & Administration: $2,723,616
- Research: $641,457
- Presidential Relations (Meetings): $537,941
- State Government: $335,502
- Legal: $1,011,536
- Education: $1,058,568
- Publications: $1,142,097
- Finance: $1,166,202
- Communications: $1,384,593
- Executive: $1,572,845

**YTD EXPENSES FY 2021 Actual**

- Certifying Boards: $5,385,939
- Meeting & Administration: $1,723,913
- Executive: $1,572,845
- Communications: $1,384,593
- Finance: $1,166,202
- Publications: $1,142,097
- Education: $1,058,568
- Legal: $1,011,536
- State Government: $335,502
- Human Resources: $435,755
- International Affairs: $220,124
- Research: $806,713
- Accreditation: $806,713
- Presidential Relations (Meetings): $537,941

Expenses outpaced revenue in FY21 due to investment in rebuilding and enhancing Certifying Board Services and due to pandemic-related revenue deferral.

23% REDUCTION IN EXPENSES FROM FY2020 TO FY2021