Dear colleagues,

This has been a year of incredible growth, profound transformation and significant challenges for the osteopathic medical profession. The COVID-19 pandemic has ravaged our communities, threatened our practices and demanded selfless sacrifice from those serving on the front lines and beyond.

And yet, the osteopathic medical profession perseveres.

In fact, adversity bonds us. We’ve proven this time and again through the history of our profession, and COVID-19 will be no different. Despite the challenges we’ve faced this year, we’ve also experienced powerful moments of triumph, achievement and pride.

In addition to supporting DOs and osteopathic medical students during the pandemic, the AOA invested countless hours and unprecedented effort toward advancing three primary objectives for the year:

- Expanding support of and collaboration with our osteopathic affiliates
- Enhancing AOA member services
- Improving Certifying Board Services

This report will detail the progress we’ve made in these areas, as well as other work to advance, preserve and protect the practice of osteopathic medicine, including the following milestones:

The end of the five-year transition to a single graduate medical education (GME) accreditation system marked the close of one chapter and the beginning of a new era of GME opportunities for our osteopathic graduates. The AOA is well-positioned to continue expansion of these opportunities in service of the osteopathic and graduate medical education communities. Strategies are in place to amplify the osteopathic voice among program directors, advocate for DO students and trainees, and increase the number of training programs with Osteopathic Recognition.

As a testament to the quality of our GME candidates and the outstanding undergraduate medical education provided by our colleges of osteopathic medicine, we celebrated record-breaking match rates for DOs participating in the first-ever combined match, with a final placement rate of more than 99% for candidates initially matching into 38 specialties.

Throughout the year, we launched advancements in the delivery of AOA Board Certification that provide candidates and diplomates with added value, quality and convenience; and reduce the burden of the exam process for many osteopathically board-certified specialists.

We worked at the federal and state policy levels, as the only national organization representing the interests of ALL DOs and osteopathic medical students, to advance legislation resulting in $175 billion for providers in areas heavily impacted by COVID-19, expanded loans for small businesses, funding for PPE and student loan relief.

And we witnessed the heroic efforts of osteopathic physicians and medical students working on the front lines of the pandemic to care for patients and transition their practices to the “new normal.”

The AOA is here for you, and we are more committed than ever to supporting and advancing the practice of osteopathic medicine through selfless service to our members, profession and patients.

Sincerely,

Ronald R. Burns, DO
2019-20 President

Kevin M. Klauer, DO, EJD
Chief Executive Officer
As the COVID-19 pandemic tightened its grip on the nation’s healthcare system in early 2020, the AOA sprang into action to assist osteopathic physicians and medical students navigating the crisis. A survey conducted last May in collaboration with the American Osteopathic Information Association (AOIA), which is the AOA’s tightly-linked 501(c)(6) organization, revealed that 95% of osteopathic physicians had experienced a decline in practice revenue, with more than 40% expecting their revenue to be cut in half or more as a result of the pandemic.

Recognizing these challenges, the AOA launched vigorous efforts to advocate for the osteopathic profession, urging lawmakers to take decisive action to support financial relief, medical liability reform, telehealth expansion, student debt relief and medical leave for the health care workforce. In response to the pandemic, the AOA’s Department of Public Policy:

- Sent more than 10,000 emails and social media posts from AOA members to lawmakers through the AOA’s Osteopathic Advocacy Network.
- Hosted six member webinars featuring public health experts from the CDC, members of Congress and AOA staff.
- Sent more than 40 letters to state and federal lawmakers.
- Secured eight meetings with U.S. Senate offices for state affiliates to engage with lawmakers regarding COVID policy.

In March, the AOIA’s Department of Physician Services launched a COVID-19 rapid response effort that produced more than 20 live and on-demand webinars focused on topics such as implementing telemedicine, navigating HIPAA, rebuilding after the pandemic and managing physician wellness. The webinar series has received more than 12,000 views.

Additionally, AOA members placed more than 250 orders for discounted PPE and booked nearly 1,000 free hotel stays for front line physicians through exclusive AOA agreements and partnerships with industry-leading organizations such as Hilton and American Express.

SUPPORTING ALL PHYSICIANS DURING COVID-19

ADVOCACY DURING COVID-19

10,000 social media posts and emails from AOA members to lawmakers

26 Congressional tele-town hall meetings

40+ legislative comment letters in collaboration with state affiliates
It was a year of transformative change and modernization for the AOA’s 16 specialty certifying boards, led by the Bureau of Osteopathic Specialists and Department of Certifying Board Services. Delivering on our promise to provide a modernized, expedited approach to delivery of relevant and meaningful competency assessment for all osteopathic physicians, the AOA launched multiple innovative programs and technology solutions for initial certification and Osteopathic Continuous Certification (OCC).

With the goal of providing greater ease and flexibility for candidates pursuing initial certification, two AOA certifying boards launched Early Entry Initial Certification (EEIC) programs designed to give resident physicians a head start toward becoming board certified. Specialties currently offering EEIC programs include Family Physicians and Internal Medicine, with other specialties set to launch similar programs.

In addition, all AOA specialty boards have launched or are currently developing longitudinal assessment programs to replace the high stakes recertification exams previously required every 6-10 years. Five specialties, including Emergency Medicine, Anesthesiology, Obstetrics & Gynecology, Radiology and Internal Medicine, launched longitudinal assessment programs this year. Additional programs will launch in the near future.

To provide added convenience for physicians during COVID-19, and also in service of our long-range goal to improve user experience, the AOA’s certifying boards are expediting efforts to offer candidates and diplomates online remote-proctored options for certification and recertification exams. We also implemented operational improvements resulting in reduced processing time for exam score reporting and enhanced psychometric exam validation.
NEW ERA OF SINGLE ACCREDITATION

The fifth and final year of the transition to a single graduate medical (GME) accreditation system concluded with strong gains in the number of former AOA residency programs accredited by the Accreditation Council of Graduate Medical Education (ACGME) and the number of residency positions available to osteopathic postdoctoral trainees.

Osteopathic physicians now serve on ACGME’s board of directors and 20 of its Review Committees. The new system also incorporates osteopathic medicine via the addition of Osteopathic Neuromusculoskeletal Medicine as a specialty accredited by ACGME and establishes Osteopathic Recognition as a programmatic designation available to all ACGME-accredited programs.

The numbers tell the story of a successful transition, with more than 99% of this Spring’s 2020 osteopathic graduates successfully securing postgraduate training slots, according to the American Association of Colleges of Osteopathic Medicine (AACOM). In the first-ever combined match, which took place in March, a record number of osteopathic medical students matched through the main residency match, and DOs’ participation and match rates were also record highs. Many additional DO candidates secured residencies through the Supplemental Offer and Acceptance Program (SOAP).

The number of postgraduate positions available for osteopathic resident physicians also continues to chart significant growth. Since 2015, when the transition began, filled postgraduate positions in previously AOA-accredited programs grew 22% from 8,647 to 10,426 in 2020.

Throughout the transition, the AOA collaborated with AACOM and ACGME to ensure the preservation of osteopathic distinctiveness. All ACGME-accredited programs are eligible to receive Osteopathic Recognition by offering education in osteopathic principles and practice. Currently, more than 230 programs have achieved Osteopathic Recognition in over 20 specialties.
ADVOCACY IN ACTION

The AOA is the only national organization representing the interests of all osteopathic physicians, regardless of specialty or practice type, with the goal of ensuring osteopathic voices are heard and lawmakers understand the distinctive approach DOs bring to the practice of medicine.

The AOA works at the federal, state and grassroots levels to support legislative and regulatory policy changes that:

- Provide financial relief from the impact of COVID-19
- Support physician wellness
- Reduce administrative burden
- Increase liability protection for physicians
- Limit inappropriate scope of practice expansion for non-physicians
- Advocate for patient access to care
- Address surprise billing
- Support payment for telehealth services
- Strengthen the physician workforce by increasing graduate medical education funding and expanding student loan repayment programs

In addition, the AOIA’s Division of Physician Services advances continuous advocacy efforts with private payers to decrease administrative burden for physicians, streamline payment of claims and improve outcomes for patients.

This work resulted in a significant win for DOs and their patients in January, when Aetna agreed to disable automatic claims denials of E/M services billed on the same day as osteopathic manipulative treatment (OMT) and appended with modifier 25. The change affected DOs practicing in all 50 states, resulting in significantly fewer automatic claims denials for physicians participating in Aetna’s health care professional networks who provide OMT on the same days as E/M.

To keep the osteopathic community informed of private payer policy initiatives, the AOA created a Private Payer Advocacy section on Osteopathic.org, featuring policy updates, issue summaries and advocacy timelines.
PHYSICIAN PRACTICES FACE FINANCIAL STRAIN DURING COVID-19

More support needed to ensure patient access to quality care

Based on a nationwide survey of 742 osteopathic physicians in private practice, May 2020.

95% of osteopathic physicians in private practice have experienced a revenue decrease during COVID-19

8 in 10 expect a revenue decrease of 25% or more

4 in 10 expect a revenue decrease of 50% or more

Federal Funding

Have Received an HHS Provider Relief Payment: 49.5%
Have Received an SBA Loan: 42%
Will require additional financial support to continue providing quality patient care: 75%

DOs Impacted

40% of osteopathic physicians impacted are in primary care specialties

Practices with 5 or less physicians: 66%
The AOA’s Department of Education was reorganized in early 2020 to enhance its focus on physician education and continuing medical education in service of osteopathic physicians, medical students and affiliate organizations.

After earning approval to grant Accreditation Council for Continuing Medical Education (ACCME) credit in 2018, the AOA launched a new Joint Providership Program this year for affiliates seeking accreditation for their educational activities. In addition to AOA Category 1A, 1B, 2A and 2B credit, the AOA now offers AMA PRA Category 1 Credit™ for CME provided directly or through joint providership with its constituencies.

Launch of the new program marks a significant advancement in the AOA’s efforts to increase opportunities for osteopathic learning at the national, state and specialty-board levels. All joint providership CME programs must be consistent with the AOA’s CME mission and comply with ACCME standards.

Since 2016, the AOA has invested close to $5 million in osteopathic research, supporting 47 grants. We continued that support this year through funding of grants focused on research on OMM/OMT and its impact on recovery from concussions, and research on acute and chronic pain management specific to opioid prescribing and opioid use disorder.

To strengthen the pipeline of osteopathic researchers, funding was designated specifically for new investigators, physicians in training and medical students.

The AOA remains committed to the fight against the opioid epidemic and to improving health outcomes for patients with chronic or persistent pain. During this year, AOA partnered with 21 affiliate organizations to educate over 3,900 physicians on safe opioid prescribing and pain management through the Collaborative for Relevant Education (CORE REMS) and Building Pathways in Pain Management grant programs.

As part of our effort to positively impact health disparities, the AOA collaborated with the National Academy of Medicine, helping to plan a national meeting aimed at educating healthcare professionals about health disparities in mental health. This work also resulted in a commentary article that provided strategies that health professions educators can take in addressing issues such as racism with their students and colleagues.
With a renewed focus on measuring member satisfaction and identifying strategies to enhance the member experience, the AOA not only met but exceeded membership recruitment and retention goals this year.

In response to COVID-19, the AOA launched a diverse lineup of resources and benefits to help members manage their practices during the pandemic and beyond, including guidance on billing and coding, telemedicine guides, member value programs offering savings for physicians on the front lines, and opportunities for direct engagement with lawmakers to advocate for regulatory improvements and access to care.

On the legal front, the AOA team provided advocacy, counsel and support for members facing issues that adversely affect their ability to practice osteopathic medicine. Even in 2020, osteopathic physicians occasionally encounter professional barriers related to credentialing and access to training, as well as technical matters related to licensure and payment. When made aware of these situations, the AOA steps in, advocating to ensure all DOs enjoy the rights, privileges and respect they have earned as osteopathic physicians.

With the goal of customizing membership to add increased relevance and value, the AOA conducted a member survey in spring 2020. Results of the survey will inform enhancements to existing programs and services, as well as identify new areas of focus to help advance and support members of the osteopathic profession as they navigate the changing landscape of medicine.

To better position the AOA to provide increased support for osteopathic state and specialty college affiliates, the Department of Affiliate Affairs was established as a dedicated organizational business unit in January 2020. Since that time, the AOA has taken the following actions to increase collaboration and assist the work of affiliate organizations:

- Conducted surveys to gain insights and feedback used to increase the overall value and relevance of AOA conferences, programming and communications geared toward osteopathic affiliates and their constituents.
- Provided a forum for discussion and feedback through quarterly CEO-hosted affiliate calls that garnered a 34% increase in attendance over the course of the year.
- Revamped the Affiliate Folder weekly newsletter to provide more targeted updates and relevant content for affiliate stakeholders, resulting in a 5% increase in engagement.
- Assisted more than 20 affiliate organizations with COVID-related needs, including guidance on contract negotiations, virtual event planning and federal relief funding application processes.
INVESTING IN THE FUTURE

As the healthcare landscape transforms, the AOA is rapidly evolving to meet the needs of the osteopathic community. We are deeply invested in providing guidance and assistance for DOs and medical students now, during the COVID-19 pandemic, but we’re also looking toward the future.

In service of the nation’s 151,000 DOs and osteopathic medical students, we are strengthening our focus in the following areas during the coming year:

• Expanding the osteopathic community through growth of membership and unity within the profession, increased awareness and understanding of osteopathic medicine and collaboration with osteopathic partner organizations.

• Advancing the future of the profession through expansion of Osteopathic Recognition in postdoctoral training programs and increased support and guidance for osteopathic medical students.

• Enhancing public health through development of osteopathic programs and resources to help address healthcare disparities, encourage healthy behaviors and prevent illness.

Operationally, the AOA will support progress toward these goals through advancement of the following initiatives:

• Development of new programs and resources for AOA members, supported by an upgraded Association Management System offering streamlined member services, communication and engagement.

• A refresh of the profession’s osteopathic brand awareness campaign to move consumers beyond simple awareness to a deeper understanding of the unique care DOs provide their patients.

• An internal profession-wide campaign to strengthen pride and unity among osteopathic physicians and students.

• Launch of an AOA Board Certification Ambassador Program designed to build relationships with postdoctoral training program directors and increase the number of osteopathic physician residents opting to take AOA Board Certification exams.

• Promotion of campaigns aimed at expanding the reach of osteopathic medicine for the benefit of public health, including advocacy for vaccinations and immunizations and strategies for pain management.
## STATEMENT OF FINANCIAL POSITION

### ASSETS

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<thead>
<tr>
<th></th>
<th>2019</th>
<th>2020</th>
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</thead>
<tbody>
<tr>
<td><strong>Cash and investments:</strong></td>
<td></td>
<td></td>
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<tr>
<td>Unrestricted:</td>
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<tr>
<td>Operating</td>
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<td>$52,353,531</td>
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<td>Osteopathic Research Development Fund</td>
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<td>5,709,370</td>
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<td>Dale Dodson Educational Fund</td>
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<td>NOAC Capital Improvement Fund</td>
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<td>Total Unrestricted Cash and Investments</td>
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<td>Accounts receivable</td>
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<td><strong>Total Current Assets</strong></td>
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<td><strong>OTHER ASSETS</strong></td>
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<td>Property and equipment-net</td>
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<td>Deferred rent receivable</td>
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<td><strong>Total other assets</strong></td>
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<td><strong>TOTAL ASSETS</strong></td>
<td>71,491,438</td>
<td>72,821,611</td>
</tr>
</tbody>
</table>

### LIABILITIES AND NET ASSETS

#### CURRENT LIABILITIES:

| Total current liabilities | 21,029,836 | 20,954,962 |

**TOTAL LIABILITIES**

| 21,029,836 | 20,954,962 |

### NET ASSETS

| Osteopathic Research Development Fund | 5,329,051 | 5,369,038 |
| Dale Dodson Educational Fund         | 2,757,706 | 2,923,570 |
| Osteopathic Physician Brand Awareness Campaign Fund | 4,000,000 | 2,603,809 |
| Bridge Contribution Fund             | 883,427   | 0         |

| Reserve Fund Beginning Balance       | 39,988,881| 37,185,390|
| Increase (Decrease) in Reserve Fund  | (2,749,429)| 3,501,311|
| Reserve Fund Ending Balance          | 37,239,452| 40,686,701|

| Total unrestricted                    | 50,209,636| 51,583,118|
| Temporarily Restricted                | 251,966   | 283,531   |

**Total net assets - unrestricted**

| 50,461,602 | 51,866,649 |

**TOTAL LIABILITIES AND NET ASSETS**

| $71,491,438 | $72,821,611 |
YEAR TO DATE STATEMENT OF ACTIVITIES
FISCAL PERIOD JUNE 1 THROUGH MAY 31

**YTD REVENUES**
FY 2020 Actual

- **Membership**: $16,744,159
- **Research**: $834,455
- **Meetings and Administration**: $29,61
- **Finance**: $54,657
- **International Affairs**: $57,083
- **Human Resources**: $92,173
- **Communications**: $118,560
- **Government Relations**: $238,695
- **State Government**: $354,311
- **OMED**: $2,579,620
- **Education**: $2,794,655
- **Accreditation**: $4,130,913
- **Certifying Boards**: $5,809,331

**YTD EXPENSES**
FY 2020 Actual

- **Membership**: $16,744,159
- **Research**: $834,455
- **Meetings and Administration**: $29,61
- **Finance**: $54,657
- **International Affairs**: $57,083
- **Human Resources**: $92,173
- **Communications**: $118,560
- **Government Relations**: $238,695
- **State Government**: $354,311
- **OMED**: $2,579,620
- **Education**: $2,794,655
- **Accreditation**: $4,130,913
- **Certifying Boards**: $5,809,331

**17% Reduction in expenses from FY2019 to FY2020**

**ExPENSES OUTPACED REvENUE IN FY20 DUE TO INvESTMENT IN REBUILDING AND ENHANCING CERTIFYING BOARD SERVICES**

**17% Reduction in expenses from FY2019 to FY2020**

**Due to investment in rebuilding and enhancing certifying board services**