



August 20-21, 2022 Board Meeting Summary

The Board of Directors (BOD) meeting began Saturday, August 20, with some opening comments from ASA President Randall M. Clark, MD, FASA. He announced the winners of the 2022 Component Recognition Program: West Virginia Society of Anesthesiologists (Small Component), South Carolina Society of Anesthesiologists (Medium Component), Indiana Society of Anesthesiologists (Large Component), and California Society of Anesthesiologists (Very-Large Component).

Dr. Clark spoke about ASA's development of a discussion framework to guide the crafting of public statements, which was in draft prior to the Supreme Court Dobbs decision. ASA is asked frequently for statements, positions, and comments on topics such as: clinical and patient-care related (e.g., COVID-19); organization/Society or member-related (e.g., member in the news); medical/legal issues (e.g., health care laws, medical errors); and social/political issues (e.g., ketamine use in law enforcement). The audience and channels are varied: members, broader health care community, public and patients, and media. The framework is intended to help ASA communicate our expertise, contribute to the narrative appropriately, and represent our broad membership base.

In addition, the Board opening information session included presentations by Dr. Clark and ASA Chief Executive Officer (CEO) Paul Pomerantz, and by President-Elect Michael W. Champeau, MD, FASA on planning ahead for Board engagement. A financial update including a review of the 2022 and 2023 budgets and information about the strategic revenue growth project was provided by ASA Treasurer Donald E. Arnold, MD, FASA; ASA Assistant Treasurer James R. Mesrobian, MD, FASA and Chief Financial Officer (CFO) Lisa Steininger. Paul B. Yost, MD, FASA, chair, ASAPAC Executive Board gave an update on the ASAPAC. Remarks were delivered by American Medical Association President-Elect Jesse M. Ehrenfeld, MD, MPH, FASA, and further announcements were made by Dr. Clark. Below are some highlights from those presentations.

- Mr. Pomerantz and Dr. Clark shared updates from their CEO and President reports including insights related to ASA's operational milestones and progress, as well as emerging issues and opportunities for the Society.
- Mr. Pomerantz outlined key financial indicators as of July 2022, including membership numbers and annual meeting registrations. He noted that membership is still doing well but running lower than budget and is impacting revenue. ASA has seen an increase in active members shifting to retired member status. Annual meeting registrations are exceeding 2021 and pacing just shy of 2019. Exhibit sales have been good.
- Dr. Clark and Mr. Pomerantz also addressed the new Early Career Membership Program, ASA's growing education portfolio, professional and leadership development resources, increasing media attention and strengthened authority, and advancing our advocacy agenda.
- Dr. Clark highlighted the Pathways to Anesthesiology video series targeting first- and second-year medical students to introduce them to the specialty, possible career pathways and subspecialties. Distribution to residency program directors and anesthesia interest groups with 17 videos by October; 11 are live now.
- It was also noted that ASA has acquired Anesthesia Toolbox.
- Mr. Pomerantz outlined ASA's media success for the first half of 2022: 1,634 earned media placements reaching a potential audience of 1.5 billion – a 290% increase over 2021 coverage.
- Dr. Clark gave an overview of the converging challenges facing the specialty: Increasing demand, workforce issues, scope challenges and downward pressures on payments.
- Mr. Pomerantz gave an update on the No Surprises Act (NSA). The NSA Final Rule was issued on August 19, and he noted ASA is still reviewing the Rule.
- Dr. Champeau discussed ways to improve the Board meeting experience, including trialing a new approach at the March 2023 meeting. The goal is to enhance BOD meeting format to strengthen sessions and BOD interaction; improve value and member experience at BOD meetings; help the BOD focus discussions on matters of high importance; and provide ASA leadership and staff with strategic guidance. The proposed solution: Use of Informal Consideration to eliminate need for written review committee reports; two sessions of the BOD (BOD1 on Saturday; BOD2 on Sunday)



will allow for a Speakers Consent Calendar (as we do for the House of Delegates [HOD]); requesting committee, section, or division chair introduce (speak to) each action report; and have strategy sessions on Sunday, concluding by 11:30 am. *[Informal Consideration (IC) allows the group to discuss and debate as one might during a Review Committee, propose recommended language, and then once there appears to be consensus or a clear majority comfort level, to exit IC and formally vote. At that point, the Board meeting could again move back into IC for the next report.]*

- With flat revenue from membership dues and annual meeting head winds, it is necessary to find non-dues revenue sources to meet growing member needs. Dr. Mesrobian reviewed ASA's Revenue Growth Plan goals: An adaptation in ASA's business model, capabilities, culture, and competencies; a path to generate non-member, non-dues revenue growth, including a sharpened business model and idea development process; internal capacity and competency for repeated success in delivering growth in a sustained way; and broad and deep member and staff engagement for the growth vision and plan for ASA's future. Initial Board designated funding is \$4 million.

A number of action and informational reports were submitted to the Board at this meeting. The Board had an opportunity to provide testimony on these reports during the Administrative Affairs, Professional Affairs, Scientific Affairs, and Finance review committee hearings.

Following the review committee hearings, the Board heard from First Vice President, Vice President for Professional Affairs, Vice President for Scientific Affairs, and Assistant Treasurer candidates and engaged in interactive strategy sessions on Advocacy and the Payment Progress Initiative. The Board was asked to discuss and address these strategic topics in breakout groups to help guide ASA in its next efforts in these areas. Details on captured discussions will be reported back to the Board. The following are some highlights from those sessions:

- **Advocacy:** Chief Advocacy and Practice Officer Manuel Bonilla gave an update on ASA's current Advocacy priorities: NSA, Safe VA Care, Medicare, and state level issues. In the breakout sessions, Board members reported back what they thought ASA's most pressing priorities were and suggested strategies for addressing the issues. NSA and Medicare were the top two priorities, while provider shortages and Safe VA Care were also mentioned as concerns.
- **Payment Progress Initiative:** Jeff Mueller, MD, FASA, Vice President for Professional Affairs, provided an overview of the Payment Progress Initiative. He highlighted the fact that the Medicare "33% Problem" is now a 25% Medicare payment crisis. He discussed proposed 2023 Medicare payment cuts, how hospitals actually received payment increases and the different ways in which other specialties are managing their payer mix to handle reduced payments. In the breakout sessions, Board members were asked several questions on how ASA should address the payment issues.

Dr. Clark wrapped up the afternoon with an update on Diversity, Equity and Inclusion (DEI). After a full organizational assessment and qualitative and quantitative research, including roundtable discussions with key committees, one-on-one member interviews, a member survey, and recommendation testing, ASA has defined key DEI terminology and set goals, developing 18 final strategic recommendations. Strategic priorities identified by the BOD and AC: Be more transparent about ASA leadership pathways and enhance ASA mentoring and sponsorship.

The Board of Directors meeting was conducted on Sunday, August 21 and included the following actions on the below presented reports.

Secretary: Representatives to External Organizations

The BOD approved recommendations in a report from the Secretary regarding the appointment of ASA liaisons to provide representation to external organizations.



Section on Board Administrative Affairs (SBAA): Annual Report

The BOD approved amendments to the Administrative Procedures (AP). Revisions included changes to several committee and editorial board missions, duties, and compositions; the Early Career Membership Program; membership auto-renewal; and statement and practice parameter nomenclature.

Committee on Bylaws: Annual Report

The BOD approved Bylaws revisions related to calculating a component's number of delegates, dues timing, and composition of the Committee on Executive Compensation. This report moves to the HOD for action.

Administrative Council (AC):

- **Annual Report:** The BOD approved a proposed statement template and that future Diversity, Equity, and Inclusion (DEI) efforts will be overseen by the first vice president moving forward; these recommendations will be put before the HOD in October. The BOD also approved proposed DEI prioritized strategies for implementation.
- **Revenue Growth Strategy:** The BOD approved \$4M in new Board Designated Funding for the Revenue Growth Strategy.
- **Centers Concept:** The BOD approved a proposed concept of a Center for Anesthesia and Perioperative Economics and Center for Perioperative Medicine, with each being subject to a five-year review. These recommendations will next go to the HOD for approval in October.
- **Ad Hoc Committee on Board Engagement:** The BOD approved recommendations from the Ad Hoc Committee on Board Engagement related to providing ASA's virtual meeting vendor services to regional caucuses, developing generative discussions of strategically important issues via an ad hoc committee of volunteer BOD members, adding strategy sessions to Sunday March and August BOD meetings, and piloting informal consideration as a parliamentary process for the March 2023 BOD meeting.

Committee on Global Humanitarian Outreach: Annual Report

The BOD approved the Committee on Global Humanitarian Outreach's recommendations to change its name to the Committee on Global Health as well as revise its mission statement and vision in the AP. The AP changes will be implemented in the AP via the SBAA's October BOD report.

Committee on Governance Effectiveness and Efficiencies: Annual Report

The BOD approved creation of an Editorial Board for Perioperative Life Support and an Editorial Board for Anesthesia Toolbox. The recommendations will be forwarded to the HOD for action in October.

Program Directors Advisory Group: Annual Report

The BOD approved the concept and proposed criteria for an ASA Resident Distinction Award, with implementation and oversight of the program to be managed by a committee of the President's choice. The recommendations will be forwarded to the HOD for action in October.

Christine A. Doyle, MD, FASA, et. al.: Policy for Response to Current Events, Media Requests, Calls for Statements and Comments

The BOD referred to a committee of the President's choice the development of a proposed process for creation of ASA public statements and comments. This report will be included for HOD action in October.

Christina M. Menor, MD, MS, FASA, et. al.: Request for 2022 Annual Meeting Accommodation

The BOD disapproved recommendations related to additional hybrid or concurrent virtual/online option for participation in the ANESTHESIOLOGY® 2022 and ADVANCE 2023 meetings. The BOD noted that full registration refunds for the 2022 Annual Meeting are available until September 30, 2022, for those unable to attend for any reason.

Alyssa M. Burgart, MD, MA, et. al.: Statement re: Dobbs

The BOD approved, with amendments, a statement for internal and external messaging, in response to the Supreme Court's decision on Dobbs. The statement will be forwarded to the HOD for action in October.

Revised Statements Approved by the BOD

The following revised statements were approved by the BOD and will be forwarded to the HOD in October for action.

- *Statement Comparing Anesthesiologist Assistant and Nurse Anesthetist Education and Practice* (Committee on Anesthesia Care Team)
- *Guidelines for Surgical Attire* (Committee on Occupational Health)
- *Outcome Indicators for Office-Based and Ambulatory Surgery* (Committee on Ambulatory Surgical Care)
- *Guidelines for Expert Witness Qualifications and Testimony* (Texas Society of Anesthesiologists)

New Statements

The BOD approved new statements that will be forwarded to the HOD in October for action:

- *Statement on Certified Anesthesiologist Assistants (CAAs): Description and Practice* (Committee on Anesthesiologist Assistant Education and Practice)
- *Statement on Safety Culture* (Committee on Patient Safety and Education)
- *Statement on Intravenous (IV) Fluid Bag Spiking* (Committee on Quality Management and Departmental Administration)

New Practice Parameters

The BOD approved new practice parameters that will be forwarded to the HOD in October for action:

- *2023 American Society of Anesthesiologists Practice Guidelines for Preoperative Fasting: Carbohydrate-Containing Clear Liquids with or without Protein, Chewing Gum, and Pediatric Fasting Duration* (Committee on Practice Parameters)
- *2023 American Society of Anesthesiologists Practice Guidelines for Neuromuscular Blockade Monitoring and Reversal: A Report by the American Society of Anesthesiologists Task Force on Neuromuscular Blockade* (Committee on Practice Parameters)

Additional Reports

- A request to consider alternative meeting dates for the March 2025 BOD meeting was submitted; the Board acted to maintain the current typical meeting dates (March 1-2, 2025).
- The Texas Society of Anesthesiologists submitted a resolution that asked ASA to review and make recommendations to the American Board of Anesthesiology (ABA). The resolution recommended “that the ASA HOD maintain that structural changes to the ABA need to be made regarding the geographical representation and practice setting of its directors.” And recommended that “procedural changes need to be made to the MOCA process...” to help support ABA as the “entity best suited to determine ongoing proficiency and expertise for its diplomates who are members of the ASA.” These recommendations were referred to committee by the BOD and advance to the HOD for action.
- The BOD considered recommendations to introduce legislation to have medical licensure bodies, accrediting organizations, and medical specialty boards change all new and renewal state medical licensure applications and mandate institutional privilege applications and medical specialty boards to change all inquiries of a physician’s mental or physical health impairment to the following: “Do you have a medical condition that currently impairs your ability to practice medicine?” The BOD disapproved these recommendations, noting in a comment that similar policy was passed through the American Medical Association, as this issue affects the entire House of Medicine and that ongoing efforts should be directed through state component societies and the Federation of State Medical Boards.
- The Editorial Board for *Anesthesiology* and the Editorial Board for *ASA Monitor* submitted nominations for editors, which the BOD approved.