2022 ANNUAL REPORT

FORWARD TOGETHER

ANNUAL REPORT

Calendar Year 2022

FINANCIAL REPORT

Fiscal Year 2022 (JULY 1, 2021 - JUNE 30, 2022)

MESSAGE FROM AAO-HNS/F LEADERSHIP

The Annual Report is an opportune time to look back upon the events of the year and assess the role of the American Academy of Otolaryngology–Head and Neck Surgery and its Foundation (AAO-HNS/F) in providing value to you—our members— for your practice and your patients. A consistent theme in the now 126-year history of the AAO-HNS/F has been the extraordinary involvement and commitment of members in sharing your expertise and time to shape the future of practice. Even with all the obstacles that continue to confront the house of medicine at both the macro and micro levels, 2022 was no different as we witnessed members show up time and time again.

The advancement of projects, initiatives, and programs listed on the subsequent pages are ours collectively as an organization as we strive to meet the goals of the AAO-HNS/F Strategic Plan and mission.

Of note, there are a few areas of focus in 2022 that we would like to specifically mention here—that once again demonstrated the strength and commitment of our niche specialty in laying the foundation to address ongoing and compounding challenges in everyday practice.

TRACKING THE CHANGING WORKFORCE

The Workforce and Socioeconomic Task Force, chaired by **Andrew J. Tompkins, MD, MBA**, conducted a survey of the Academy membership to gather data that will be used to inform discussion in the critical areas of the future evolution of training in otolaryngology, teambased care strategies, practice design, and legislative, regulatory, and private practice advocacy. This will be a yearly survey to determine complexities of the changing workforce and how they fit into population needs.

The preliminary results were presented at the AAO-HNSF 2022 Annual Meeting & OTO Experience in Philadelphia, Pennsylvania. Once the final analysis has been completed, it will be submitted for publication.

THE GROWING VOICE OF PRIVATE PRACTICE

The Private Practice Study Group (PPSG) was conceived as a critical component of the 2021 Strategic Plan's Business of Medicine pillar and has met with unbridled enthusiasm and interest in 2022, with over 550 members and growing. The PPSG is working alongside the Board of Governors as well as with the 3P Workgroup, the Advocacy team, and the Administrator Support Community for ENT to tackle the mounting obstacles in patient care, including regulatory and payer issues that impact practitioners in academic and private practice alike.

Pictured on the Left:

James C. Denneny III, MD

AAO-HNS/F Executive Vice President and CEO

Pictured on the Right:

Ken Yanagisawa, MD 2021-2022 AAO-HNS/F President

AAO-HNS/F MISSION:

We engage our members and help them achieve excellence and provide high-quality, evidence-informed, and equitable ear, nose, and throat care through professional and public education, research, and health policy advocacy.



MESSAGE FROM AAO-HNS/F LEADERSHIP

A special thank you goes to **Marc G. Dubin, MD**, PPSG Chair, and **David E. Melon, MD**, PPSG Vice Chair, for their leadership and for channeling the electrifying energy of this group into meaningful activities, such as a survey on **Emergency Room Coverage in Private Practice** and webinars on relevant topics like "Maintaining a Viable Hearing Aid Dispensing Program in the OTC/TPA Era" and "Finding Your Happy Place: Current Practice Paradigms in Otolaryngology 2023." For any member in private practice who has not yet joined the PPSG ENT Connect community, we encourage you to **complete the form** today to join your colleagues in current and timely discussions.

NETWORKING AND EDUCATION FOR THE FUTURE

The AAO-HNSF hosted the XXXVII Pan American Congress of Otolaryngology—Head and Neck Surgery in June where close to 700 otolaryngologists, representing 35 countries worldwide, met in Orlando, Florida, to learn and reconnect with their global colleagues. The 2022 Pan American Congress highlighted the importance of ongoing education and the strength and potential of global collaboration for the specialty.

As the Pan American Congress ended, the ongoing planning for the 2022 Annual Meeting kicked into an even higher gear thanks to the commitment and innovative programming developed by **Daniel C. Chelius, Jr., MD**, Annual Meeting Program Coordinator, and the Annual Meeting Program Committee members.

In so many ways, this year's Annual Meeting was the culmination of a three-year transformational journey. The planning and coordination of this yearly signature event in the otolaryngology community actually begins soon after the previous year ends with the goal of further enhancing the experience and engaging the attendees at every turn of the program.

The 2022 Annual Meeting, which you can read more about the astounding education and scientific program and phenomenal attendance on page 29 of the Annual Report, feeds important data to the continued work of the Future of Meetings Task Force that was convened by Past President Carol R. Bradford, MD, MS, and led by Kathleen L. Yaremchuk, MD, MSA, who began her role as AAO-HNS/F President on September 14. This Task Force, which provided feedback for the 2022 Annual Meeting, is exploring the AAO-HNS/F meeting's footprint alterations, specialty society collaborations, technology advances, and content dissemination as well as optimizing our relationships with our industry partners to bring exceptional value to all our stakeholders.

THE FUTURE OF PRACTICE

There has been a great deal of activity on the regulatory and legislative fronts both nationally and in state venues that affect

physicians and otolaryngologists specifically. As we peer into the future of medicine and our specialty, these challenges require the continued support and leadership of the Academy as the specialty and house of medicine continue to navigate through the regulatory, legislative, and private payer maze of practice and patient care.

This advocacy work at the governmental and private payer levels, always a top priority for the Academy, has never been more important. Active participation by our members is critical to planning and implementing successful strategies that will allow us to provide safe and effective care to patients.

The increased number of procedures requiring pre-authorization, the denial of appropriate use of modifiers, and the overall administrative burden that has been transferred to the physician is not sustainable and is inappropriately resulting in denial of medically necessary care.

These obstacles come on top of a reduction in Medicare payments to physicians. Through calculated advocacy efforts in collaboration with other specialty societies within and beyond otolaryngology-head and neck surgery, the Academy maintains a respected voice with regulators and legislators at the state and national levels. With just a few examples below and with an increasing member involvement in the Academy's advocacy efforts, we can expand that reach to further advocate for practices and patient care.

In 2022, the Academy continued to work with and partner with the U.S. Food and Drug Administration (FDA) on a number of significant areas.

In September, the Academy was made aware of a severe shortage of tracheostomy tubes across the United States, particularly at children's hospitals. Physician volunteer leaders from the Academy and the American Society for Pediatric Otolaryngology and Academy advocacy staff met with the FDA over a six-week period, which led to the FDA releasing a **consumer advisory** on October 31, alerting patients, caregivers, and healthcare providers of the shortage and providing recommendations to reduce the number of tracheostomy tubes used for each patient during this period. This is an ongoing issue, and the AAO-HNS continues to collaborate with the FDA and manufacturers on a solution.

On August 16, the long-awaited Final Rule was issued by the FDA enabling access to over-the-counter (OTC) hearings aids for people aged 18 or older with perceived mild-to-moderate hearing loss. The Final Rule incorporated several of the Academy's recommendations including lowering the maximum sound output, revising the insertion depth limit to 10 mm or greater from the tympanic membrane, simplifying the wording on the product labeling, and delineating "red flag" conditions as

signs or symptoms that prompt a consultation with a doctor, preferably an "ear-nose-throat doctor." The Final Rule took effect on October 17. To support members and their patients, the Advocacy team developed a summary on the OTC hearing aid Final Rule and ENThealth developed an FAQ patient handout, both available to members.

In February, the Academy collaborated with the FDA and other stakeholders in the Cochlear Implants Innovation, Research, and Advancement (CIRCA) Workshop. This workshop signaled an important strategic event as the FDA sought input from major stakeholders, including government representatives from the FDA and the National Institutes of Health (NIH), the provider community including otolaryngologists and audiologists, cochlear implant manufacturers, patients, and a representative of the insurance industry.

These efforts and those in the Advocacy report on page 24 are just a fraction of the cumulative effort dedicated to the Business of Medicine matters that impact the practicing otolaryngologist-head and neck surgeon on a daily basis. As the issues and challenges continue to surmount, a more collective voice from the specialty will land with greater impact. Learn about the various ways you can get involved in the Academy's advocacy programs and join the ENT Advocacy Network at www.entnet.org/advocacy.

REG-ENTSM

Reg-ent, which made significant progress this year on its journey to fulfilling the many capabilities beyond MIPS reporting, continues to maintain full Qualified Clinical Data Registry status from the Centers for Medicare & Medicaid Services, successfully reporting for MIPS. Reg-ent has consistently been moving toward creating the research grade data necessary for research projects that will unlock its true potential in defining "best care" and participating in clinical- and product-related research that will allow our members to participate in the value-based transition to healthcare that is currently underway. Working with our partner OM1, we can make data available from multiple sources suitable for member research as well as FDA-sanctioned device and pharmaceutical research that will benefit our members and patients.

This year the AAO-HNSF has added our first patient-reported outcomes measures (PROM) data and conducted two clinical research projects that were presented at the 2022 Annual Meeting. One of these involved the transition of care from outpatient hospital centers and ambulatory surgical centers to the office, and the other tracked to the postoperative visits for 10- and 90-day global surgical procedures. Both will be used for advocacy and serve as examples of the pilot type research that can be accomplished through Reg-ent.

We continue to onboard academic programs and will be introducing pricing for those practices consistent with the benefits they will derive, since most do not require MIPS reporting. The protocol and system that will manage requests for the use of Reg-ent data have been established and are ready to go for next year's launch of the research platform available to participants through OM1.

DIVERSITY, EQUITY, AND INCLUSION AND SOCIAL DETERMINANTS OF HEALTH

As part of our Strategic Plan that was approved by the Board of Directors in April 2021, we will be introducing a new Foundation CORE grant for clinical research related to diversity, equity, and inclusion (DEI) and and social determinants of health (SDOH).

The importance of SDOH and DEI in otolaryngology occupies both separate and intertwined components. Our understanding of how these intersect and affect healthcare systems is incomplete. The ways to improve systems to address disparities in these dimensions of our healthcare system are not fully realized. The AAO-HNSF is the recipient of a grant, generously funded by GSK, that seeks investigators who will design and execute research projects that will study one or both components of patient care and workforce culture as they pertain to SDOH and DEI. These may look at the following diagnosis and treatment paradigms:

- → Pre- and postoperative care
- → Differences in care and care models based on social status, resources, caregiver demographics
- → Culturally sensitive and inclusive communication (patient, provider, or both)
- → The impact of biases on care and/or workforce dynamics

We are very excited to announce this grant that will be awarded for the first time in the 2023 CORE cycle and wish to acknowledge and extend our sincere gratitude to GSK for its generosity in making this possible.

THE MAGIC OF OUR MEMBERS

There is no denying that 2022 has presented yet another round of obstacles and hurdles for the house of medicine and those of you who have committed a lifetime to patient care. While it is easy to get mired down in the negativity that can overwhelm the workday, we should also find ways to celebrate the uniqueness of our own individual commitment and dedication to the specialty and patient care.

During the 2022 Annual Meeting Opening Ceremony, we debuted a tribute video to YOU—both the collective and individual YOU who make up the Academy and otolaryngology community. We share the following few words from this video and hope you will take a moment to view "Volunteerism: The Magic of Our Specialty" as our gift and recognition of all you do.

Giving of yourself, your time, and your expertise is woven into the fabric of the practice of medicine and creates the solid ground for which otolaryngology and the Academy stand.

The magic of volunteerism is the power that it can have in making a difference, recognizing that we all need each other in some capacity to succeed in life. It really is the underpinning of our society and in particular the backbone of our global otolaryngology community.

We celebrate the giving spirit of our otolaryngology community and thank you for all that you do!

ADVOCACY

*Contributions to ENT PAC are not deductible as charitable contributions for federal income tax purposes.

Contributions are voluntary, and all members of the American Academy of Otolaryngology-Head and Neck Surgery have the right to refuse to contribute without reprisal. Federal law prohibits ENT PAC from accepting contributions from foreign nationals. By law, if your contributions are made using a personal check or credit card, ENT PAC may use your contribution only to support candidates in federal elections. All corporate contributions to ENT PAC will be used for educational and administrative fees of ENT PAC, and other activities permissible under federal law. Federal law requires ENT PAC to use its best efforts to collect and report the name, mailing address, occupation, and the name of the employer of individuals whose contributions exceed \$200 in a calendar year.

Provided comment
and recommendation
to the U.S. Food and
Drug Administration
to ensure patient safety
was at the forefront of the
agency's Final Rule for over-thecounter (OTC) hearing aids.



Scan to read a <u>summary</u> on the OTC hearing aid Final Rule developed by the Advocacy Team.

The Final Rule incorporated several of the Academy's recommendations, including:

- Lowering the maximum sound output
- * Revising the insertion depth limit to 10 mm or greater from the tympanic membrane
- * Simplifying the wording on the product labeling
- Delineating "red flag" conditions as signs or symptoms that prompt consultation with a doctor, preferably an "ear-nosethroat doctor"

Scan for OTC Hearing Aids FAQs created for your patients on ENThealth.org.



- → Engaged with national, regional, and local insurers to seek positive coverage changes to policies relating to obstructive sleep apnea (including hypoglossal nerve stimulation), absorbable nasal and steroid-eluting implants, balloon sinus ostial dilation, functional endoscopic sinus surgery, cochlear implants, cryosurgical and radiofrequency ablation for chronic rhinitis, and tympanostomy tubes in the office setting.
 - * Worked with the AAO-HNS CPT team on the creation of new CPT codes, effective January 2024, to describe Posterior Nasal Nerve Ablation
 - * Collaborated with the Academy's RVS Update Committee (RUC) team to achieve appropriate valuation for the following new and resurveyed CPT codes, effective January 2023: Energy Based Repair of Nasal Valve Collapse, Drug Induced Sleep Endoscopy (DISE), and Bone Anchored Hearing Aids (BAHA)
- → Convened the Academy's first Virtual Congressional Advocacy Day (VCAD) in April, connecting Academy members with the offices of some of the top health policymakers in the U.S. Congress. AAO-HNS members used the VCAD platform to lobby on the Academy's top federal legislative priorities:
 - ★ The importance of reforming the prior authorization process
 - * How uncertainty in Medicare reimbursement rates impacts their practices and patients
 - ★ Reauthorizing the Early Hearing Detection and Intervention (EHDI) program
 - * The continued need for scope-of-practice protections to ensure patient safety
- → Continued to grow the Academy's political footprint on Capitol Hill, expanding support to new candidates and U.S. Representatives and Senators not previously supported by ENT PAC* on committees of jurisdiction over health policy legislation.
- → Endorsed and advocated for H.R. 3173, the "Improving Seniors' Timely Access to Care Act," legislation that would reform the use of prior authorization under the Medicare Advantage (MA) program, helping to improve access to care for MA patients and easing the administrative burden physicians face. This bipartisan legislation passed the U.S. House of Representatives on an overwhelming vote in September and currently, as of publication of the Annual Report, awaits consideration in the U.S. Senate with 60 cosponsors.
- → Engaged 171 State Trackers to collectively work on 2,154 state legislative and regulatory proposals.
 - ★ Held 6 national State Trackers Zoom meetings
 - * Recruited an additional 20 members to the State Tracker Program, including many new medical students interested in advocacy, during the AAO-HNSF 2022 Annual Meeting & OTO Experience
- → Worked on legislation in multiple states requiring the education and screening for cytomegalovirus given increased interest by Academy state advocates. The Academy supported such legislation in several states and saw successful results in:
 - ★ Florida (SB 292)
 - ★ Pennsylvania (SB 702)
 - ★ Maine also passed screening legislation

PROFESSIONAL EDUCATION AND DIGITAL LEARNING

RANKED AS THE

No. 1 TOP PROVIDER



OF CME/MOC OTOLARYNGOLOGY EDUCATION

(2021 and 2020)

As reported by the Accreditation Council for Continuing Medical Education (ACCME)







#OTOMTG22 EDUCATION PROGRAM:

12 Great Debates



17
Simulation
Presentations



73
Lunch with the Clinical Experts



18
Masters of Surgery
Video Presentations



36 International Symposium



171 Expert Lectures



220 Panel Presentations



450 Scientific Oral Presentations

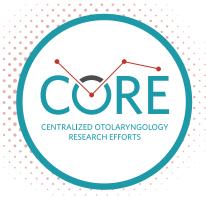


550+
Invited Poster
Presentations



- → Developed 15 new online digital courses
- → Offered 350+ hours of CME credit with AAO-HNSF 2022 Annual Meeting & OTO Experience program and developed the 2022 Annual Meeting Webcast package, offering 342 sessions for three years after the release date
- → Led sessions at the 2022 Annual Meeting focused on cases and controversies on obstructive sleep apnea and neoplasms, as well as lunchtime table-topic discussions based on this year's FLEX topics
- → Expanded offerings to nearly 20 simulation education sessions and hands-on surgical skills training via a collaboration of the Simulation Education Committee and the Annual Meeting Program Committee
- → Released 400+ new case-based questions with rationales in OTO Quest - Knowledge Assessment Tool
- → Continued collaborative initiatives with the American Board of Otolaryngology - Head and Neck Surgery to support CERTLink™ with 4,569 diplomates who successfully completed the program in 2021
- → Provided clinical and practice management articles in the Bulletin ("From the Education Committees" and "Pearls from Your Peers")

RESEARCH AND QUALITY

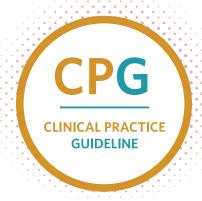


CENTRALIZED OTOLARYNGOLOGY RESEARCH EFFORTS (CORE)

- → The third virtual CORE Study Section (CSS) was held on March 19 with 62 reviewers including chairs and resident reviewers
- → CSS reviewed 160 grant applications, with requested funding awards totaling \$2,139,565
- → CORE awards supported by AAO-HNSF and specialty societies were awarded to 34 meritorious awardees with grants totaling \$534,664 in research dollars







CLINICAL PRACTICE GUIDELINES (CPG) AND EXPERT CONSENSUS STATEMENTS (ECS)



Update!
Tympanostomy Tubes
in Children

Published February 2022

Along with dissemination materials

- → CPGs in Progress:
 - ★ Age-Related Hearing Loss
 - ★ Immunotherapy for Inhalant Allergy
 - ★ Surgical Management of Rhinosinusitis
 - * Manual Update
- → ECSs in Progress:
 - Management of Pediatric
 Persistent Obstructive Sleep
 Apnea after Adenotonsillectomy:

 Tentative publication January 2023
 - ★ Management of Dysphagia in Head and Neck Cancer Patients: Tentative publication February 2023
- → The Guideline Task Force:
 - ★ Held virtual meetings in May and November 2022



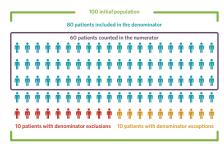
QUALITY MEASURES: EVIDENCE-BASED CARE

- → Maintained 11 AAO-HNSF qualified clinical data registry (QCDR) measures approved by CMS for 2022 implementation within the Reg-ent dashboard
- → Updated 4 AAO-HNSF clinical quality measures, which were approved for the 2023 CMS Merit-based Incentive Payment System (MIPS)
- → Submitted the annual MIPS QCDR self-nomination for 2023 reporting
- → Developed an animation of "Anatomy of a Measure" education resources to calculate measure performance

MEASURE FLEMENTS



SAMPLE PATIENT POPULATION







EHR/PM **Push or Pull**





Clinical Data Registry Mapping **Process**

Populate Dashboard (Clinician and Group Level)





Data Refresh

Refinement and Validation





Implement **Process Improvements**

Data Refresh





Submit to **MIPS**

REG-ENT: ENT CLINICAL DATA REGISTRY

- → Continued the transition of structured and unstructured ancillary data from FIGmd to OM1 for data validation and curation expanding capabilities for Reg-ent
- → Presented two Reg-ent research projects at the AAO-HNSF 2022 Annual Meeting & OTO Experience
- → Established the Reg-ent Research Advisory Group (RRAG) to review and prioritize Reg-ent research projects
- → Achieved Qualified Clinical Data Registry (QCDR) designation with CMS for performance year (PY) 2022, the 7th year Reg-ent earned this designation
- → Launched the 2022 MIPS dashboard and reporting module
- → Surpassed 8 million unique patients and 32 million patient visits in the cumulative Reg-ent data repository
- → Completed integration for several academic medical centers (AMCs) and continued with onboarding and technical support to 10 AMCs participating in Reg-ent
- → Established alternative participation options for academic medical centers, for roll out in 2023
- → Launched integration pilots for two EHRs: Greenway Cloud via Open Database Connectivity (ODBC) interface and Elation; Established data transfer process for one EHR: iSalus
- → Successfully completed 2021 MIPS reporting for 910 clinicians—communicated and assisted with CMS updates on COVID-19-related MIPS exceptions for practices
- → Hosted a MIPS Submission and Data Validation Audit webinar in January attended by practices reporting 2021 MIPS through Reg-ent
- → Hosted a Reg-ent Registry 101 webinar for non-Reg-ent participating AAO-HNS members to learn more about Reg-ent, to increase registry participation
- → Submitted the QCDR self-nomination to CMS for the 2023 MIPS program to continue supporting our members' participation and data reporting and to help foster improvement in the quality of patient care
- → Continued collaboration with CMS to refine a potential broad otolaryngology MIPS Value Pathway (MVP) and held several meetings to discuss incorporation of the MVP for otolaryngology for PY 2024

MEMBERSHIP AND GLOBAL AFFAIRS

GLOBAL GRAND ROUNDS:

The 4 webinars drew a combined registration of over **5,250 physicians** from **123 countries**. Topics included:

- → Chronic Rhinosinusitis with Nasal Polyps and Biologics
- → Artificial Intelligence in Otolaryngology-Head and Neck Surgery
- → Head and Neck Cancer 2022
- → Disruption and Innovation in Otology and Neurotology

XXXVII PAN AMERICAN CONGRESS OF OTOLARYNGOLOGY-HEAD AND NECK SURGERY:

Approximately **700 attendees**, representing **35 countries** worldwide, participated at the XXXVII Pan American Congress of Otolaryngology-Head and Neck Surgery, hosted by the AAO-HNSF in Orlando, Florida, June 25-27

→ The Congress included 300+ speakers and 160 sessions and highlighted the importance of ongoing education and the strength and potential of global collaboration for the specialty

AAO-HNSF 2022 JOINT MEETINGS AND INTERNATIONAL CORRESPONDING SOCIETIES (ICS):

After two years of COVID-suspended Joint Meetings, 12 Joint Meetings with ICS partners resumed in 2022.

→ The number of ICSs grew to 76 with the addition of the Confederation of European ORL-HNS Paid membership continued to grow fueled by international physicians and medical students:



IMPLICIT BIAS VIDEO SERIES

- → Received the EXCEL 2022 Gold
 Award in the Diversity and
 Inclusion Initiatives category and
 the EXTRA! Award, the "Best of
 the Best" of all award recipients
 by the Software and Information
 Industry Association's (SIIA)
 Media & Publishing Network,
 for the AAO-HNS Implicit Bias
 Video Series
- → Received the APEX Grand Award

Not including the United States, the highest number of new members came from India, Mexico, Canada, and the Philippines.



BOG

THE BOARD OF GOVERNORS (BOG)

Launched a 4-part employment series including webinars on the current state of hiring, unconventional strategies for recruiting, leveraging your website and social media to recruit, and a panel of early-career physicians, which had more than 250 registered attendees, on how to recruit the next generation of otolaryngologists

 BOG launched a medical student speed mentoring event at the 2022 Annual Meeting with 95 student participants and 20 physicians attending SRF YPS

THE SECTION FOR RESIDENTS AND FELLOWS-IN-TRAINING (SRF)

YOUNG PHYSICIANS SECTION (YPS)

Launched a new General Assembly format at the 2022 Annual Meeting with a short business meeting, joint lecture on wellness and resiliency, and beer and wine networking reception

Over 250 young physicians participated!



THE WOMEN IN OTOLARYNGOLOGY SECTION (WIO)

Unveiled a permanent exhibit and video on the **History of Women in Otolaryngology**, located in the museum on the 5th floor of the AAO-HNS/F headquarters building

 The WIO Endowment received 11 grant submissions of which 6 were funded for a total of \$20,000



MEETINGS AND STRATEGIC PARTNERSHIPS



AAO-HNSF 2022 ANNUAL MEETING & OTO EXPERIENCE

OPENING CEREMONY:

The John Conley, MD Lecture on Medical Ethics was incorporated into the Opening Ceremony and was presented by Andrew G. Shuman, MD, HEC-C, on the topic of "Reflections on Our Profession in

the Face of an Ongoing Pandemic." A video introduction highlighted the value of the Conley Lecture over the years, including the diverse population of Guest Lecturers. Other video productions complemented the remarks by Ken Yanagisawa, MD, AAO-HNS/F President, and made their debut during the Opening Ceremony, including "Volunteerism: the Magic of Our Specialty" and "What Is Your Vision?"

EDUCATION AND SCIENCE:

- → Added new programming options including the Business Solutions for Breakfast, Lunch with the Clinical Experts, and Office Hours
- → Brought back both the ENTrepreneur Faceoff and the Great Debates for their second year
- → Offered 350+ hours of CME credit
- → Showcased 550+ Scientific Posters and 400+ Scientific Orals including 40 late-breaking abstracts
- → Held 34 International Symposium sessions
- → Scheduled nearly 20 Simulation sessions

MEETING DAILY:

The 4 issues of Meeting Daily had an average open rate of 79.8%. It was sent to more than 23,000 recipients worldwide. www.AAOHNSFMeetingNewsCentral.com

WHO REGISTERED FOR #OTOMTG22?



In-Person

Virtual

6,100 **Total Registered** In-Person and Virtual

96%



Close to **1,000**

TOP 10 Represented **Countries/Regions:** Other than the United States



Domestic	83%	international registrants from 79 countries!
International	17%	
		V
Physician	64%	
Resident	18%	
Medical Student	10%	
Administrator/Advanced Practice.	5%	
Nonphysician	3%	

Brazil119	
Mexico99	
Portugal91	
Canada 69	
Columbia60	
Philippines41	
South Korea39	
France37	
Argentina32	
Porti 31	

CORPORATE DEVELOPMENT

- → Received \$75,000 grant from Glaxo Smith Kline (GSK) for research that has been allocated to a new CORE award seeking investigators who will design and execute research projects that will study one or both components of patient care and workforce culture as they pertain to social determinants of health and diversity, equity, and inclusion
- → Received \$1,650,000 in combined sponsorship and exhibit space sales, 60% of budget; Mostly facilities-based sponsorship and advertising and 170+ companies exhibiting
- Welcomed first sponsor for ENTrepreneur Faceoff: Cook Medical, whose support provided contributions for awards for the top three applicants
- Signed contracts onsite in Philadelphia for 2023 OTO Experience exhibitors, securing nearly \$1.2 million





COMMUNICATIONS

RESIDENT REVIEWER DEVELOPMENT PROGRAM (RRDP)

COHORT 6 (2022-2024)

Matriculants	40
Graduates	7 (17.5%)
Mentees in progress	.31 (77.5%)
Montoos nonrosponsivo (withdrawn	2 (5%)

In its sixth cycle, the program continues with a robust participation and a focus on engaging the international otolaryngology resident and author communities:

→ RRDP and International Author Curriculum Sessions

- ★ Introduction and Approach to Peer Review for Clinicians
- ★ International Perspectives on Publishing, Peer Review, and Avoiding Predatory Journals
- ★ Key Concepts in Statistics: Data Analysis and Regression Models
- ★ Race and Ethnicity: Guidance on Publishing/Reviewing Studies and Diversity Initiatives
- Early Career Reviewer
 Development Program
 - ★ Pilot year with a Columbian early career laryngologist



RANKED IN THE FOLLOWING CATEGORIES:

Otorhinolaryngology3 out of 44

Surgery22 out of 211

Published a <u>special-focused issue</u> on the topics of health equity and diversity in June 2022

2021 IMPACT FACTOR:

5.591

Under the leadership of Editor in Chief **John H. Krouse, MD, PhD, MBA**, Otolaryngology-Head and Neck Surgery achieved the highest impact factor in its history.

The 2021 Impact Factor is 5.591, a significant 59% increase from the 2020 Impact Factor of 3.497.

SOCIAL MEDIA

Gained nearly 1,000 new followers on @AAO-HNS social media platforms, Facebook, Instagram, and Twitter



Twitter Highlights:

★ Impressions: 212,459

★ Profile Visits: 72,612



Instagram Highlights:

★ Page Reach: 77,087

★ Instagram Profile Visits: 8,619



Facebook Highlights:

★ Page Reach: 284,759

★ Facebook Page Visits: 7,503

UNIQUE EMAIL MESSAGES.....439

VIDEOS:

- → Philadelphia Leaders Welcome You to #OTOMTG22 904 Views
- → #OTOMTG22 Call for Science Tips for Writing an Effective Education Proposal 800 Views
- → Daniel C. Chelius, Jr., MD, and Jeffery Lui, MD, Welcome All to #OTOMTG22 634 Views

PODCASTS:

→ Most downloaded podcast title: What's Important from the CRSwNP Biologics Trials 1,087 Downloads

BULLETIN - DIGITAL FOOTPRINT

The AAO-HNS Board of Directors, during the September meeting, approved the transition of the *Bulletin* from its existing print and digital publication formats to a digital-only product, starting in February 2023. The *Bulletin*'s existing digital footprint and reader engagement has continually increased over the past three years:

→ The open rate for the electronic table of contents (eTOC) has progressively grown with the 2022 average open rate, sitting at 50.25%

This open rate is 26.55% higher than the average email open rate in the healthcare category

- → The Bulletin's online traffic has steadily grown with more than 118,500 page views from January 1 to August 25, 2022
- → And once readers get there, they are engaged in the content because the average time on each page is 2 minutes and 25 seconds

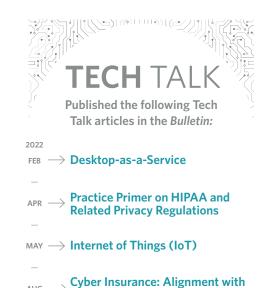
READ MORE ABOUT THIS TRANSITION:

- Re-imagining the Bulletin for the Future November Bulletin (Vol. 41 No. 10)
- → READ ALL ABOUT IT: Bulletin
 Transitions from a Print and
 Digital Publication to DIGITAL
 ONLY in 2023

December-January *Bulletin* (Vol. 41 No. 11), page 12-13 of this issue.

INFORMATION TECHNOLOGY

- → Developed and launched the website that supported the XXXVII Pan American Congress of Otolaryngology-Head and Neck Surgery meeting held in June 2022
- → Continued to improve the AAO-HNS/F Committee application and appointment process by making it easier for committee chairs to make their selections and streamlined the preparations for the President-elect's final review and approval
- → Upgraded conference rooms to Teams rooms, fostering better collaboration among a hybrid workforce
- → Implemented cybersecurity enhancements:
 - * Staff Cybersecurity Awareness Remedial Training
 - * Academy-wide password manager for logging into browser-based services in a more secure manner
- → Continued embarking on modernizing the technology ecosystem by architecting a cloud-centric approach to foster better integration among member-facing sites and harvesting member-centric data across multiple platforms for faster insights to member experiences and needs
 - ★ The first major action is underway to transition the AAO-HNS/F Association Management System (AMS) to the cloud with an expected go-live after the AAO-HNSF 2023 Annual Meeting & OTO Experience



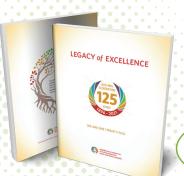
Cybersecurity Best Practices

Medical Device Cybersecurity - What You Need to Know



THE ACADEMY RECEIVED TWO 2022 APEX AWARDS

The Grand Award for Electronic
Media for the AAO-HNS Implicit
Bias Video Education Series
(Read page 28 for more information)





The Award of Excellence for Print Media – Books for Legacy of Excellence

PUBLIC OUTREACH AND PATIENT INFORMATION

Developed clinical and patient information in recognition of the following health observances throughout 2022:



APRIL
Oral Head and
Neck Cancer
Awareness Week
MAY
Better Hearing and
Speech Month



SEPTEMBER

World Sinus Health
Awareness Day

NOVEMBER

GERD
Awareness Week

DECEMBER

Kids Safe Holiday

FINANCIAL HIGHLIGHTS

FISCAL YEAR JULY 1, 2021 — JUNE 30, 2022 (FY22)

The financial results for the fiscal year July 1, 2021 - June 30, 2022 (FY22), benefited from non-recurring Other Revenue including receipt of insurance proceeds related to the cancellation of the AAO-HNSF 2020 Annual Meeting & OTO Experience and revenue from government COVID relief programs. In total, this unbudgeted Other Revenue was almost a third of total FY22 revenue and support. Another third of revenue came from membership dues, which were consistent with the prior year and less than 2% below budget. Annual Meeting revenues, publication and other royalties, and education product sales accounted for the remaining third of revenues. The first Annual Meeting held in-person since the start of COVID took place in FY22, with the 2021 Annual Meeting in Los Angeles, California. It was expected that the return to in-person meetings would be gradual, but how gradual was a best guess. Both domestic and international registration fell short of budget. Publication royalties were received as contracted. FLEX subscriptions settled into a second year of sales approximately 20% below first-year sales. The AAO-HNSF made a one-time investment in hosting the Pan American Congress held in Orlando, Florida, in June 2022.

Cost savings were realized across all categories, in part due to continued travel restrictions and other COVID-19-related circumstances. A challenging recruiting and hiring job market meant staff vacancies were open longer, contributing to savings in salaries and benefits.

The Foundation applied for and received forgiveness of a Paycheck Protection Program loan of \$1,353,000, which is recorded as Other Revenue in FY22. Other Revenue was also recorded for an

Employee Retention Tax Credit of \$865,000 that the Foundation is eligible to claim. And the Foundation received an insurance recovery settlement of \$3,583,000 under its meeting cancellation policy, covering the cancelled in-person 2020 Annual Meeting, also recorded as Other Revenue in FY22.

With the contribution from non-recurring revenues, FY22 had a positive net result of \$4,099,000. Combining operating, nonrecurring, and investment activity (a negative - \$3,528,000), \$571,000 will be added to Net Asset Reserves for the fiscal year.

As of June 30, 2022, Net Asset Reserves without donor restrictions were \$35,100,000. In addition, Net Asset Reserves with donor restrictions totaled \$7,900,000 of which \$5,000,000 are Hal Foster, MD Endowment funds restricted into perpetuity. The Foundation's Finance and Investment Subcommittee (FISC) monitors investment performance and adherence to the Foundation's Investment Policy Statement (IPS).

For a copy of the independent audit of AAO-HNS/F's FY22 financial statements, contact CHanlon@entnet.org.

In May 2022, the Boards of Directors approved a balanced fiscal year 2023 (FY23) budget with revenue and expenses both equal to \$19,673,000. No member dues increase is budgeted leaving budgeted dues revenue at approximately the same level as the prior year. Use of Board Designated Net Assets allows for a balanced FY23 budget. The budgeting process is integrated with the AAO-HNS/F Strategic Plan and involves the efforts of elected leadership, the Boards of Directors, Executive Committee, and the FISC. S

DEVELOPMENT

Restricted Funds Donations:

\$93,000

Annual Fund Donations:

\$15,000



Two-year campaign to raise \$5M in support of four new programs:

- → Diversity, Equity, and Inclusion
- → Education
- → Leadership Development and Mentorship
- → Wellness



125 STRONG DONATIONS AS OF OCTOBER 2022

UNAUDITED (ROUNDED) CONSOLIDATED STATEMENT OF ACTIVITIES FOR THE FISCAL YEAR ENDED JUNE 30, 2022

Description	BUDGET FY22	%	ACTUAL FY22	%	BUDGET FY23	%
REVENUE AND SUPPORT						
Membership Dues	\$6,950,000	35%	\$6,824,000	33%	\$6,925,000	35%
Annual Meeting Revenues	5,357,000	27%	3,873,000	19%	5,977,000	30%
Publication Revenues and Other Royalties	1,587,000	8%	1,690,000	8%	1,533,000	8%
Education and Other Product Sales	1,484,000	8%	1,131,000	6%	1,198,000	6%
Corporate Support	250,000	1%	150,000	1%	325,000	2%
Other Revenue	727,000	4%	6,531,000	32%	32,000	> 1%
Subtotal	16,355,000	83%	20,199,000	99%	15,990,000	81%
Use of Donor Restricted Net Assets	238,000	1%	172,000	1%	203,000	1%
Use of Board Designated Net Assets	3,037,000	15%	-	0%	3,480,000	18%
Total Revenue and Support	\$19,630,000	100%	\$20,371,000	100%	\$19,673,000	100%
OPERATING EXPENSES						
Salaries and Benefits	\$9,329,000	48%	\$7,620,000	47%	\$9,525,000	48%
Annual Meeting Costs	3,628,000	18%	3,375,000	21%	4,287,000	22%
Consultants & Professional Fees	2,083,000	11%	1,780,000	11%	2,026,000	10%
Other Operating Expenses	2,715,000	14%	2,215,000	14%	1,974,000	10%
Occupancy	951,000	5%	920,000	6%	959,000	5%
Grants	474,000	2%	362,000	2%	452,000	2%
Contingency Expense	450,000	2%	-	0%	450,000	2%
Total Expenses	\$19,630,000	100%	\$16,272,000	100%	\$19,673,000	100%
Revenue and Support in Excess of (Below) Expenses	\$ -	-	\$4,099,000	_	\$ -	
Net Investment Activity		-	\$(3,528,000)			
Increase in Net Assets without Donor Restriction			\$571,000			

SEE YOU ONLINE IN

2023

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