

# 2019-2020

# **AAPA Medical Liaison Operations**

AAPA's Vision: PAs transforming health through patient-centered, team-based medical practice.

<u>AAPA's Mission</u>: AAPA leads the profession and empowers our members to advance their careers and enhance patient health.

# <u>Charge</u>

To fulfill the AAPA mission and vision, it is essential AAPA has close working relationships with national physician and medical specialty organizations. AAPA's Board of Directors is charged with establishing and maintaining these relationships by appointing Medical Liaisons. AAPA's Strategic Plan and policy should guide and inform medical liaisons in their outreach and communications with liaison organizations.

# Liaison Organizations

Liaison organizations are national physician and medical specialty organizations identified by AAPA as priority organizations for strategic engagement. Most represent medical and surgical specialties; a few represent other strategic constituencies.

Requests to expand the list of organizations are considered by the External Affairs Committee (EAC), which presents its recommendations to the AAPA Board of Directors (BOD) for final decision.

The medical liaison relationship with any national physician or medical specialty organization may be suspended or rescinded by the BOD.

# **Qualifications and Appointments**

To be considered for appointment as an AAPA medical liaison, at a minimum, the individual must meet these criteria:

- Current member in good standing of AAPA;
- Current member of the corresponding PA constituent organization (if one exists);
- Demonstrated experience in the relevant specialty or with the relevant constituency;
- Demonstrated superior communication skills;
- Understanding of the operations, priorities, and strategic goals of AAPA, the national physician or medical specialty organization, and the relevant PA constituent;
- Ability to effectively advocate on behalf of the PA profession and AAPA.

#### **Duties**

- 1. Represent the PA profession and AAPA when interacting with the national physician or medical specialty organization.
- 2. Know the policies and positions of the national physician or medical specialty organization, AAPA, and relevant PA constituent organizations on relevant issues.
- 3. In collaboration with AAPA staff, define realistic goals, objectives and measureable outcomes on an annual basis that relate to AAPA's strategic plan, mission and vision, AAPA policies, and the relevant PA constituent organization.
- Establish relationships and communicate regularly with leaders of the national physician or medical specialty organization. Updates can be provided to Academy leaders or staff advisors at any time via the <u>online reporting form</u>.
- 5. Attend one annual meeting of the national physician or medical specialty organization. Submit a report detailing actions taken and recommended follow-up <u>using the online reporting form</u>.
- 6. Facilitate communication between the national physician or medical specialty organization, AAPA and the relevant PA constituent organization, in collaboration with AAPA staff.
- 7. Participate in medical liaison conference calls to discuss trends, strategies, and potential policy opportunities for the PA profession and AAPA.
- 8. Identify tactical opportunities to work with the national physician or medical specialty organization to advance AAPA's strategic plan.
- 9. Report on liaison activities undertaken on behalf of AAPA and any significant policy developments that may impact the PA profession and AAPA.
- 10. Engage other PAs in liaison activities; identify and mentor PA leaders to serve as future liaisons.
- 11. Identify potential successors.
- 12. Mentor and guide BOD-appointed successor when your liaison term ends.

## Appointment Procedures

#### Filling new or vacant positions (includes vacant unexpired terms)

- 1. AAPA will solicit nominations (ideally, two or more) from the relevant PA constituent organization and will publicize the volunteer opportunity to all AAPA members.
- 2. AAPA will solicit recommendations from the outgoing medical liaison.
- 3. Interested candidates submit a letter stating their interest and qualifications and a CV.
- 4. The EAC will evaluate viable candidates and make a recommendation to the BOD.
- 5. AAPA's BOD votes to appoint each Medical Liaison.
- 6. All candidates are informed of the BOD's decision by the Board chair.
- 7. The relevant PA constituent organization is informed of the Academy's new appointment by the Board chair.
- 8. The medical organization is informed of the BOD's appointment by the Board chair.

## **Reappointments**

- 1. Staff, with the liaison coordinator's assistance, determines each medical liaison's interest in being reappointed and the relevant PA constituent organization's position on reappointment.
- 2. EAC and staff advisors discuss the achievements of the medical liaison and their evaluations.
- 3. The EAC determines a recommendation for the BOD on whether the Medical Liaison should be reappointed.
- 4. If the Medical Liaison is not reappointed, they and the relevant PA constituent organization will be informed of the BOD's decision by the Board chair, and solicitation for new nominees will be started as for new or vacant positions.
- 5. If the Medical Liaison is reappointed, they and the relevant PA constituent organization are informed of the BOD decision by the Board chair.

## **Substitutes**

If the appointed Medical Liaison is unable to attend a meeting of the national physician or medical specialty organization

- 1. The liaison informs their staff advisor;
- 2. The staff advisor and liaison identify an appropriate substitute, as warranted by the situation.

#### Terms of Appointment

- The term of a Medical Liaison's appointment is two years (which may be renewed by the BOD for another two-year term). Terms begin on July 1 and conclude on June 30. Under extenuating circumstances, the BOD may extend the appointment of a Medical Liaison for a third, two-year term provided that a petition outlining special circumstances is made and validated by stakeholder input.<sup>1</sup> The total term of service as a Medical Liaison will not exceed six sequential years.
- 2. At the start of the second year of their first term, the goals of each Medical Liaison will be reviewed and evaluated to ensure positive outcomes and alignment with AAPA's Strategic Plan and policies. The identification and development of multiple potential successors supports healthy and positive transitions. As such, Medical Liaisons will be encouraged, as part of their goals, to identify and mentor potential successors throughout the course of their service.
- 3. If the liaison is meeting goals and has expressed an interest, the liaison will be considered for reappointment to a second term.
- 4. If performance is insufficient and/or no potential successors are being mentored, staff and the liaison coordinator will work with the liaison to improve performance.

Resignation prior to the end of an appointment should be made in writing to the staff advisor or staff managing the liaison program.

## **Communication and Interaction Expectations**

- 1. At least six to eight weeks in advance of the national physician or medical specialty organization meeting, submit an <u>online pre-meeting request</u> to AAPA stating objectives of proposed travel.
- Shortly after submission of the <u>online pre-meeting request</u>, the medical liaison and staff advisor will hold a conference call to discuss goals and objectives for the meeting and how they relate to AAPA's strategic plan, policies, mission and vision.

<sup>&</sup>lt;sup>1</sup> Examples of stakeholders are any relevant AAPA constituent organizations, the liaison coordinator, and any relevant AAPA staff.

- 3. Within 30 days after the meeting (and prior to reimbursement being issued) submit a <u>follow-up report</u> on progress toward previously stated objectives, activities at the meeting and other significant developments. Staff will share the report with the BOD and the relevant PA constituent organization.
- 4. Maintain active working relationships with a designated AAPA staff advisor and the relevant PA constituent organization.
- 5. Participate in Medical Liaison conference calls to discuss trends, strategies and potential policy opportunities for the PA profession and AAPA.
- 6. Maintain active working relationships with the leadership of the national physician or medical specialty organization
- 7. Document significant policy developments throughout the year (through the <u>online reporting form</u> and other means, if necessary) that may impact the PA profession and AAPA.
- 8. Complete a self-assessment and evaluation of the medical liaison program, as requested.
- Maintain professional standards of decorum on social media sites—the liaison's own social media accounts or accounts of others—on which the liaison interacts with individuals from the liaison organization. For example, refrain from making inflammatory political statements or disparaging individuals or organizations.

#### **Travel Approval**

- 1. Travel to meetings of the national physician or medical specialty organization must be pre-authorized by Academy staff overseeing the medical liaison program. This decision is made by staff managing the program.
- 2. Once travel is authorized, travel plans are made in accordance with AAPA travel policy as specified in the AAPA Medical Liaison Travel Reimbursement Guidelines. It is expected that liaisons will make cost-effective travel arrangements to the extent possible.

## **Reimbursement**

What AAPA will typically reimburse:

- AAPA will reimburse the liaison to attend one meeting of the national physician or medical specialty organization. Typically, this is the organization's major annual conference.
- Travel to any additional meetings during the liaison year (July 1-June 30) must be justified in writing to and approved by staff managing the liaison program.
- Reimbursable expenses include airfare, one checked bag, hotel, ground transportation charges and meal per diem for up to four days, as specified under AAPA Medical Liaison Travel Reimbursement Guidelines.
- Meeting registration fees to the national physician or medical specialty organization meeting that have been approved in advance following the procedures outlined above.

What AAPA typically will not reimburse:

- Travel expenses not pre-approved through the procedures outlined above.
- Spouse, partner or companion expenses related to travel to the national physician or medical specialty organization meeting.
- Airline fees for overweight checked bags.

- A second checked bag.
- Fees for airline upgrades or early-bird check-in.
- Fees for hotel upgrades.
- Fees for in-room internet or entertainment.
- Local trips other than those to and from airport and your home and to and from the airport to the hotel or from the hotel to the meeting. AAPA will not reimburse for trips to and from dinner.

Liaisons must submit a completed reimbursement form with itemized receipts for expenses of \$25 or greater. Liaisons also must file their post-meeting report on major developments and progress toward objectives before reimbursement will be issued.

## Medical Liaison Coordinator

The Medical Liaison Coordinator

- is a PA volunteer;
- works with AAPA staff to provide necessary tools and information to Medical Liaisons and to coordinate liaison activities;
- works with AAPA staff to facilitate liaison conference calls or meetings;
- mentors the AAPA Medical Liaisons.

## Terms of Appointment

- 1. The term of the liaison coordinator is two years (which may be renewed for another two-year term). Terms begin on July 1 and conclude on June 30. Due to the position's close collaboration with the program manager, the Liaison coordinator will be selected by staff with input from the EAC.
- 2. At the start of the second year of their first term, the coordinator is evaluated to ensure goals are being met and successors are being identified and mentored.
- 3. If the coordinator is meeting goals and developing potential successors, the coordinator will be considered for reappointment.
- 4. If performance is insufficient and no steps are being taken to develop a successor, staff will work with the liaison coordinator to improve performance.

Resignation prior to the end of an appointment should be made to the staff managing the liaison program. Staff will notify the board.

# **Staff Advisors**

Each liaison will be assigned an AAPA staff advisor as their access point to AAPA. When possible, staff advisors are assigned to liaisons based on their expertise as it relates to the work of the liaison and/or their familiarity with the external organization. Staff advisors may help liaisons formulate goals for the year, strategize, explore available AAPA resources, answer procedural questions, and direct the liaison to other appropriate staff, as needed.

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