THE SOCIETY FOR POST-ACUTE AND LONG-TERM CARE MEDICINE

Public Policy Steering Committee Charter

Purpose

The Public Policy Committee identifies issues of concern to the association and develops policy statements to submit to the Board of Directors for action. This committee works on national policy issues, including legislation and regulation, as well as physician payment issues.

The purpose of the Public Policy Steering Committee (PPSC) is to serve the board of directors in advancing AMDA's mission and carrying out its strategic plan. The PPSC will be a venue for subcommittee Chairs and Vice-Chairs to share their work, seek guidance and hear alternate viewpoints and suggestions that will help present balanced recommendations to the AMDA Board of Directors.

In alignment with AMDA's strategic plan the PPSC will provide the AMDA Board of Directors concise and balanced recommendations to guide the organization's policy agenda, backed by relevant information.

Objectives:

- Leverage member expertise
- Define the concern(s) being addressed in the policy discussion
- Identify if there is current AMDA policy
- Review evidence in the literature
- Understand alternate stakeholder opinions

Ongoing Committee Activities / Committee Charges & Strategies

The committee undertakes the following activities:

- If a policy question is posed to the Society, the Director of Public Policy will consult the AMDA Policy compendium and other related information (e.g. BOD approved statements or policy) to guide the Society's response. The Public Policy Steering Committee Chair/Vice-chair will be notified of the question/response. If AMDA does not have a position or are being asked to reconsider our position, AMDA staff will seek related information (e.g., past Board and committee minutes, JAMDA articles and editorials) and discuss with the Public Policy Steering Committee Chair/Vice-chair to plan. Depending on the issues, timeliness, and as needed, direction from the board of directors, this may be deferred to a subcommittee to fully evaluate the issue and create a work product for action, brought to the full Public Policy Steering Committee for discussion, or handled directly by the Chair, Vice-chair and AMDA Board of Directors Executive Committee.
- Members of Subcommittees may identify and discuss issues of concern to the association that they would like AMDA to develop a policy on (Clinical Practice Guidelines, White Papers, Position or Policy Papers, articles in journals, or any other publications that state, or are intended to state, that this content is the official position of the Society) and these should be presented to the Steering Committee via a statement of intent, consistent with the Document Development Process (adopted November 2022)
- Public Policy Steering Committee members may be invited to participate in Public Policy forums, Coalitions, advise the Board on whether AMDA should sign letters of support or provide comment on proposed regulations. In these instances, members should clearly distinguish when AMDA has an established policy versus when it does not. Any opinions that are offered that are not official AMDA policy should be clearly identified as such, i.e., that this is the

	 suggestion of the individual member, not of AMDA. The Public Policy Steering Committee proposed, and actual work projects will be posted and updated quarterly on the website and additional public forums as appropriate to the topic.
Roles and Responsibilities	 Chair Help structure agenda for meetings. Run an effective meeting to ensure involvement of committee members and the advancement of activities and charges. Communication with the Board liaison before and after each Board meeting to share updates from the Committee and to hear about new Board initiatives. Report back to the full committee on each discussion with the Board liaison. Identify, mentor, and groom the next Chair of the Committee. Assist with structure and selection of committee members. Vice Chair Support the Committee Chair to ensure responsibilities are met in a timely manner. Serve as interim Committee Chair in the absence of the Chair. Recommend to the Governance Committee individuals to serve as the next Vice Chair. Ascend to the position of Chair. Members Be prepared and actively participate in all conference calls and meetings.
	 Work on projects as delegated by the Chair. Adhere to AMDA's Conflict of Interest Policy
Workgroups and Other Committee Relationships	o Clinical Issues o Telemedicine o State Based Policy & Advocacy o Value Based Programs (developing)
Expected Commitment	The committee meets quarterly via conference call. Ad hoc meetings will be held as needed to respond to questions, concerns, and emerging issues in a timely and relevant manner. Committee members are expected to review all agenda/materials prior to each meeting, attend the conference calls as scheduled.
	The estimated monthly time commitment is 1-2 hours.

Committee	The PPSC Committee is comprised of:
Composition	 Chair and vice Chair of Public Policy Steering Committee Chair and vice-chair of each Public Policy subcommittee Chair of the Practice Management Section (or designee) Delegates to the AMA House of Delegates AMDA House of Delegates Chair BOD Liaison
	 Advisory Members: Interested parties with expertise (e.g., RUC, HIT, PTAC, Behavioral Health etc.) that support the goals of the PPSC may be asked to serve, with reevaluation annually.
	 Guests: Upon approval of the Chair, guests may be invited to participate in discussions at the Public Policy Steering Committee.
Committee Terms	All committee members serve a one (1) year term and are eligible for reappointment for up to two additional consecutive terms (up to three years of service). Terms run April to March. The Committee Chair and Vice Chair each serve a two-year term.
Selection/ Appointment	Members are appointed by President with input from the Committee Chair. The Committee Chair is selected by Board of Directors President. Committee member selections are approved by the President.
Committee Requirements	 Committee Members: Express desire to serve with a special interest in public policy, payment, telemedicine, state-based policy and advocacy. Desire to advance the mission of AMDA. Ability to make the necessary time commitment. Must be a Society member in good standing. Must disclose all financial relationships on an annual basis. Ability to attend and actively participate in conference calls. Committee Chair: In addition to the above requirements, when possible, the Chair should have previously served as the Committee Vice Chair. Vice Chair: In addition to the above requirements, when possible, the Vice Chair should have previously served as a Committee member.
	Should have previously served as a Committee member.

Committee	Chair, Vicki Walker, MD, CMD
Members	Vice Chair, Timothy Holahan, DO, CMD
	• Members
	o Alan Abrams, MD, MPH (Advisory Member)
	o Christian Bergman, MD, CMD (Chair, SBPA Subcommittee)
	o Steven Buslovich, MD, MS (Advisory Member)
	o Charles A. Crecelius, MD, PhD, CMD (Advisory Member)
	o Leslie Eber, MD, CMD (AMA Delegate)
	o Suzanne Gillespie, MD, RD, CMD (Guest)
	o Tom Haithcoat (Chair, PGN)
	o Rajeev Kumar, MD, FACP, CMD (Guest)
	o Thomas Lehner, MD, CMD (Chair, CIS Subcommittee)
	 Walter Lin, MD, MBA (Advisory Member)
	o Milta Little, DO, CMD (Guest)
	o Joanne Lynn, MD, MS (Advisory Member)
	o Dheeraj Mahajan, MD, CMD (Advisory Member)
	 Asif Merchant, MD, FACP, CPE, CMD (Chair, Value-Based Subcommittee)
	o Dallas Nelson, MD, FACP, CMD (Chair, Telemedicine Subcommittee)
	 David Polakoff, MD (Vice Chair, SBPA Subcommittee)
	o Wayne Saltsman, MD, PhD, CMD (AMDA HOD Chair)
	o Karl Steinberg, MD, CMD (AMA Delegate)
Staff Liaison(s)	Alex Bardakh, MPP, CAE, Senior Director, Advocacy & Strategic Partnerships
	Gaby Geise, Public Policy Manager
Board Liaison	Saine von Preyss-Friedman, MD, FACP, CMD