State Dermatological Society Association Narrative

Amount requested: $10,000

Part I: State Dermatological Society Advocacy Background

MISSION: The State Dermatological Society (“SDS”) was established in 1971 and currently has a membership of over 100 physicians throughout the State. The SDS is a membership organization of dermatologists dedicated to quality, safety, and awareness in the delivery of dermatologic care. It is committed to promoting key advocacy initiatives to establish meaningful and timely policy. The SDS cares about the dermatologic health of the citizens of our State. To this end, the SDS monitors and works to positively influence legislation that affects the health of all residents.

ADVOCACY ACTIVITIES:

The SDS engages in a variety of advocacy efforts throughout the year to support our legislative goals. These efforts engage our membership as well as other healthcare stakeholders and are largely driven and coordinated by the SDS board, as well as the legislative and advocacy subcommittee who coordinates with our contract lobbyist. These efforts allow the SDS to maintain a presence in State and local communities, advocate for the profession, and raise awareness on the importance of dermatological care. Although the SDS members work to engage legislators throughout the year, the most important component is working with state legislators during State’s legislative session. Advocacy work introduces the organization to new members of the General Assembly and provides legislators with education on the SDS’s legislative agenda. The SDS targets legislators that work with healthcare related issues, including members of the House Committee on Health and Mental Health Policy and the Senate Committee on Health and Pensions.

Society Lobby Day: With more than 60 new members joining the State General Assembly in 2019, it has been critical that the SDS have a strong presence in the Capitol. This overturn of new legislators helped to ignite the SDS’ grassroots efforts – and the SDS expects the momentum to continue into next year. During the SDS’ lobby day, members meet with the legislators representing both their homes and clinics, and also meet with legislators who may not have a member present. During these meetings, members introduce the legislators to the society and discuss the SDS’ legislative priorities.

In the past, the SDS has held an annual skin-screening day in the State Capitol parallel with the SDS’ lobby day. For this event, members would travel to the State Capitol during the legislative session to offer complimentary skin screenings to legislators, staff, and members of the general public.

Local Events: Since State is only a part-time legislature, the SDS coordinates with our contract lobby team and association management firm to plan local events in legislator districts in the summer and fall months. Various years, the SDS has hosted campaign fundraisers to support House and Senate candidates that advocate for our profession. Members also remain active in their local communities by attending political and grassroots events across the state to represent the SDS.

Facility Tours: During the interim, the SDS will coordinate office and tours with legislators to educate them on the policies and regulations important to the field of dermatology. During these off months, the SDS advocacy leadership works with general membership to coordinate regional tours of dermatological healthcare centers. Legislators and other key groups are invited to become more familiar with the
centers and professionals serving their constituencies, as well as policies and regulations important to the field of dermatology.

PAC: The SDS maintains a regular PAC budget of $1500. Many of the SDS activities are based around opportunities to support candidates who have been a strong voice for dermatology and the medical community. PAC contributions are proposed by our lobby team and then reviewed one by one with the executive committee and voted upon to ensure quality and ethical disbursements.

GRASSROOTS AND MEMBER ENGAGEMENT:
The SDS actively works to keep members informed and engaged throughout the year. During the legislative session, the SDS leadership works with the lobbyist to provide weekly tracking reports on healthcare legislation, detailed updates on priority issues, and news clips on statewide healthcare news.

As bills of interest worked their way through the General Assembly, members are notified of their status, encouraged to participate in strategic decisions, and provided instruction on how to reach out their legislators and engage them on issues.

In addition to a lobbyist, the SDS works with an Association Management firm to help manage our grassroots advocacy affairs. This includes arranging for appropriate physicians to come to the Capitol to testify on legislation; planning and executing our annual advocacy day in the Capitol to promote priority legislation; as well as engaging grassroots membership and members of the public in letter-writing and social media campaigns related to legislation.

During interim months, the SDS designates leadership to coordinate grassroots efforts in local communities. This includes a regular calendar of local political and other healthcare related events that is disseminated to membership, as well as direct work to lead community events.

LOBBYIST EFFORTS:
Since 2007, the SDS has contracted with State lobbyist to successfully monitor and advocate for meaningful changes in healthcare policy. Our contract lobbyist works within one of the largest and most successful lobbying firms in the capital. We would look forward to continuing a partnership with the contract lobbyist and her team for our lobbying needs.

Working closely with our organization leadership, and for an extremely competitive fee, our contract lobbyist provides a comprehensive array of services. This includes: legislative lobbying and monitoring; executive branch lobbying; crisis management; and coalition building. This firm’s experience in State healthcare policy dates back to their founding in 1984, which gives them a trusted reputation with healthcare organizations and state elected officials in State as a knowledgeable and effective advocate on the issues.

In our successful ten-year tenure with State Lobbyist, the SDS has been a key-player in impactful changes to healthcare policy. Since the start of our partnership, our contract lobbyist has helped the SDS defeat legislation that would have restricted State dermatologists’ ability to perform and bill for anatomic pathology procedures. Additionally, she has helped us pass critical priority legislation in a state that can be challenging to navigate. For example, 2014 legislation that required a person younger than 17 years of age using a tanning device in a tanning facility to have the written consent of a parent or
guardian. The lobbyist was also a lead lobbyist on the successful passage of 2016 legislation that
authorized treatment and reimbursement for essential telehealth services.

The contract lobbying firm has an extensive list of clients in the medical profession and healthcare fields. These established partnerships have proven to provide a clear benefit to the SDS’s efforts by expanding our knowledge base and advocacy network. Additionally, it speaks to this lobbying firm’s ability to effectively advocate on these issues.

Other clients include: State Healthcare Association; State Society of Anesthesiologists; McDonald Institute for Medical Research; Preferred Family Healthcare; PBA Health; State Cures Education Foundation; State Society for Respiratory Care; State College of Emergency Physicians; The American Congress of Obstetricians and Gynecologists; State Pharmacy Association; Signature Medical Group; State Ambulatory Surgery Center Association; State Academy of Physician Assistants; and the State Dental Association.

PAST STATE LEGISLATIVE SUCCESS & HISTORY:
SDS-Political History 2007-2017

2007
• Defeated Anatomic Pathology Legislation

2008
• Defeated Anatomic Pathology Legislation
• Tanning Legislation Referred to Committee

2009
• Defeated Anatomic Pathology Legislation
• Tanning Legislation Referred to Committee

2010
• No Anatomic Pathology Legislation Introduced
• Tanning Legislation Passed out of House Committee

2011
• No Anatomic Pathology Legislation Introduced
• Tanning Legislation Passed House of Representatives
• Truth in Advertising language advanced to three different conference committees in the final week of session

2012
• Tanning Legislation was one vote away from the Governor’s desk
- Defeated legislation to grant nurse practitioners independent practice
- No Anatomic Pathology Legislation Introduced
- Caps on non-economic damages for medical malpractice lawsuits ruled unconstitutional by the State Supreme Court

2013

- Tanning legislation requiring parental consent passed through the Senate Committee on General Laws
- Legislation that would prohibit a person from under six years of age from using a tanning device

2014

- Tanning legislation was signed by the Governor and went into effect, requiring parental consent for minors

2015

- Tort reform regarding the collateral source rule was placed on the Senate calendar for debate

2016

- New Telehealth provisions signed by the Governor
- Step therapy legislation went into effect
- Tort reform regarding the collateral source rule passed the General Assembly, but was vetoed by the Governor

2017:

- Actively supported tort reform legislation on collateral source rule on health care costs signed by the governor.
- Took an active role in supporting a bill titled “State Freedom to Choose Health Care Act.”
- Legislation was signed into law including language modifying the definition of “assistant physician” to allow any medical school graduate who has met the requirements to be an assistant physician between August 28, 2014, and August 28, 2017, to be deemed to be in compliance with the requirements of becoming an assistant physician.

2018:

- Key stakeholder in passing legislation that requires the Department of Social Services to reimburse care providers for telehealth services if providers can ensure that services are rendered with the same standard of care that would be provided in person.

2019:

- Defeated multiple attempts from hospitals and the nursing lobby to expand the scope of practice for APRNs.
- Passed including a new law that will prohibit insurance carriers from paying their claims through a pre-paid credit card that charges the provider a transaction fee, thus reducing overall reimbursement for our providers’ services.

- Made several changes to the state’s prior authorization process that should allow for a more transparent and efficient process.

**Part II: State Dermatological Society Advocacy Plan**

**GOALS & OBJECTIVES**

The goal of the SDS is to secure funds and support necessary for the SDS to fully develop and carry out a policy action plan consistent with AADA’s legislative priorities to reduce skin cancer and regulate indoor tanning. Specifically, the SDS is targeting their legislative efforts toward reducing UV exposure in children – firstly, by prohibiting anyone under the age of 18 years old to use tanning bed facilities, and secondly, allowing students to use sunscreen in school, at after-school activities, and youth camps -- without having a doctor’s note.

In order to be successful in these efforts, the SDS would look forward to successfully developing and implementing an advocacy strategy; hiring a lobbyist; filing and amending legislation; and engaging membership and the public.

The SDS believes that the society’s 2019 efforts leave us very well positioned to be successful with 2020 legislation. With assistance from our lobbyist, the SDS was successful in employing a survey to gauge public opinion on the prohibition of tanning beds for minors. In January 2019, a statewide poll asked 800+ people if they would support legislation to prohibit persons under 18 years of age from using any tanning device of any tanning facility in this state. 55% support legislation; 22% are in total opposition; and 24% are not sure. The SDS was able to use this data as an effective tool for advocacy – with legislation passing the House Committee on General Laws and the House Committee on Rules (Legislative Oversight) unanimously.

Legislation was introduced that would have required public schools, including public charter schools, to allow students to possess and self-apply sunscreen without a parent or physician’s approval. If a student needed assistance applying sunscreen, a school employee could help apply the sunscreen if the parent or guardian had given written consent. Schools and school employees would not be liable for any adverse reaction caused by the sunscreen or for discontinuing the application of the sunscreen at any time.

The SDS collaborated with a variety of organizations to garner support for that legislation in the 2019 session, including: American Association of Osteopathic Physicians and Surgeons; American Cancer Society; Cancer Action Network; State Nurses Association; SSM Healthcare; State Medical Association; American Academy of Pediatrics; Miles Against Melanoma.

Although this legislation did not become law in 2019, State Newspaper cites this issue as one of the few very big healthcare issues already drawing a lot of attention for the 2020 legislative session – and an example of an issue that successfully overcomes challenges between individual liberty and traditional public health policy. This legislation, it says, “demonstrates that archconservatives recognize reasonable limits should be placed on behaviors which are medically unhealthy.”
Since tanning bed restrictions have garnered so much attention and support moving into the next legislative session, the SDS believes that combining our legislative priorities into a “package” to reduce UV exposure will allow for the greatest chance of success. Portions of planned 2020 legislation are detailed below:

1. Legislation that allows students to use sunscreen in school, at after-school activities, and youth camps -- without having a doctor’s note.

Currently, there is nothing in state law that addresses students’ ability to use sunscreen in school and at after-school activities. This leaves the decisions up to the individual school, and subsequently many schools prohibit their students from administering their own sunscreen.

The SDS’s proposed 2020 legislation will add a new chapter to State Revised Statutes on School Health Initiatives, allowing students to possess and self-apply sunscreen that is regulated by the United States Food and Drug Administration. School employees shall not be liable for any adverse reaction or for acting in accordance in statute, but it may assist students in applying sunscreen with parental permission. Additionally, legislation shall allow for outdoor use of articles of sun-protective clothing.

Rules and regulations would be administered through the Department of Elementary and Secondary Education.

Anticipated Challenges –

After anticipating pushback from school personnel, legislation ensures schools and school employees would not have been liable for any adverse reaction caused by the sunscreen or for discontinuing the application of the sunscreen at any time. Language that will be filed in 2020 has received no opposition – but in order to be successful – the SDS will have to ensure it remains a priority. By combining this legislation with tanning bed restrictions the SDS believes that it was garner more attention as a priority.

2. Legislation that prohibits anyone under the age of 18 years old to use tanning bed facilities.

Existing state law (Revised Statutes of State 577.655), defines tanning devices and tanning facilities, prohibits their use for anyone under seventeen years of age, and creates penalties for facilities in violation of state law.

The SDS’ proposed 2019 legislation will amend this statute to prohibit any person under the age of eighteen years of age from using a tanning device of any tanning facility in the state. It will also put more consumer protections in statute, including: required notice in tanning facilities about the associated health risks; required use protective eyewear while using tanning devices; and required ability for the customer to turn off the device during use.

Rules and regulations will be developed and administered by the Department of Health and Senior Services and the Department of Insurance, Financial Institutions, and Professional Registration.

Anticipated Challenges – In the past, advocates for smaller government have been vocal against this legislation due to the potential impact on small businesses in their districts. It had been labeled this as parenting issue rather than a government issue, which posed a problem among large republican majorities. More recently, and after strong advocacy efforts/strong Republican sponsor, this has been viewed as a reasonable intervention of state governments. The only groups to oppose legislation were
the Tan Club and the American Suntanning Association. During the hearing, the committee acknowledged the clear bias these businesses have, and acknowledged that it is not in the best interest of the public. The key challenge in 2020 is to make sure this issue remains salient.

STRATEGY & PROJECTED TIMELINE FOR LEGISLATIVE EFFORTS

As the SDS works to pass legislation, success will be measured by the society’s ability to: hire a lobbyist; conduct issue research and provide education; identify and engage stakeholders; identify and engage legislative sponsors; and activate and engage grassroots membership.

Conduct Issue Research and Provide Education (In progress):

• The best policy outcomes will be achieved through evidence-based issue research. The SDS will continue to refine its current policy proposal with new evidence-based research, and work to strengthen advocacy materials to provide effective education.

• By partnering with a well-established state lobbying firm, familiar with the political landscape in State, SDS will refine educational materials and testimony unique to individual elected officials and legislative committees.

Legislator Education (Ongoing, and Accelerated in January)

• Local Events: The SDS will continue to engage members throughout the State at local political events. For example, The SDS will continue to attend political and grassroots events to distribute educational materials.

• Facility Tours: During the interim, the SDS will coordinate office and operating room tours with legislators to educate them on the policies and regulations important to the field of dermatology.

Renew Lobbyist Contract (December):

• Renewal of SDS’ current contract including: monitoring, tracking, filing and lobbying for multiple priority bills, and providing appropriate follow-up working with departments to implement a bill upon passage.

Identify & Engage Stakeholders (In progress):

• In order to be successful in efforts, the SDS will engage a variety of stakeholders to prioritize and advance legislation to reduce UV exposure in children. Stakeholders with active coalitions for the SDS priority issues include: American Association of Osteopathic Physicians and Surgeons; American Cancer Society; Cancer Action Network; State Nurses Association; SSM Healthcare; State Medical Association; American Academy of Pediatrics; Miles Against Melanoma.

• In regards to sunscreen in schools, SDS has already engaged the State School Boards Association, State Nurses Association, State Teachers Association, and the State Association of School Nurses, to address concerns and garner support. Legislation ensures that schools and school employees shall not be liable for any adverse reaction caused by the sunscreen or for discontinuing the application of sunscreen at any time.

Identify & Engage Legislative Sponsors (In progress):
• The SDS will continue working with the following strong majority sponsors. These members are “heavy-lifters” in the General Assembly – as strong leaders of their chambers, and known for passing challenging and consequential legislation.

• Senator David Jones – Relevant Committees - Chairman of the Senate Committee on Seniors, Families and Children; Member of the Senate Committee on Health and Pensions.

• Representative Nick Mulvaney – Relevant Committees – Vice-Chairman, Special Committee on Government Oversight, member of the House Committee on General Laws, member of the House Committee on Health and Mental Health Policy

Draft & File Legislation (December):

• The SDS crafted and filed legislation in 2018 that would have allowed students to have sunscreen at school – and further refined legislation in 2019. Legislation mirrored model legislation developed by ASDSA. SDS will file the same legislation in 2020 – and also combine it was tanning bed limitations. Since 2019 legislation already made it through the committee process, we expect legislation to advance more quickly in 2020 – additionally, we will push legislation to the Senate Committee on Children and Families rather than Health and Pensions. The legislation’s sponsor chairs that committee, and SDS believes this is legislation that impacts children and families.

Activate & engage grassroots membership (January-May)

• Bill Tracking/Legislative Updates: The SDS closely tracks legislation relating to the society’s profession. As in past years, the SDS will continue to keep members informed. During a bill’s passage through the General Assembly, members will be encouraged and instructed on how to reach out to their legislators to express support or opposition to key legislation.

• Action alerts, letter-writing campaigns, etc. (as-needed)

Lobby Day (Mid-Session)

The SDS plans to continue the society’s lobby day described in Part I.

PAC (on-going)

The SDS maintains a regular PAC budget of $1500. Many of the SDS activities are based around opportunities to support candidates who have been a strong voice for dermatology and the medical community. PAC contributions are proposed by our lobby team and then reviewed one by one with the executive committee and voted upon to ensure quality and ethical disbursements.

Part III: State Dermatological Society Project Budget

Complete budget attached.

The SDS has two entities – a 501c3 and a 501c6. The 501c3 has the most assets, and while the board is willing, use of those assets for advocacy is limited by federal law to just 10% of annual revenue. That means only about $4,500 can be contributed legally by the SDS to our advocacy program each year. That is not enough to pay for a contract lobbyist in our state, and it is very difficult to raise money from members for cover the lobbyist and still have funds available for political candidates.
If received in 2020, the AADA Advocacy Grant funding would be used to supplement our state society efforts to retain lobbying services to accommodate the high risk and heavy workload on dermatology issues on deck in State.