



**AUA Staff Liaison** Catherine Hendricks

**Chair** Arthur Tarantino, MD (June 1, 2020 – Sept 13, 2021)  
Mark Edney, MD (Sept 14, 2021 – May 31, 2024)

**Terms of Office** Chair 3-year term (non-renewable)  
Members 3-year term (renewable once)

### **Committee Makeup**

The Committee is comprised of approximately 8-12 members. Members are selected based on geographic distribution and expertise in content areas directly relevant to the AUA's state advocacy priorities (e.g., telemedicine, medical malpractice). The Chair of the Public Policy Council serves as an ex officio member.

### **Mission Statement**

The Committee's mission is to provide feedback to the Public Policy Council and staff on the continual refinement of the state advocacy agenda and its execution, provide advice and guidance regarding new opportunities for urology's involvement; create and provide resources to assist in state advocacy; provide content knowledge, expertise, and support to state advocacy efforts when appropriate; communicate with fellow AUA members about issues critical to state advocacy and engage in appropriate action when needed.

### **Committee Meetings**

Annually attend the Urology Advocacy Summit (beginning March 2018), the fall Public Policy Weekend at the AUA headquarters, and participate in the quarterly conference calls or when requested. There is no per diem for committee members. Members will only be reimbursed for expenses, such as transportation and lodging for advocacy events for which they are specifically asked to represent the AUA.

### **Time Commitment**

*Chair:* 120 hours annually  
*Member:* 60 hours annually

### **Qualifications/ Responsibilities**

*Chair:* The Chair should be politically savvy and have knowledge of the U.S. political process, have existing relationships with legislators at the state level, and be willing to advocate for urology's interests on a local level. The chair should show clear expertise in health policy areas, and the governing bodies that regulate medicine at the state level. Also, the Chair must be willing to attend the annual Urology Advocacy Summit in Washington, D.C., as well as engage fellow urologists and recruit grassroots physicians to advocate on behalf of the AUA's legislative agenda and priorities.

*Member:* The State Advocacy Committee's membership will be comprised of physicians representing diverse geographic and political interests. Members should have or be willing to develop relationships their



respective legislators at the state level. Members should have an interest in public policy and understand the role state governments play in regulating medicine. Members must be willing to engage fellow urologists and recruit grassroots physicians to advocate on behalf of the AUA's legislative agenda and priorities.

#### **Recent Accomplishments 2020**

- Opposed intersex bills in California, Hawaii, and Connecticut
- Supported Prostate Cancer Screening Bill in Maryland. Covers DRE and PSA test for men between 40 and 75 years old, and those who are at high risk. The bill also eliminates cost sharing. Signed by Governor Larry Hogan (R) May 8, 2020.
- Supported no-cost sharing prostate cancer screening initiatives in Illinois, Missouri, Alabama, and California.
- Discussed ways to further collaborate on important state policy issues with Texas Urological Society focusing on AUA priorities (surprise billing, telemedicine), with a focus on prostate cancer screening coverage.
- Opposed Idaho's "No Surprises Act" which would impose government price controls on health care services and force physicians to accept discounted rates.
- Supported step-therapy reform bills in Maryland, California, Oregon, Michigan, and Arizona.
- Supported co-pay accumulator bills in Maryland, New York, Pennsylvania, Connecticut, and California. These bills require all payments made by patients be counted toward their overall out-of-pocket maximum payments or deductibles.
- Opposed California health care system consolidation that would give the state attorney general comprehensive approval and enforcement powers.
- Supported expanded telemedicine coverage during COVID-19 and beyond.
- Focused on urologic awareness proclamations. Developed toolkit for members to use and posted on AUA website.