

Research Appropriations Committee A Public Policy Council Subcommittee

Terms of Office Chair: 3 years (non-renewable)

Members: 3 years (renewable once)

Committee Makeup Composed of approximately 12 members. Non-voting members include the Public Policy

Chair and a liaison from the Research Council.

Vision/Mission/Purpose

The mission of the Research Appropriations Committee (RAC) is to effectively champion for public, private and philanthropic support of urologic research by energizing and synergizing with all stakeholders.

These efforts shall include legislative advocacy efforts working with the AUA Public Policy Council, Legislative Affairs Committee (LAC), and Annual Urology Advocacy (AUA) Summit planning committee as appropriate, and patient advocacy organizations working with the Urology Care Foundation, as well as building relationships with federal funding agencies and non-federal funding organizations. In addition, the RAC will maintain a strong working relationship with the Research Council to ensure adequate communication and collaboration with the AUA's primary research-related governance body.

Committee Meetings

The Research Appropriations Committee shall meet by teleconference/videoconference on a monthly basis, or as deemed necessary by the RAC Chair, and Public Policy Council Chair, with one to two in-person meetings per year typically at AUA Headquarters. A representative of the RAC (Chair or appointed member) is expected to attend in-person meetings of the Research Council as the RAC's liaison to the Research Council.

Time Commitment

Chair: 3-4 hours per week (average)

This includes teleconferences and meetings with staff, various committees and representatives of external organizations/agencies. The Chair also travels up to 10 days annually for attendance at the AUA advocacy conferences and meetings, leadership meetings with federal agencies, and meetings with other AUA or Urology Care Foundation committees supporting research.

Member: 2 hours per week (average)

Responsibilities

Chair: In executing responsibilities, the Chair will report to the Public Policy Council Chair and the Public

Policy Council as a whole and oversee any workgroups or subcommittees that may be created. The Chair is expected to commit 3-4 hours per week working independently and in collaboration with

staff, various committees and representatives of external organizations/agencies.

Members: Committee members must 1) be available to participate in Committee meetings, advocacy meetings,

and leadership meetings and 2) serve as active liaisons between the RAC and federal agencies and

other organizations.

Compliance

Committee positions are open to AUA members in good standing. All new members are required to

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agree to abide by <u>AUA's Civility Policy</u> when they accept their appointment and agree to annually complete a COI Disclosure Form in accordance with <u>AUA's COI Disclosure Policy</u>. The AUA reserves the right to suspend or remove a member from participation in any AUA activity while the individual is under investigation for a violation of AUA's policies.

Criteria for Selecting New Members

- Active in urologic research with a strong track record of achievement in urologic research
- Collegial and involved in networking within the field of urologic advocacy (e.g., urologic research funders federal or non-federal agencies or patient/consumer advocacy groups)

Criteria for selecting Next Chair

Chairs are chosen from current or past committee members and are selected by the Public Policy Chair. Criteria for selecting chairs includes:

- Must be a urologist or researcher with a strong track record of achievement in urologic research and training.
- Must possess familiarity with NIH institute (e.g., NIDDK, NCI, NIA) operating procedures and leadership.
- Possess experience in advocacy at the community, state, or federal level.
- Must be available for communication with members of the Committee, Council, Board of Directors, and staff.
- Preferable: History of productive interaction with consumer advocacy organizations, as well as relationships with urologic research funders whether federal or non-federal.

Recent Accomplishments – 2024

- Convened a panel of experts, including leaders from the National Cancer Institute (NCI), the Congressionally Directed Medical Research Programs (CDMRP), patients, and urologists to discuss diversity in research and barriers to patient engagement in clinical trials.
- Submitted two comment letters on behalf of urologic researchers and patients to the House Energy & Commerce Committee regarding proposed reforms to overhaul the National Institutes of Health (NIH) by, among other things, consolidating agencies from 27 to 15.
- During the 2024 Annual Urology Advocacy Summit, RAC members had a dozen meetings with
 congressional appropriators to discuss the importance of continued funding for urology research
 programs for FY 2025 and to request a new dedicated funding line for bladder cancer research under
 the Congressionally Directed Medicare Research Programs (CDMRPs) at the Department of Defense.
 Failing this (it's a heavy lift in the current climate), RAC members requested bladder cancer retain its
 eligibility status for funding under the CDMRP's Peer Reviewed Cancer Research Program for FY 2025.

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