



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

Committee Makeup

The Committee is comprised of approximately 12 and no more than 15 members, plus the chair, representing diverse geographic, clinical, and demographic interests of the AUA with an interest in public policy and understanding of the role federal and state legislatures and agencies play in regulating medicine and the advancement of new and emerging technologies. The Chair of the Public Policy Council serves as an ex officio member.

The Committee shall also maintain an advisory council to be made up of at least 3 “public” (non-physician) members who are subject matter experts in health technology with an interest in health policy, health law, and/or health technology regulation and a willingness to share their expertise for the benefit of the AUA, urologic community with the ultimate goal of improving health outcomes.

Vision/Mission

This committee will sit at the intersection of new and emerging health technologies – like the use of A.I. – and public policy with the goal of championing good legislative and regulatory at the state and federal level. The Committee’s mission is to serve as the AUA’s expert resource on technology-enabled urologic care and to provide feedback to the Public Policy Council and staff on the refinement and execution of the AUA’s digital health and innovation policy agenda, including telehealth, artificial intelligence, and other emerging technologies; provide advice and guidance—including endorsement or opposition—on policies and regulations affecting technology-enabled urologic care at the federal, state, and regulatory levels; identify and advise on new opportunities for urology’s involvement; coordinate with other AUA committees and councils to align positions; and, as appropriate, represent the AUA in meetings with government entities, legislators, and other stakeholders on issues affecting urologists and their patients.

Committee Meetings

Members attend the following meetings:

- Annual Urology Advocacy Summit in Washington, DC and committee meeting that takes place during this meeting;
- Health Policy Weekend at the AUA headquarters in Linthicum, MD; and
- Additional conference calls that will occur at least quarterly or as needed to keep pace with the Committee’s work and the pace of emerging technology.

Time Commitment

Chair: 120 hours annually
Member: 60 hours annually

Responsibilities

Chair: The Chair should be an AUA member in good standing who has in-depth knowledge of existing telehealth and A.I. technology used in medicine, as well as an understanding of the current regulatory and political landscape facing the use of such technology.



Members: The Committee is responsible for researching, reviewing, developing, disseminating and endorsing (or opposing) federal and state policies and regulations, best practices, and other information pertaining to urologic telemedicine, urologic use and development of artificial intelligence tools, and other new and emerging technologies as they affect or impact urologists and their practice and patients.

Criteria for Selecting New Members

- Expertise in the legislative and regulatory process
- Expertise in Health or Medical Informatics
- Familiarity with AI-assisted imaging, decision-support tools, robotic surgery (e.g., da Vinci system)

Criteria for Selecting Next Chair

- In-depth knowledge of existing telehealth and A.I. technology used in medicine, as well as an understanding of the current regulatory and political landscape facing the use of such technology.
- Be an effective communicator and leader with experience or aptitude for advocacy and health policy.
- Have and be willing to leverage strong connections in healthcare technology, preferably including A.I.
- Free of relevant conflicts of interest (*e.g., act in the best interests of the AUA, Inc., rather than in their self-interest or the interests of their section, subspecialty, demographic affiliation, employer, or industry.*)

Compliance

Positions on Councils, Committees, Editorial Boards and Practice Guidelines Panels are open to AUA members in good standing. All members must agree to abide by *AUA's Committee Policies & Procedures* (see *AUA Participation Terms & Conditions* documents located under My Committees Section of the [myAUA](#) webpage). These documents include the requirement to abide by [AUA's Civility Policy](#) and annually complete a Conflicts of Interest (COI) Disclosure Form in accordance with [AUA's COI Disclosure Policy](#). 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 policy violation.

Recent Accomplishments 2025

- Finalized UTTC Mission Statement, incorporating input to guide near/long-term policy engagement.
- Selected two Expert Industry Advisor Members to provide technical insight and expertise into UTTC policy decisions while preserving AUA independence and clinical oversight.
- Created internal alignment with AUA Science & Quality Council- discussing leveraging AUA data for actionable internal insights and incorporating expert AI consensus into guidelines, clinical consensus statements, policy statements, and QI issue briefs.
- Submitted a letter in response to an HHS RFI on the adoption and use of AI as part of clinical care.
- Submitted a letter to urge congressional leadership to make telehealth access permanent for Medicare beneficiaries, and if not possible, to approve the longest possible extension.
- (*Ongoing*) Developing an AUA Policy Statement on AI clinical use and stewardship, reinforcing physician-led governance and responsible adoption.