



100+years

AMERICAN COLLEGE OF SURGEONS

*Inspiring Quality:  
Highest Standards, Better Outcomes*

## State Lobby Day Toolkit

One of the most effective ways of letting elected officials know your chapter's views on state legislative issues is by communicating through a face-to-face meeting. When a group of people from an elected officials' district requests a meeting regarding a particular issue, the elected official wants to hear their point of view. Sponsoring a lobby day provides members of your state legislature with the information they need to make the best decisions for their constituents.

Because lobbying and lobby days can be so valuable in getting an organization's view known, the planning and implementation of a lobby day is very important—elected officials do take heed to large numbers of advocates rallying at the capitol. Your success will be based on how well you organize your members in getting them to the offices of elected officials. The more effectively you plan for your grassroots lobby day, the more seriously the elected official is likely to view your chapter.

The American College of Surgeons (ACS) has put together this *State Lobby Day Toolkit* to support ACS chapters in organizing lobby days in their respective state capitals. In addition to the toolkit, ACS State Affairs staff is available to assist with overall planning, provide meeting training, and participate in the event. Please contact ACS State Affairs staff at 202-337-2701 or [stateaffairs@facs.org](mailto:stateaffairs@facs.org) for more information.

## LOBBY DAY SCHEDULE

Before you begin planning your lobby day, it is absolutely essential to review your state lobby laws. These laws can vary greatly from state to state, and failure to follow these laws can give surgeons a serious “black eye” with legislators and the public and can result in civil sanctions. For more information on your state lobby laws please visit <https://www.facs.org/advocacy/state/resources/lobbying>.

**Selecting a Date.** The first thing to consider when planning your lobby day is the legislative calendar; pick a date when the legislature is still in session. A date chosen earlier in the legislative session is important so that your issues remain in play, and so that you can make an impact on the process. However, you don’t want to plan so early in the legislative session that you have a hard time making appointments and preparing materials. For example, mid-February can be the ideal time to plan a lobby day for a state legislature that convenes in January and adjourns in late spring or early summer. In some cases, it may be necessary to sponsor a lobby day early in the session as well as later in the session if your legislation is moving towards passage and needs extra support.

You may also want to have an idea of when other organizations, opposing as well as supporting groups, are planning their lobby days. Sponsoring a lobby day for the same day as a competing group’s lobby day will overshadow your event and pertinent issues. However, working in conjunction with organizations holding similar views may help to maximize the impact of your lobby day. In many state legislatures, organizations are required to seek permission to schedule a lobby day and must work with the capitol to make arrangements for the day; be sure to check on those requirements.

**Creating a Schedule.** After choosing the date for your lobby day, you will need to create an event schedule. Over the past few years, ACS chapters have used many different models for their lobby days. Examples of these include:

- One-day event: Surgeons arrive in the morning for breakfast and an issues briefing. Following this, attendees meet with their legislators/staff to discuss the issues, and a debriefing is held at lunch or later in the afternoon, depending on how long the morning session goes. A reception late afternoon with lobby day participants and invites to legislators and staff can be a great way to finish off this event.
- Day and a half: A legislative reception for legislators, staff, state supreme court justices, and other elected officials is held early evening. Following this, the chapter council meets for a dinner meeting. Next morning, a breakfast/briefing session is held which may last a few hours. After briefing on the issues, attendees meet with their legislators and perhaps attend committee hearings. A debriefing point is established for attendees to gather and discuss how their legislative meetings went, and could include a reception if later in the day.

- Co-sponsor with state medical society or other state physician organization: Most state medical societies sponsor one-day lobbying events, and being a part of their annual lobby day can help raise the visibility of the chapter as well as make planning an easier task. A larger number of physicians at the capital can carry forward a unified message on a number of issues. Some chapters who utilize this model conduct a council meeting the evening before.
- Dinners with legislative leadership: Hosting a couple of dinners with legislative leadership or other elected officials can create a less political opportunity for discussing issues of interest to surgeons. Bringing together chapter leadership and legislators builds the relationships essential to successful grassroots advocacy.

Sample lobby day agendas are found in the Appendix to this document.

## ATTENDEES

**Recruiting Surgeons to Your Lobby Day.** Now that your lobby day has been scheduled, your chapter needs to recruit its members to participate. An organization hosting a lobby day for the first time may want to consider inviting only chapter leaders for a smaller lobby day that allows your chapter to simply introduce itself to your legislators or legislative leadership. However, if your organization is focusing on a particular issue or is well-versed in lobby days then chapterwide participation is encouraged.

The most effective participants will be people who can represent their communities, and those who may have ties to the representative or senator. If your chapter hopes to target a specific legislator, it is important to bring in surgeons from his or her district to attend the meeting. Also, the meeting may be a great opportunity to bring in other organizations that support the chapter on the issue being discussed. If there are members interested in participating in the lobby day but are unable to do so, ask them to write a letter that can be presented to their legislator or ask that they make a separate appointment for another time to meet with the legislator in a district office.

**Scheduling Legislative Appointments.** Once the date and format of the lobby day is decided, appointments need to be scheduled. If an appointment is not set with the legislators' office, it is highly unlikely that an attendee will have an opportunity to meet with a legislator or a staff member working on a particular issue. It is imperative that a chapter determine early who will set up the appointments. Is the chapter administrator or executive director in charge of scheduling appointments or will the attendees be responsible for making their own appointments? If attendees are organizing their own schedules, it is imperative that they communicate their schedules to the chapter. Scheduling of appointments should ideally start no later than 30 days before the lobby day. It is important to remind your attendees to be flexible when scheduling appointments. Flexibility makes it more likely that an attendee can meet their legislator, although meeting with the legislative aide is also very beneficial if the senator or representative is unavailable.

**Legislative Visits.** Meetings with legislators should consist of no more than 4-5 people. It is important that at least one member of the group is a constituent of the legislator with whom the

group is meeting. Legislators are more apt to take action on an issue when a voting constituent seeks assistance on an issue rather than a chapter member from outside of the district. *Note:* When meeting with legislative leadership, such as the Senate President, Speaker of the House, or committee chairs, it is great to have a constituent in the group, but if one cannot be included then chapter leadership can adequately represent the chapter.

Surgeons can expect that typical meetings will last 15–20 minutes, and may be longer if meeting with legislative staff. During the meeting, it is important that surgeons convey the position of the chapter in that short amount of time. **Go to the meeting with specific items or actions that you want your representative or senator to work towards.** Each meeting should have one surgeon (preferably a constituent of the legislator) take the lead and this individual should be well-versed on the issues and the legislator’s voting background on that particular issue. Remind surgeons to not leave a meeting without asking the legislator to commit to the chapter’s legislative request. This ASK can be as simple as your representative voting “no” during a hearing or signing on as a cosponsor to a piece of legislation.

As part of this meeting, it is appropriate to ask if a picture or two can be taken with the legislator. Following the meeting, the picture can be used along with an article in the chapter newsletter, providing a visual highlight of the lobby day and some positive public relations for the legislator.

**Transportation.** Some organizations consider coordinating transportation for their members from around the state. This often involves carpooling or leasing of buses. For a larger event, it may be easier to coordinate bus pickups at a central location in a town or city, such as a hospital parking lot or other medical facility. For smaller events, it may be easier to leave it up to lobby day participants to make their own transportation arrangements.

## **BRIEFING MATERIALS**

**For Elected Officials/Staff.** A personal meeting with a legislator is the perfect opportunity to educate your elected official about your profession and organization. You do not want to overwhelm the official but you do want him or her to leave the meeting with a better understanding of the chapter’s issues, concerns, or legislative initiatives. A “leave behind” is the perfect way to provide your representative or their staff with follow-up information on your organization/issue.

A legislative packet should include the following:

- List of chapter staff with their contact information. If the legislator needs additional information on the issue or chapter, he or she will know whom to contact.
- Letter from the president of your chapter that explains why your chapter supports or opposes the issue you will discuss.
- Fact sheet and information on the issue or specific legislation you will discuss.

**For Surgeons.** Members should receive the same information that the chapter intends to give the elected officials so they will be familiar with the materials.

Other information you should provide to lobby day participants includes:

- Map of the capitol
- Appointment times, locations, and telephone number
- Talking points on the issues
- *Tips for Effective Lobbying*
- Evaluation form
- Follow-up/debriefing form

## **LOBBY DAY WRAP-UP**

Your members have come and gone and a successful lobby day has adjourned but there are still many tasks that need to be completed before a lobby day is truly over.

First, it is important to send thank you letters to chapter members who participated in the event and the legislators you met with. Each participant should be encouraged to send a personal thank you to the elected official or staff they visited. The chapter should also consider sending a thank you letter from the executive director or president on behalf of the organization to ensure that every elected official involved receives an acknowledgement.

Inform the overall chapter membership of your advocacy efforts on their behalf with an article in your chapter newsletter. The article could include the number of participants, legislative offices visited, the number of legislators that supported the issue, and the names of those legislators the chapter still needs to persuade. Pictures of legislators can highlight the notion of successful meetings with them. This is also an excellent time to encourage members to attend the next lobby day and become a part of the advocacy process.

Chapter leadership and staff should review and assess the lobby day and formulate a plan of action that will make the chapter more successful in future events. Evaluation comments from lobby day participants can provide keen insight into how well the event progressed; determine the value of briefing sessions and handouts; and highlight details requiring attention in the future.

## Tips for Effective Lobbying

### Prior to a legislative visit:

- Identify legislator committee assignments and what their issues of interest may be as well as general biographical information, which can typically be found on their Web page
- Determine leadership roles within the legislature and their party caucuses
- Develop relationships with your legislators and their staff (in district if possible)
- Provide legislators and staff with preliminary information on potential issues for discussion, names and addresses of those participating in the visit, etc.

### During a legislative visit:

- Introduce yourself.
- Start on a positive note by finding some common ground. For example, if your legislators recently voted in support of an ACS issue, thank them.
- Clearly describe the issue and the chapter's position early in the discussion. This is key if your meeting is cut short due to a pending vote or committee hearing.
- Use personal anecdotes. Explain your position with facts, and use personal stories when possible. State legislation affects you and your patients; make sure legislators understand the personal ramifications or benefits resulting from their actions.
- Focus on only a few issues to avoid overloading the legislator with too much information, and keep the conversation simple and polite.
- If you don't understand something, ask for an explanation.
- Have the legislators clarify their position and/or vote on the issue.
- Show openness to the knowledge of counterarguments and politely respond to them if it seems appropriate to do so. Caution: Don't argue with the legislator or their staff.
- Firmly and fairly direct the conversation, especially if the conversation begins to veer off track.
- Ask the legislator to take some specific actions such as sponsoring a bill, voting for or against a pending measure, or meeting with your chapter.
- If you don't know the answer to a question, say so, but offer to get an answer.
- Express thanks as you leave.

### After the Visit:

- Write a thank you letter summarizing your priority points.
- Share the results of your meetings with your chapter leadership, including insights about legislators' concerns. Inform the chapter membership through the chapter newsletter or listserv, and ask other Fellows to lobby.
- Maintain ongoing communication with legislators and their staff through letters, calls, and visits.
- Find out when legislators will be at home in the district and organize a local visit, or invite them to your office or hospital for a tour.

## Appointment Setting

ACS has developed sample letters for setting up appointments with legislators. Whether the participants set their own appointments or you decide to take on this task, legislators should receive an invitation from your organization regarding the lobby day. This will alert them about the issues and allow you to give some of your organization's history.

### \*\*Chapter Scheduling Appointment

Dear **(Senator or Representative)**:

The **(Chapter Name)** of the American College of Surgeons (ACS) will host its annual Lobby Day on **(Date)**. Our members will be walking the halls of the Capitol to discuss the **(Issue/Legislation)**, **(give the status of the legislation and who is sponsoring it, if you have that information)**. This legislation would **(Tell what the consequence or benefit of this legislation is to your member of the people you serve)**.

Surgeons from your district would like to meet with you or the appropriate staff member on **(Date)** at **(Time)** for 15-20 minutes to provide you with information on this important issue. Obtaining your support on this legislation is critical to the surgery profession and specifically to **(whomever this legislation would affect)**.

At this time, the following surgeons have indicated they will be in attendance:

**(INSERT NAMES/ADDRESSES HERE)**

Thank you for the opportunity to meet on **(DATE)**. Should this meeting time need to be revised, please contact me at XXX-XXX-XXXX or by e-mail at xxxxxxxxxxxx.

Sincerely,

### \*\*Surgeon Scheduling Appointment

Dear **(Senator or Representative)**:

The **(Chapter Name)** of the American College of Surgeons (ACS) will host its annual Lobby Day on **(Date)**. Our members will be walking the halls of the Capitol to discuss the **(Issue/Legislation)**, **(give the status of the legislation and who is sponsoring it, if you have that information)**. This legislation would **(Tell what the consequence or benefit of this legislation is to your member of the people you serve)**.

I would like to meet with you or the appropriate staff member on **(Date)** at **(Time)** for 15-20 minutes to provide you with information on this important issue. Obtaining your support on this

legislation is critical to the surgical profession and specifically to (**whomever this legislation would affect**).

Thank you for the opportunity to meet on (**DATE**). Should this meeting time need to be revised, please contact me at XXX-XXX-XXXX or by e-mail at xxxxxxxxxxxx.

## **FAQs**

Q. Our chapter is interested in applying for a lobby day grant. How do we go about doing so?

A. Information on the lobby day grant program is available at <https://www.facs.org/advocacy/state/chapter-grant>. The application form is updated annually, and chapters are solicited in early July with a September deadline for grants for the following year.

Q. As a chapter that has never sponsored a lobby day before, we don't have the first idea of where to begin. Can you help?

A. The State Affairs Staff of the College is glad to consult with you on planning a lobby day, and will have lots of great ideas to share. Contact them at 202-337-2701 or [state\\_affairs@facs.org](mailto:state_affairs@facs.org).

Q. We received a grant for the lobby day, but are not sure on what we can spend the money. What are considered legitimate legislative expenses for a lobby day? What if we go over the amount of the grant?

A. Grant funds are expected to be used for expenses on a lobby day, and these expenses will be determined by what type of day is planned. If the chapter is just starting out in grassroots advocacy, it may simply pull the chapter council together for a meeting the evening before, and then visit with legislators the following day. Grant funds may be spent on lodging, travel, food/beverage, meeting space rental, receptions and related expenses. If co-sponsoring a larger lobby day with the state medical society, the chapter may need to make a contribution to the medical society; that is an appropriate expense under the grant. Remember, the grant program requires that for every two dollars received in the grant, the chapter is required to match that with one dollar, so a chapter receiving a \$5000 grant would be matching \$2500 for a total of \$7500. If expenses go beyond that, the chapter is responsible for paying them.

Q. What issues should be discussed during a lobby day? Does the College require any particular issue to be raised?

A. If the ACS has a state-level initiative in your state, then it is expected the chapter would advocate for it during a lobby day. Staff are glad to discuss surgeon-specific issues from the College's state legislative agenda. Some issues can be determined by talking with state medical society lobbyists, who would be glad to attend the lobby day and provide an issues brief – noting that these issues may be more global in scope. If the legislative session seems relatively quiet, then it may be more appropriate to use the lobby day as an opportunity to build relationships with legislators in sort of a “meet and greet” fashion.



Q. Setting up appointments with legislators is not something we've done before. How do we do this? Is help available for this activity?

A. Before any appointments can be set up, it is necessary to know who is attending and who their legislators may be. Once that is determined, all it takes is a phone call to the legislator's office to inquire about a time to meet. Usually, a follow-up fax is requested indicating who will be attending the meeting with the legislator or the staff and what issues may be discussed. State Affairs staff is glad to help match program attendees with legislators, but it is more appropriate for local folks to be making the phone calls to set up the meetings. "All politics is local," as the saying goes.

Q. Should we take pictures with legislators or other officials during the lobby day?

A. Yes, pictures are appropriate, and most legislators appreciate the opportunity to pose with their constituents. Using the picture in a newsletter article or web page item informing the membership of how the lobby day went also provides an important feedback loop to those who were not there, and might encourage greater attendance at future lobby day.

## RESOURCES

### American College of Surgeons

- [ACS State Affairs \(40K DOC\)](#)
- [SurgeonsVoice](#), the grassroots advocacy platform for state and federal legislative activity, including issue briefs, guide to successful advocacy, and opportunities to contact legislators and other elected officials
- [State Legislative Issues](#)
- [Chapter Lobby Day Grant Program](#)

### Additional Resources

- [Federation of State Medical Boards](#)
- [National Conference of State Legislatures](#)
- [Public Affairs Council](#)

# Appendix



AMERICAN COLLEGE OF SURGEONS

*Inspiring Quality:  
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**Virginia Chapter, American College of Surgeons  
2015 White Coat Day  
January 27th, 2015**

**Where to meet:**

Meet at the Hilton Garden Inn – Downtown Richmond in Amethyst B room.

Hilton Garden Inn – Richmond Downtown  
501 East Broad Street  
Richmond, Virginia 23219  
Phone: 804/344-4300

There will be an Advocacy Boot Camp held from 8am – 12pm on the 27<sup>th</sup>. If you would like to participate in it, please register through MSV. It is free of charge, but space is limited. If you are not going to participate in the Boot Camp, you can either meet at the hotel to get your material or go straight to the General Assembly for your appointments

**Directions:** Click on the following link for directions to the hotel:

<http://hiltongardeninn3.hilton.com/en/hotels/virginia/hilton-garden-inn-richmond-downtown-RICDTGI/maps-directions/index.html>

**Parking:** The hotel provides valet parking on a first-come, first-served, limited basis. The Chapter is pleased to cover your parking costs. Please see Susan McConnell before you depart.  
If you are unable to park at the hotel, there is a self-park, self-pay lot directly across the street. There is an early bird \$7.00 per day charge if you arrive before 9am. There will be a machine where you enter the spot number in which you parked and then hit purchase ticket. Several options come up - hit #5 for "more options" and the Early Bird option appears.  
Additionally, there is another lot on the other side of the building on 6th & Grace Street and it is \$6.00 for the day. We will not have parking vouchers for either of these lots, but the Chapter will be able to reimburse your expense. *Please see the attached parking map.*

**Meals:** Breakfast and lunch are provided by the Medical Society of Virginia. Breakfast will start at 8:00 a.m. and lunch will be held from 12pm – 1pm at the Hilton.

**The Issues:** "Backgrounders" on the issues are included in this email and will also be provided when you arrive at the hotel. MSV will provide information packets that morning also.

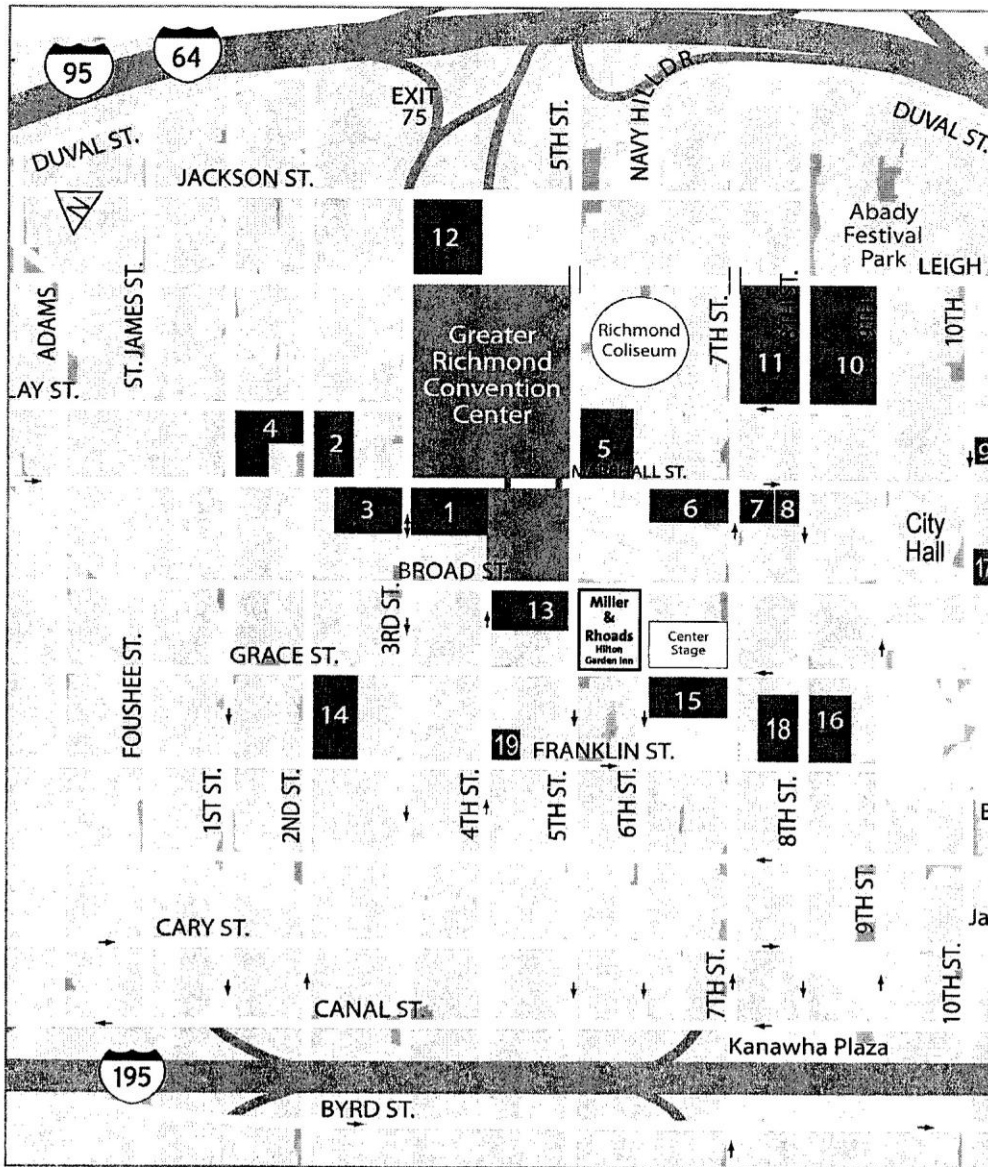
**What to wear:** Professional business attire, a white coat (if you have one), and comfortable shoes for walking.

**Security:** In order to enter the General Assembly Building for meetings with your legislators, you will have to go through 911 security procedures. Be prepared for metal detectors. Cameras are allowed, but video cameras are not. Do not bring any large packs or unnecessary bags.

**Questions:** Please contact Susan McConnell with any questions – 804.677.5072 (cell).

# Miller and Rhoads Parking Options

Over 4,500 spaces within walking distance



1. Greater Richmond Convention Center Parking Deck (\$6.00 per day) Pay attendant upon entry.
2. Richmond Parking Surface Lot (Honor Box) East Marshall Street and 2nd Street. Enter from either Marshall or 2nd streets.
3. Richmond Parking Surface Lot (Attendant/Honor Box) East Marshall Street and 3rd Street. Enter from Marshall or 3rd streets.
4. Central Parking System Surface Lot (Honor Box) East Marshall Street between 1st Street and 2nd Street. Enter from Marshall or 1st streets.
5. Standard Parking Deck (Attendant) 500 East Marshall Street. Enter from Marshall or 5th streets.
6. Standard Parking Deck (Attendant) East Marshall Street between 6th Street and 7th Street. Enter from 6th Street.
7. Parking Deck (Attendant) 7th and Marshall streets. Enter from 7th Street.
8. Surface Parking Lot (Attendant/Honor Box) 8th and Marshall streets. Enter from Marshall or 8th streets.
9. 10th Street Surface Lot (Attendant) 10th Street between Clay and Marshall streets. Enter from 10th Street.
10. City of Richmond Surface Lot (Honor Box) 8th Street between Leigh and Clay streets. Enter from Clay or 8th streets.
11. Standard Parking Deck (Attendant) 7th Street across from the Richmond Coliseum. Enter from 7th Street.
12. Standard Parking Surface Lot (Honor Box) At the corner of 4th and Leigh streets. Enter from 4th or Leigh streets.
13. Standard Parking Surface Lot (Attendant/Honor Box) East Broad Street between 4th Street and 5th Street. Enter from 5th or 4th streets.
14. Parking Deck (Attendant) 2nd Street between Grace and Franklin streets. Enter from Grace or Franklin streets.
15. Surface Parking Lot (Honor Box) On Grace Street between 6th and 7th streets. Enter from 6th or 7th streets.
16. Parking Deck (Attendant) 8th Street between Grace and Franklin streets. Enter from 8th Street.
17. Standard Parking (Attendant) 10th and Broad Street. Enter from 10 or Broad Streets.
18. Standard Parking (Attendant) 112 N. Grace Street. Enter from Grace Street
19. Standard Parking (Attendant) 4th and Franklin Street. Enter from 4th and Franklin Streets.

## AMERICAN COLLEGE OF SURGEONS



### Virginia Chapter, American College of Surgeons MASTER AGENDA 2015 White Coat Day January 27, 2015

8:00 am – 12:00 pm

Boot Camp (*Optional*)  
Hilton Garden Inn

**Brian Kaplan, MD**

**9:15 AM (with Drs. Grover and Kasirajan)**

Senator Donald McEachin  
Room No. 428

Legislative Assistants: Jediah Jones, Abbi Easter  
(Sen. McEachin is out tomorrow morning and a doctor's appt. so meeting is with aide)

**10:15 AM**

Delegate Peter Farrell  
Room No. 528

Legislative Assistant: Jameson Babb

**10:30 AM – \*DROP IN\* (with Drs. Grover and Kasirajan)**

Delegate Jennifer McClellan  
Room No. 515

Legislative Assistant: Abbey Philips

**DROP IN (with Drs. Grover and Kasirajan)**

Senator Walter Stosch  
Room No: 626

Legislative Assistant: Karla W. Boughey  
(Finance Committee meeting, so will probably be busy. Has 3 leg aides you can meet with)

**Aimee Grover, MD**

**9:15 AM (with Drs. Kaplan & Kasirajan)**

Senator Donald McEachin  
Room No. 428

Legislative Assistants: Jediah Jones, Abbi Easter  
(Sen. McEachin is out tomorrow morning and a doctor's appt. so meeting is with aide)

**10:30 AM \*DROP IN\* (with Drs. Kaplan & Kasirajan)**

Delegate Jennifer McClellan  
Room No. 515  
Legislative Assistant: Abbey Philips

**11:00 AM (with Dr. Kasirajan)**

Delegate James Massie  
Room No. 516  
Legislative Assistant: Margaret M. Graham  
(Finishes a Committee meeting at 11am and has a Caucus at 11:30am, so catch him between the two)

**DROP IN (with Drs. Kaplan & Kasirajan)**

Senator Walter Stosch – Stop by  
Room No: 626  
Legislative Assistant: Karla W. Boughey  
(Finance Committee meeting, so will probably be busy. Has 3 leg aides you can meet with)

**Vigneshwar Kasirajan, MD**

**9:15 AM (with Dr. Kaplan and Grover)**

Senator Donald McEachin  
Room No. 428  
Legislative Assistants: Jediah Jones, Abbi Easter  
(Sen. McEachin is out tomorrow morning and a doctor's appt. so meeting is with aide)

**10:30 AM \*DROP IN\* (with Dr. Kaplan and Grover)**

Delegate Jennifer McClellan  
Room No. 515  
Legislative Assistant: Abbey Philips

**11:00 AM (with Dr. Grover)**

Delegate James Massie  
Room No. 516  
Legislative Assistant: Margaret M. Graham  
(Finishes a Committee meeting at 11am and has a Caucus at 11:30am, so catch him between the two)

**DROP IN (with Dr. Kaplan and Grover)**

Senator Walter Stosch – Stop by  
Room No: 626  
Legislative Assistant: Karla W. Boughey  
(Finance Committee meeting, so will probably be busy. Has 3 leg aides you can meet with)

**Craig Derkay, MD**

**9:30 AM**

Delegate William DeSteph  
Room No. 420  
Legislative Assistant: Jill Eyster

**10:00 AM (with Dr. Myer)**

Senator Lewis  
Room No. 318  
Legislative Assistants: Charles Stanton, Michele Haynie, Jacqueline Hixson:

**11:00 AM (with Dr. Myer)**

Delegate Matthew James  
Room No. 803  
Legislative Assistant Kim Rollins:

TBA

Senator Jeffrey McWaters  
Room No. 310  
Legislative Assistant: Cheryl Simmons, Christen T. S. Faatz

**Brian Myer, MD**

**10:00 AM (with Dr. Derkay)**

Senator Lewis  
Room No. 318  
Legislative Assistants: Charles Stanton, Michele Haynie, Jacqueline Hixson:

**10:45 AM**

Delegate Lionell Spruill  
Room No. 804  
Legislative Assistant: Susan J. Rowland

**11:00 AM (with Dr. Derkay)**

Delegate Matthew James  
Room No. 803  
Legislative Assistant Kim Rollins:

**11:25 AM**

Senator Kenneth Alexander  
Room No: 305  
Legislative Assistant: Yovonda Bellamy

**12:00 PM**

Lunch  
Hilton Garden Inn





# MEDICAL SOCIETY OF VIRGINIA Issue Backgrounder

## Prescription Prior Authorization Reform

The Medical Society of Virginia (MSV) supports reforming burdensome health plan requirements for prior authorizations for prescription medicine. Currently, health plans require that prescribers obtain prior authorization for a myriad of prescription drugs before the patient can obtain them. This is yet another barrier in the patient-physician relationship that can result in delayed, ineffective and even detrimental care.

In Virginia, the system is convoluted – insurers require **1,097 different paper prior authorization forms** for medicines, and physician offices can spend an average of 20 hours a week processing them, some having to hire additional staff just to handle these requests. 69 percent of physicians report waiting several days for a response and 10 percent wait a week or more. This leaves patients without their needed medications, including critical therapies that treat mental health conditions and chronic diseases.

### Support HB 1942/Habeeb and SB1262/Newman: Prescription Prior Authorization Reform

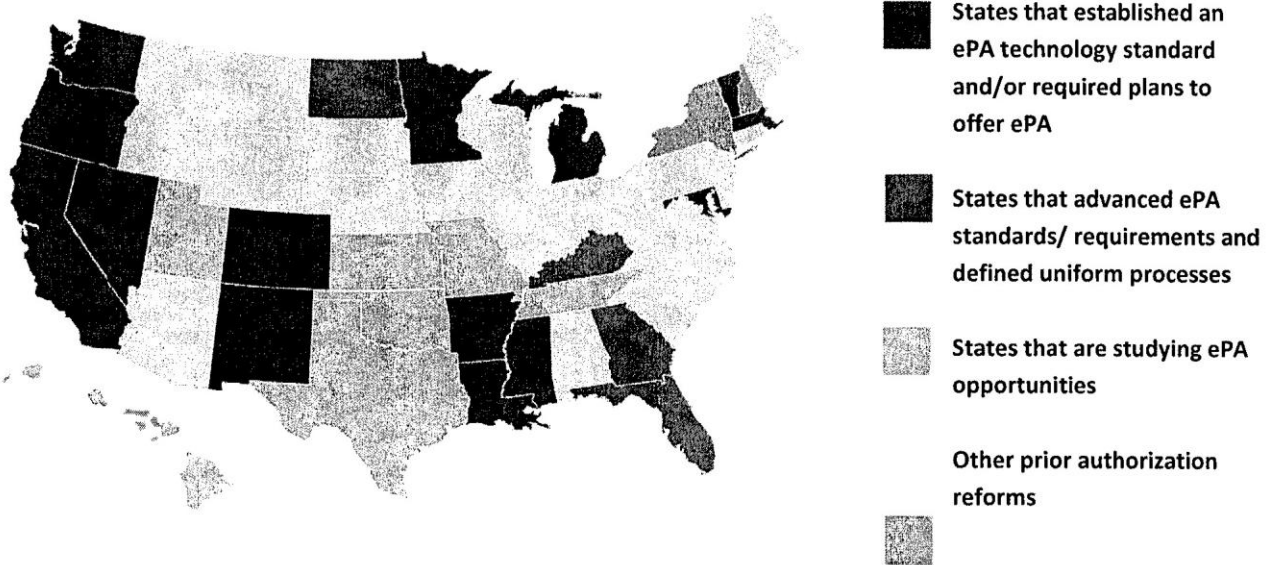
These bills will establish the following reforms to the prescription prior authorization process:

- Development of universal prior authorization forms
- Requiring that health insurance carriers allow electronic prior authorization in a manner that is interoperable with electronic medical record and electronic prescribing platforms
- A 48 hour deadline for health insurance carriers to approve, deny, or request supplementation of a prior authorization request and a 24 hour deadline to approve or deny the request upon receipt of supplementation
- Exemptions from prior authorization for chronic disease medications and mental health drugs when a patient is medically stable on the drug, has completed step therapy, or has already received prior authorization approval from a previous health insurance carrier
- Requiring automatic prior authorization approval of a three day supply of prescription drugs in emergency situations
- Waiving prior authorization for most generic medications
- Health insurance carrier transparency of prescription drug formularies, prior authorization forms, prior authorization procedures, and reasons for prior authorization denials

For more information, contact MSV's government affairs department by phone at 804 | 564-5469, or visit the MSV Web site, [www.msv.org/priorauthreform](http://www.msv.org/priorauthreform).



**27 states have committed to reforms that help patients obtain the care they need when they need it while allowing health plans the flexibility they need to remain competitive:**



### **Prescription Prior Authorization Reform Coalition**

American Academy of Pediatrics, Virginia Chapter  
American Cancer Society Cancer Action Network  
American College of Physicians, Virginia Chapter  
American Congress of Obstetricians and Gynecologists – Virginia Section  
EPIC Pharmacies Inc.  
Lupus Foundation of America, DC/MD/VA Chapter  
Medical Society of Northern Virginia  
Medical Society of Virginia  
National Alliance on Mental Illness in Virginia  
Patient Services Inc.  
Psychiatric Society of Virginia  
Virginia Academy of Family Physicians  
Virginia Academy of Physician Assistants  
Virginia Chapter of the American College of Radiology  
The Virginia Chapters of the National Multiple Sclerosis Society  
Virginia College of Emergency Physicians  
Virginia Council of Nurse Practitioners  
Virginia Medical Group Management Association  
Virginia Nurses Association  
Virginia Optometric Association  
Virginia Orthopaedic Society  
Virginia Pharmacists Association  
Virginia Society of Eye Physicians and Surgeons  
Virginia Society of Health-System Pharmacists  
Virginia Society of Otolaryngology



# MEDICAL SOCIETY OF VIRGINIA

## Issue Backgrounder

### **Protect Virginia's Children from Liquid Nicotine Poisoning**

With the proliferation of the smoking of e-cigarettes, or "vaping", there has been a dramatic increase in cases of accidental liquid nicotine poisonings, especially among children. There are currently no regulations in Virginia mandating that liquid nicotine be sold in child-proof packaging, and the Medical Society of Virginia is partnering with the American Academy of Pediatrics, Virginia Chapter to support legislation that would fix this issue.

- Liquid nicotine can be brightly colored and comes in flavors that can appeal to children, such as cotton candy, chocolate, and gummy bear.
- Just one teaspoon of liquid nicotine can be lethal to a child, but even simple exposure to the skin can cause illness.
- In 2014, the American Association of Poison Control Centers reported 3,957 exposures to liquid nicotine. Slightly more than half of the exposures were in children under the age of six.
- A one year old toddler in New York died in December 2014 after ingesting liquid nicotine.

#### **SUPPORT HB 2036**

**Purchase of tobacco products by minors; vapor products; liquid nicotine packaging; civil penalty.  
HB 2036/DeSteph**

- By September 1, 2015, the Virginia Board of Agriculture and Consumer Services must adopt regulations establishing child proof packaging and labeling requirements for liquid nicotine.
- As of October 1, 2015, liquid nicotine must be sold or distributed in child proof packaging.
- Any person who sells or distributes liquid nicotine without child proof packaging after Oct. 1, 2015 will be subject to a civil penalty.

For more information, contact MSV's government affairs department by phone at 804 | 564-5469, or visit the MSV Web site, [www.msv.org/legislative](http://www.msv.org/legislative).





# MEDICAL SOCIETY OF VIRGINIA Issue Backgrounder

## Workers' Compensation System Reform

Virginia's workers' compensation (WC) system is one of the strongest in the U.S., serving employees and businesses and getting needed care to injured workers so they can return to work at full strength. Physicians are committed to considering reforms to Virginia's WC system that create improvements for employees, businesses and providers.

Currently, the bill that is being considered for WC reform is **HB 1820/Farrell, Workers' compensation; payment for medical services**, which seeks to base WC reimbursement off of commercial health plan rates, as opposed to a Medicare fee schedule.

When considering this legislation, please keep in mind:

- Virginia employers have the 4th lowest WC insurance premiums in the country – 36 percent below the national median.
- Free-market solutions are the best way to continue preserving the strong WC system Virginia currently enjoys. Drastic changes to the system could discourage the robust network willing to provide this complex care.
- Fewer physicians and health care providers treating injured workers means it will take longer for employees to receive care and return to work.
- WC care is very different from private insurance care – there are many additional administrative burdens and requirements, such as time intensive case management and antiquated manual claims submission.

For more information, contact MSV's government affairs department by phone at 804 | 564-5469, or visit the MSV Web site, [www.msv.org/legislative](http://www.msv.org/legislative).



# Tips for a Successful Legislative Visit



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## **Stay on Message.**

- Share personal experience or data that demonstrates how a certain policy will affect your hospital and community.
- If asked a question about the other side of your argument, answer the question as completely as you can, giving your particular perspective.

## **Keep it Brief.**

- If you are requesting action, communicate that up front.
- Because legislators' time is limited, have a plan to budget your time appropriately.

## **Frame the Issue as it Affects the Legislator.**

- Your case is stronger if you present the issue as the legislator sees it.
- Recognize you seldom get everything you ask for and that compromise is important.
- Never argue.

## **Work with Staff.**

- Be on time and let the receptionist know you're there.
- Never view staff as a "second resort." Legislators depend heavily on them.

## **Say Thank You.**

- MSV thank you notes are available for your use.
- Follow-up promptly with any information you have promised to provide legislators or staff.

# AMERICAN COLLEGE OF SURGEONS

*Oregon Chapter*



## “Day at the Capitol” Report - 2013

### *Event Summary*

Our Day at the State Capitol was held **March 10-11, 2013** at the Salem Conference Center and Grand Hotel in Salem, OR. The event was held in conjunction with our Winter Council Meeting and continued the following day at the same location.

This information-packed event was designed to build knowledge, skills and enthusiasm for legislative advocacy. Sunday night we heard from Rep. Mitch Greenlick, Chair of the House Healthcare Committee. Monday we received training from Jon H. Sutton, MBA, Manager, State Affairs, Division of Advocacy & Health Policy, ACS as well as hearing updates from Bryan Boehringer, OMA Lobbyist and other legislators. Another speaker was Sean Kolmer, Governor Kitzhaber’s Health Policy Advisor. In the afternoon our members who were able met with their Senators and Representatives at the State Capitol.



### **AGENDA**

#### Sunday, March 10 – Salem Conference Center

- 1 - 5 pm Council Meeting
- 5 - 6 pm Social hour
- 6 - 8 pm Dinner, Rep. Mitch Greenlick, (d), Portland

#### Monday, March 11 – Salem Conference Center

- 8:00 am Bryan Boehringer, Oregon Medical Assn
- 9:30 Sean Kolmer, Governor's Health Policy Advisor
- 10:00 Jon Sutton, Manager, ACS State Affairs
- Afternoon Appointments, State Capitol



The event was open to all Councilors, ACS Fellows and retired members. We had a **fairly broad geographical representation** at the meeting.

Attendees:

Ron Jaecks, MD, FACS, President  
Nathan Kemalyan, MD, FACS, President-Elect  
Dan Herzig, MD, FACS, Secretary-Treasurer  
Cliff Deveney, MD, FACS, Governor  
Frederic Cole, MD, FACS, Trauma Chair  
Dave Cook, MD, FACS, OMA Representative  
Snell Fontus, MD, FACS, Mackenzie Councilor  
Paul Hansen, MD, FACS, Cancer Chair  
Karen Kwong, MD, FACS, Metro Councilor  
Laurel Soot, MD, FACS, Metro Councilor  
Monte Stewart, MD, FACS, Southern Councilor  
Erik Swensen, MD FACS, North Coast Councilor  
Keith Thomas, MD, FACS, Eastern Councilor  
Harvey Gail, ACS Oregon Administrator  
Monte Schreiber, MD, FACS, OHSU  
Jon Sutton, ACS Government Affairs



*Purpose for ACS Oregon Day at the State Capitol*

Our main reason for holding this event is to ensure the Chapter is engaged and influential in government affairs. Also, the event is a critical part of our legislative advocacy because this is our chance to both build skills and put those skills to the test. ACS Oregon does not have a lobbyist under retainer, so it is even more important that our grass roots effort at lobbying and advocacy is effective. Personal meetings with legislators at the capitol is where the "rubber hits the road" so we take the time to assign each of the participants a meeting with the legislators in their district. This was also a chance for our members to meet with their local representatives who sit on important healthcare committees.

Speakers are Rep. Mitch Greenlick, Chair House Healthcare Committee; Sean Kolmer, one of Governor Kitzhaber's Health Policy Advisors, and Bryan Boehringer, OMA Lobbyist.

*Issues Discussed and Presented*

**Disclose and Offer**

The "disclose and offer legislation" was discussed widely. This bill, an attempt at tort reform, does not fundamentally address the tort claims process, but it touches on elements that if addressed will help the situation.

**Community Care Organizations**

These organizations, also called "CCO's" are central to Oregon's approach to reducing healthcare. Our group discussed CCO's at length, including issues related to how they are actually functioning as opposed to how they were described to function in theory. In Oregon, as in many states, there are

issues to be worked out related to reimbursement rates. Hospitals and CCO's do not always agree on these issues and the tension created by the disputes. In some cases there are legal disputes. These challenges will lessen CCO's effectiveness at doing what they are supposed to do – reduce healthcare costs.

### **Parity for Nurse Practitioners NP's and PA's and MD's.**

This issue was also discussed related to a bill that was in the legislature. It was uncertain whether the bill was moving, but it did have hearings scheduled.

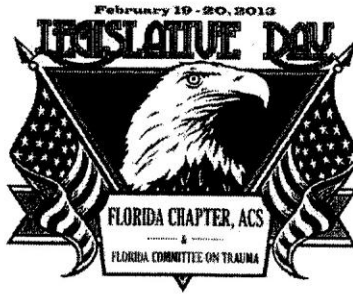
### **Legislative Meetings**

A few of our members in attendance had scheduled appointments with their legislators and/or aides for the afternoon. Several members attended a Healthcare Committee hearing that afternoon.

### **Follow up**

The meeting concluded after the morning discussion. Members expressed uniformly favorable opinions on the format, content and usefulness of engaging with our legislators in this critical time in the state's management of public programs effecting access to health care for our citizens. Our Council intends to send a survey to those<sup>3</sup> participating, and those that couldn't attend to create a more compelling format and schedule so we can improve on the event in 2014.





**Legislative Reception & Advocacy Day Schedule**  
**Tuesday & Wednesday, February 19 & 20, 2013**  
**DoubleTree Hotel**

**Tuesday, February 19**

**9:00 am - 11:45 am**

Association of Florida Trauma Coordinators Meeting

**12:00 pm – 1:00 pm**

FCOT Executive Committee Meeting

**1:00 pm – 2:00 pm**

FCOT Education Committee Meeting

**2:00 pm – 4:00 pm**

FCOT Business Meeting

**4:00 pm – 5:30 pm**

Florida Chapter Council Meeting

**5:30 pm – 7:00 pm**

Legislative Reception

**Wednesday, February 20**

**8:30 am – 9:00 am**

Registration and Continental Breakfast

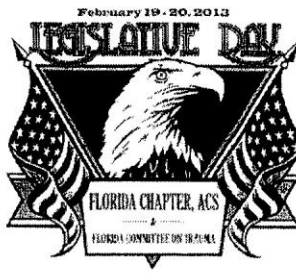
**9:00 am – 1:00 pm**

2013 Key Issues Briefing and Lunch

Legislative Day will begin with a discussion of key issues important to the health care industry with Chris Nuland and Jon Sutton (ACS State Affairs). Following a light lunch, attendees will participate in scheduled meetings with their legislators in the afternoon.

**1:00 pm – 5:00 pm**

Meetings with State Representatives, State Senators, and their staff. Refer to your Legislative Appointments Schedule for locations.



## **FCACS Talking Points 2013**

### **Scope of Practice**

**Requested Action: Support HB 443- Relations Between Optometry and Ophthalmology**

- Thoughtful response to Optometrist's desire for increased scope of practice
- Includes language defining surgery and reserving such surgery for physicians.

**Requested Action: Support SB 612 (Galvano) that would penalize non-MD, non-DO providers that refer to themselves as "doctors" with an intent to deceive."**

- Doctors of Nursing
- Doctors of Chiropractic
- Doctors of Psychology
- Doctors of Optometry

**Requested Action: Oppose ARNP Prescribing of Controlled Substances  
Bills TBA**

#### **Talking Points:**

- ARNPs are designed as part of a physician-led collaborative team;
- Access to narcotics is not a problem; over-prescribing is;
- New rules to limit Pill Mills only apply to physicians – ARNPs would not be covered.
- MDs have medical school plus residency training; ARNPs do not.

### **Insurance Reform**

**Support HB 409 (Baxley) and SB 510 (Legg) that would prohibit "Doctor Dumping"**

- Consumers choose health plans based upon whether their preferred doctors are part of the plan;
- When plans dump doctors immediately after enrollment the patients are embittered and abandoned;
- Patient care suffers, as patients cannot afford to see their doctor

### **Tort Reform**

**Requested Action: Support Common Sense Tort Reforms  
Legislation Being Drafted by Senator Thrasher based on Judiciary hearing**

- Allow contracted mandatory arbitration; it is cheaper and faster than litigation
- Allow defendant doctor to talk with subsequent treating physician;; saves the time and expense of formal depositions
- Increase burden of proof for ER diagnostic tests; ER settings do not allow for a full battery of tests; unnecessary tests increase costs and increase time in ER



## 2013 FCACS Bills of Interest

As of 2/14/13

HB 801  
SB 912

#	Subject	Sponsor	Committees
3	Child Restraints	Slosberg	T; TEDA; EA
13	Wireless Driving	Holder	T; CJ:EA
52	Texting/Driving	Detert	<b>T</b> ; CEPU; Jud
61	Minor Traffic Safety	Slosberg	T; TEDA; EA
66	Child Restraints	Altman	T; CFEA; Jud; App
74	Wireless Driving	Sachs	T; CEPU; Jud
152	Minor Traffic Safety	Altman	T; CEPU; Rules
239	Bad Optometry	Caldwell	<b>HQ</b> ; HHSC
278	Bad Optometry	Richter	<b>HP</b> ; HA; App
281	Surgical Assistants	Gaetz	HQ; HCA; HHSC
305	CRNA expansion	Fresen	HQ; HCA; HHSC
360	Surgical Assistants	Garcia	HP; BI; HHSA
396	Wireless Driving	Abruzzo	TEEP; Jud
398	Pas/hospital Rx	Bean	HP; BI; Jud
409	Baxley Bill	Baxley	HI; IB; App; HHSC
443	Good Optometry	Nunez	HQ; HHSC
499	Telemedicine Coverage	Jones	HI; IB; App; HHSC
510	Baxley Bill	Legg	BI; HP; HHSA; App
536	PT/ARNP	Detert	HP; BI; Rules
612	Doctor of Nursing Bill	Galvano	HP; CJ; CJA; App
625	PA/Hospital Rx	Renuart	HQ; Rulemaking; HHS
4011	Red Light Cameras	Campbell	<b>EA</b> ; App

2013 Legislative Day

**LEGISLATIVE VISITS  
EVALUATION FORM**



Please fax your completed evaluation form to:  
877-835-5798

**1= Poor 2= Not Satisfactory 3= Neutral 4= Satisfactory 5= Excellent**

Legislator's Interest in Topics Discussed	1	2	3	4	5
Quality of Issues Discussed	1	2	3	4	5
Time Allocation Appropriate	1	2	3	4	5
Importance of Legislative Visits to You	1	2	3	4	5
Organization of Legislative Visits	1	2	3	4	5
Materials/Information Provided on Topics	1	2	3	4	5
Overall Rating of Legislative Visits	1	2	3	4	5

Did the legislative visits meet your expectations? YES NO  
If not, please explain.

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Does the Florida Chapter staff need to follow-up with the legislator(s)? YES NO  
If yes, which legislator(s) and on what issue(s)?

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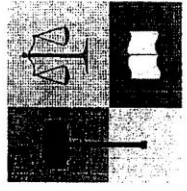
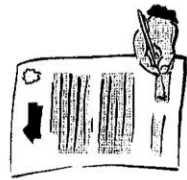
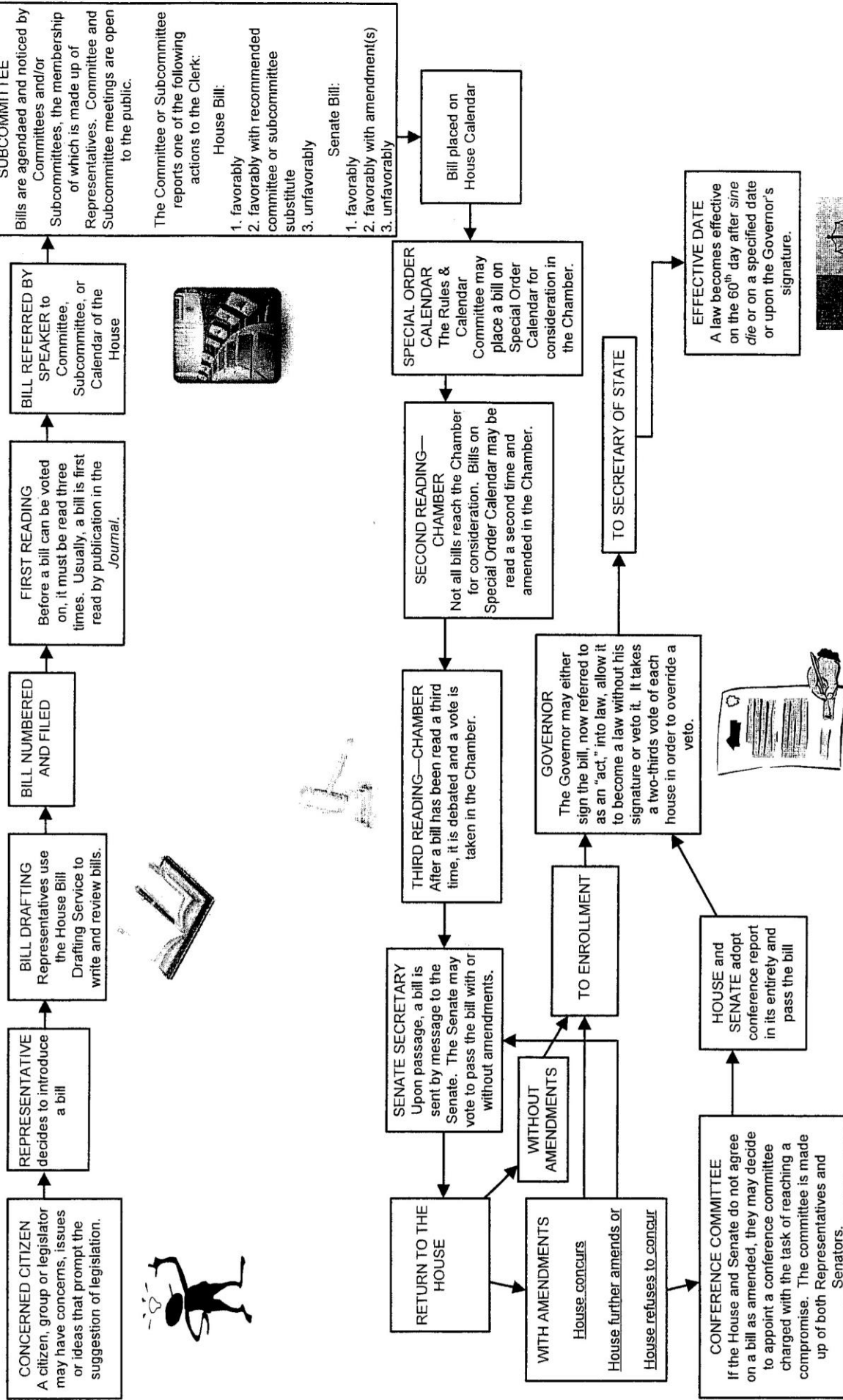
Comments/Suggestions:

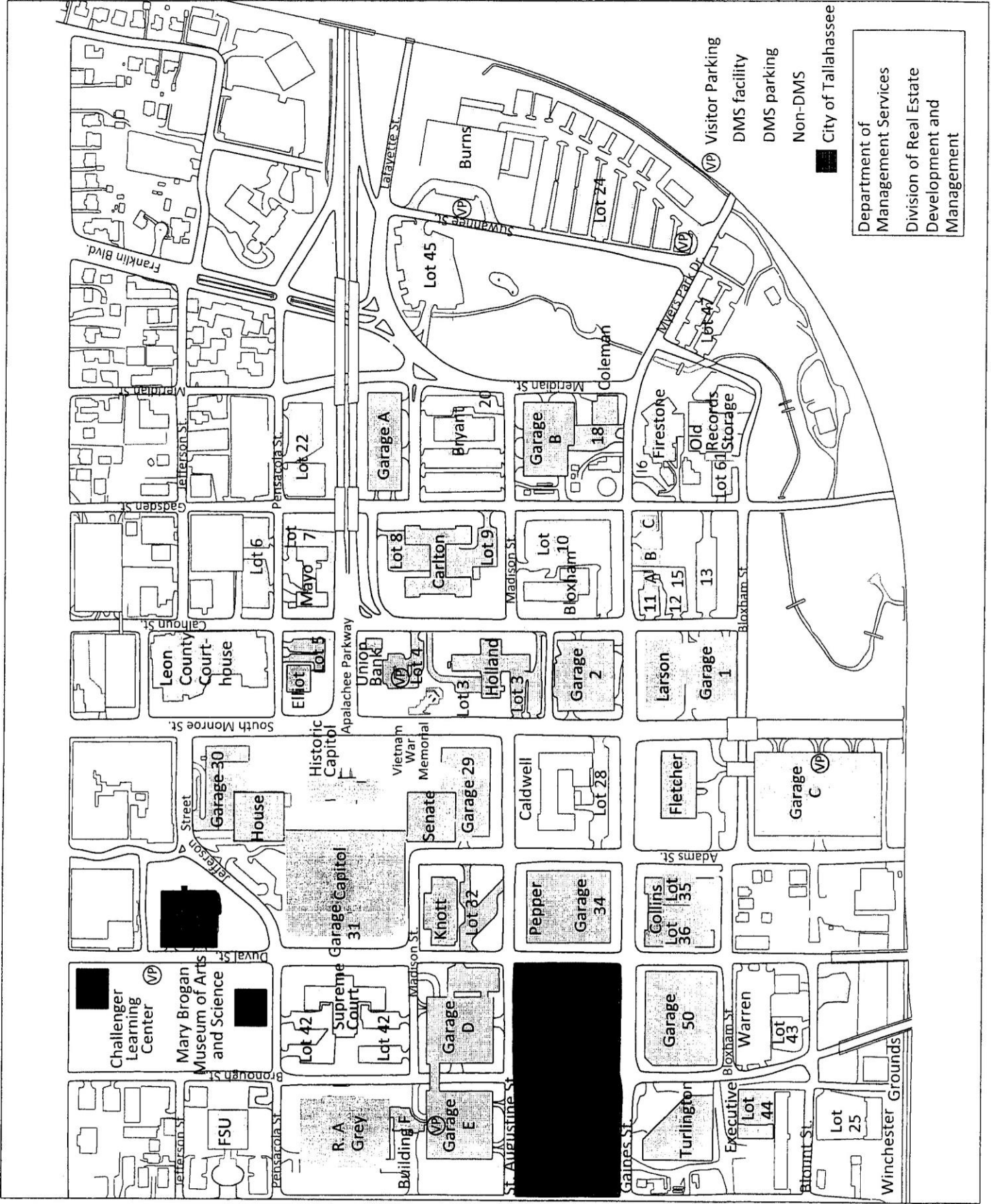
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

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# How an Idea Becomes a Law





 City of Tallahassee  
 Department of Management Services  
 Division of Real Estate Development and Management