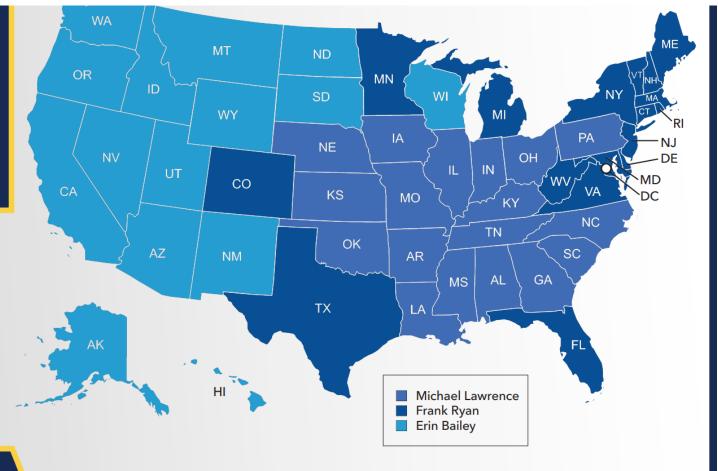
Advocacy at the State Level

Michael Lawrence, ACC Director, State Government Affairs

- >ACC State Affairs Team
 - **≻**Team
 - ➤ Responsibilities
- ➤ Collaboration with Chapters
 - ➤ State Advocacy Structure
 - ➤ Support for Chapters
- ➤ Issues/Recent Highlights



ACC
State
Government
Affairs



ACC.org/Advocacy
#ACCAdvocacy

Collaborating with State Chapters

- ➤ 50 States +DC /51 Chapters
 - ➤ ACC SGA Goal: To position ACC Chapters/Members as the voice of the cardiovascular community within State Legislatures, Agencies and Stakeholder Groups.
 - ➤ Chapter State Advocacy Structure
 - ➤ Chapter Governor & Executive
 - ➤ Advocacy Committee/Chair
 - ➤ Chapters set their own priorities. SGA advises.
 - ➤ Contract Lobbyists
 - ➤CA, FL, PA, TX



State Government Affairs Support for Chapters

- ➤ 50 State Bill Tracking
- ➤ Grassroots Action Alerts
- ➤ Legislative testimony
- ➤ Issue briefs and regulatory comments
- ➤ Organizing/attending state lobby days
- ➤ Legislative Practice Visit Program
- ➤ Recruiting new advocates
- ➤ Press coverage; member Op-eds, LTE, podcasts, etc...
- > Appointments to state health care boards and commissions
- Letters from ACC national supporting chapter position



Urge Governor Hochul to Sign SB 3100 Into Law!

Planning a successful practice visit is a team effort. ACC Advocacy staff can guide participants through the process, and will handle many of the logistics. Participation from the Chapter Executive

On June 20, the New York Legislature passed SS 3100, a bill that bors non-compete agreements. The Governor as 30 days from the day the legislature sends her SS 3100 to sign I mitch last if alse does not sign I within that limetrame, it is considered dead via "poolet veto". As such, it is critical that your voice is heard now!

Below you'll find a link that allows you to add your personal experience with non-compete agreements to the letter and forward it to Governor Hochul.





Trending Issues Across the States

NDUSTRY

In the 2024 state legislative sessions, state chapters, of all sizes, have been busy advocating for policies that help both patients and clinicians. Between 2023 and 2024, ACC Chapters have engaged in various issues at the state level, but some key priorities continue to span the states.



SCA & AEDs (Smart Heart Sports Coalition)



SMART HEART SPORTS COALITION

NFL convened **26** men's & women's professional sports leagues, medical & health policy groups to advocate for sudden cardiac death prevention among high school students through:

- Increase CPR and AED education and training
- Improve access to AEDs
- Establishing Cardiac Emergency Action Plans (CERPs)

Targets

AZ, CA, CO, DE, FL, IL, IN, IA,

LA, ME, MD, MI, MN, MO, MT,

NE, NV, NY, OH, OK, PA, SC,

SD, TN, VA, WI, WV

Model Legislation: flexible to adapt to current policies

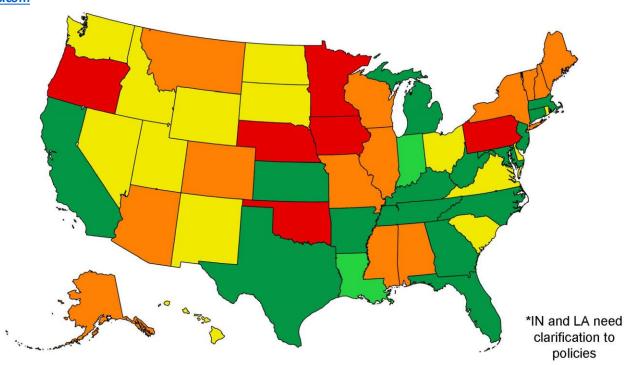


Policy Advocacy Map



Smart Heart Sports Coalition | smartheartsports.com

- ALL POLICIES
- 2 POLICIES
- 1 POLICY
- NO POLICIES



33 states need to adopt at least one additional policy to have all three.

Source: Korey Stringer Institute

Non Compete and Restrictive Covenants

2021 ACC/Board of Governors (BOG) Work Group Survey: Found that **95**% of BOG physician leaders felt that ACC Chapters should support legislation that would limit or ban non competes/restrictive covenants.

Maryland

- ➤ Bill Passed: HB 1388
- Severely restricts non-compete agreements.
- ➤ Key Provisions: No non-compete clauses for physicians with compensation below \$300K
- ➤ For physicians with compensation above \$300k: Restrictions limited to 1 year or 10 miles

New York

- Ongoing Advocacy: Campaign to eliminate/modify non-compete agreements for healthcare workers
- ➤ Governor Hochul vetoed ALL Industry legislation in December 2023
- ➤ New Legislation for 2025: Collaboration with bill sponsor Sen. Sean Ryan and NY Medical Society. Effort led by Drs. Aaron Kithcart and Srihari Naidu.



Current/Future Developments

- States with Active/Pending Campaigns
 - Pennsylvania
 - Legislation passed last week. Pending Governor Shapiro's signature
 - Florida, Oregon, Virginia
 - Focus on banning non-compete agreements for healthcare providers
- Looking Ahead:
 - Ongoing priority for ACC chapters
 - Expect more state legislatures to introduce legislation in 2025
 - FTC's final rule on the issue being challenged in federal court in Texas



ACC State Advocacy Highlights State Spotlights

Georgia's Win From Start to Finish

The GA Chapter spearheaded legislation to establish Sudden Cardiac Emergency Response Plans and require AEDs in all public schools K-12. They <u>found a bill</u> <u>sponsor, drafted legislation, testified in hearings, met with lawmakers, and engaged the press</u>. That bill was ultimately signed into law by Governor Kemp.



Maryland Takes On the Legislature

The MD Chapter adopted an ambitious legislative agenda for the 2024 session, engaging in prior authorization, Medicaid funding, CV tech, and non-compete legislation.

The Chapter hosted a dinner with members of the General Assembly in February and has sent a record number of Action Alerts to engage all MD-ACC members in state policy.





ACC State Advocacy Highlights State Spotlights

South Carolina and Tennessee's Lobby Days

The SC and TN Chapters held successful lobby days in February. Both events' primary focus was to advocate for Smart Heart Sports Coalition bills. SC additionally held meetings with key healthcare lawmakers to discuss the need for significant prior authorization reform.

Alaska's Work With CPR Education

The AK Chapter has been hard at work advocating for legislation to require CPR education in schools. The Chapter testified before the state's Senate Education Committee and met with several state lawmakers. They will continue efforts to teach hands-only CPR to young people in remote areas of Alaska this summer.







ACC State Advocacy Highlights

Grassroots Engagement YTD

- So far, in 2024, ACC State Chapters have launched 22 Action Alerts
 - > 1,623 letters have been sent by ACC members to their state legislators.
 - > 11 State Chapters launched their first Action Alert in 2024.
- State Chapters have been busy engaging with lawmakers and stakeholders
 - State Chapters have hosted & participated in 9 Lobby Days to date.
 - > ACC Members have met with state legislators from all over the country.
 - Chapters have submitted written comments and letters, provided public testimony at legislative hearings, and spoken at press events.







Panel 1 – State Chapter Advocacy

• Moderator: Himabindu Vidula, MD, FACC — Board of Governors Chair, University of Pennsylvania

Panelists:

- Laxmi Mehta, MD, FACC Membership Committee Chair, Ohio State University Wexner Medical Center
- Neerav Sheth, MD, MBA, FACC PA Advocacy Chair, Cardiology Consultants of Philadelphia
- Sammy Zakaria, MD, FACC MD Chapter Governor, Johns Hopkins Bayview Hospital



Table Discussion - Session 1

- 1. What advocacy issues are your organizations most focused on?
- 2. How does industry prioritize issues at federal and state level? Is there an example to highlight?
- 3. What are your key takeaways from the ACC advocacy discussion and why? Did you identify any ideas for collaboration that can lead to success?



Advocating for Health Equity

Melvin R. Echols, MD, MSCR, FACC, FHFSA, FASPC

(Pronouns - He, Him, His 🏲)

Chief Health Equity & Diversity Officer,

American College of Cardiology

Associate Professor of Medicine, Associate Director of the Cardiovascular Research Institute

Morehouse School of Medicine





IDENTIFY YOUR MISSION, VISION AND STRATEGIC GOALS





CHOOSE AMONG THE FOLLOWING 6 DOMAINS TO FOCUS YOUR HEALTH EQUITY EFFORTS





CONSIDER YOUR STAKEHOLDERS AND THEIR SPECIFIC NEEDS

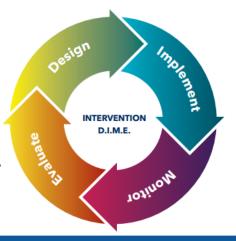


Patients Clinicians Executives Community Health Care Workers & EMS City and State Lagislators



DEVELOP YOUR INTERVENTION(S) USING THE "D.I.M.E." MODEL

When developing your intervention(s) be sure to consider resource requirements, social determinants of health, adaptability for diverse populations/settings, and how to measure impact.



END GOAL: ACHIEVE THE QUADRUPLE AIM OF HEALTH EQUITY BY

Workforce Inclusivity Pathway

- Young Scholars Program
 - Camp Cardiac, October 2024
- Internal Medicine Cardiology Program
 - Underrepresented in Cardiology Cohorts: Women, African American/ Black, Hispanic/ Latinx, LGBTQ+, Indigenous Peoples
 - 2025 Cohort applications open in September 2024
 - Community Demonstration Projects





CVD Healthcare Data, Science, and Tools

Health Equity Heat Map

 Mapping the Burden: Social Vulnerability and Cardiovascular Disease



Health Equity Webinar Series



ACC HEALTH EQUITY WEBINAR COMPANION GUIDE

Improving Cardiovascular Health Among Indigenous Communities: Effective Solutions and Interventions

Jason Deen MD, FAAP, FAAC1; Amanda M. Fretts, PhD, MPH2

BACKGROUND

The ACC Health Equity Webinar Companion Guides are a complementary resource for the ACC Health Equity Webinar series, The webinar series, produced by the ACC Diversity and Indusion Committee, offers clinically relevant, evidence-based findings focused on health care disparities as they pertain to minority racial and ethnic groups and under-represented populations in cardiovascular care. This guide provides the background, highlights, and clinical pearls from the "Improving Cardiovascular Health Among Indioenous Communities: Effective Solitions and Interventions' webinar.



- Indigenous Peoples are 50% more likely to have premature cardiovascular disease (CVD); 36% will die of CVD before the age of 65, compared to 14.7% GMM:bios.
- CVD is the leading cause of mortality for all Indigenous Peoples, and the second leading cause in Indigenous women.
- CVD prevalence is 12% higher in Indigenous Peoples, compared to other races in the US; CVD mortality is 20% greater than other races in the US.
- Indigenous women are particularly at risk of poor outcomes, especially during pregnancy. Sixty percent of Indigenous women enter pregnancy with suboptimal CV health, which exacerbates CVD risk for future maternal and offcoring.
- Social drivers of health are important risk factors in Indigenous communities.
- Social drivers of health stem from the lingering effects of colonization and are affected by historical trauma and systemic racism.
- Prominent CVD risk factors in Indigenous Peoples are obesity and diabetes mellitus type II.
- CVD risk in Indigenous Peoples begins early in life with prevalent metabolic syndrome in ~25% of Indigenous adolescents.
- CVD risk factors in Indigenous youth include adverse childhood experiences and maternal-child interactions from exacerbated CVD risk during prepagator.



Education and Training

- Strategic Needs Assessment
- Curriculum Development
 - Community Healthcare Workers (CHW)
 Education
 - 12 hours of certified content
 - Feasibility study
- Expand Existing Programs
 - Implicit Bias Mitigation Education
 - Train the Trainer (15+ Facilitators)
 - 2-hour workshops for Leadership Forum participants
 - Member Workshops
 - Future Offerings for External Partners





Membership, Partnerships, and Collaborations

- ACC.24
 - Atlanta Heart Health Fair
 - Health Equity Hub
- ACC Board of Governors and Chapter Initiatives
- 2024 Health Equity Summit
 - December 2024
- ACC.25 Planning





Community, Advocacy, and Policy

- Rural Cardiovascular Health Initiative (RCHI)
 - Twelve-month community-based pilot project in Hobbs, NM in collaboration with the JF Maddox Foundation
- Association of American Indian Physicians
 - On-going partnership to improve cardiovascular care for Indigenous peoples
- Health Policy and Stakeholder Engagement
 - Prioritizing legislative efforts such as the ARC Act and the Access to AEDs Act to
 advance equity in cardiovascular care.





Clinical Trial Diversity



2024 - 2025 CTR Cohort - 51 learners

Women: 51%; Black: 20%; Hispanic: 20%;

Asian: 38 %; White: 18%

Clinical Trial Diversity: Upping Your Game:

- Fourth cohort launched in early 2024; first meeting at Heart House held mid-June
- Conducted survey to understand primary barriers to clinical research
 - Time
 - Mentorship
 - Institutional structure
- Continue building CTR alum network (almost 200 members exposed to CTR since 2019)

ACC.24

 3 Clinical Trials Research sessions at ACC.24 Health Equity Hub

Health Equity Summit

 Community engagement in CTR will be focus of upcoming Health Equity Summit



JACC Advances – Health Equity Publication

STATE-OF-THE-ART REVIEW

Coming July 31st!

Achieving Equitable
Cardiovascular Care for All

ACC Board of Trustees Health Equity Task Force Action Plan



HEDI at ACC through 2028



HEALTH EQUITY

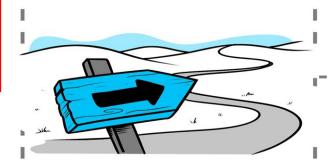
- Actionable CVD health care data, science and tools.
- Education and training.
- Advocacy and policy.



EDUCATIONAL ASSESSMENT

- Personalized educational experiences.
- Streamlined development of programs and products.
- Easily discoverable in optimal channels.

MAJOR INITIATIVES



CONTINUOUS CV CLINICAL COMPETENCE

- Pursuit of a new CV Board of Medicine through ABMS.
- Focus on competency and addressing gaps.



GUIDANCE AT THE POINT OF CARE

- Quick, searchable, and easily accessible information.
- Multiple channels integrated into the clinical workflow.



CARE TRANSFORMATION

- Infrastructure for using accreditation and clinical and operational data for ambulatory settings.
- Best practices for CV team structures, processes and payment models.
- Digitally enhanced care model.

Panel 2 – Advocacy in the Community

Moderator: Melvin Echols, MD, FACC

Panelists:

- Beth Harris, DNP, ACNP-BC Emory Healthcare
- Modele Ogunniyi, MD, MPH, FACC Emory University/ Grady Health System
- Gurusher Panjrath, MD, FACC George Washington University Hospital
- Thad Waites, MD, MACC Hattiesburg Clinic/ Forrest General Hospital, MS State Board of Health



Table Discussion - Session 2

- 1. What methods does your organization use to engage in community outreach?
- 2. How do you reach underserved communities? Which organizational systems affect the success of community advocacy?
- 3. What are some innovative approaches we can employ to screening and connecting community members to follow up care when needed?
- 4. What other stakeholders and partners does your organization lean on in these efforts?



The ACC Thanks You For Your Partnership!























































