



2020



MINNESOTA
MEDICAL
ASSOCIATION

Annual Report



FEBRUARY 2021

2020

A Year of Loss, Sacrifice and Commitment

It is my privilege to share with you the MMA Annual Report. A year ago, none of us could have imagined what 2020 had in store. And, like all of you, I was glad to bid 2020 adieu and I look forward to 2021 with hope for a better year.

The loss endured in 2020 was profound – by the end of the year more than 5,300 Minnesota lives, more than 346,000 American lives, and approximately 1.8 million lives worldwide were lost to COVID-19. The virus also compounded the pain for those who lost loved ones to other diseases and traumas by robbing them of the ability to hold and comfort them at the end of life, and by altering our grieving rituals.

For the Minnesota medical community, 2020 was a year of great personal and professional sacrifice. Care delivery was disrupted, delayed, and overwhelmed. Individuals put themselves at direct personal risk caring for the severely ill. Physicians, nurses, and other health professionals bore personal witness to lonely and difficult deaths. Medicine and science were politically weaponized, and misinformation was rampant. Too often, the public was too scared, too weary, and unwilling to set aside American individualism for the common good.

But nevertheless, physicians and other health care workers persisted. Minnesota clinics, hospitals, health systems, long-term care facilities, public health agencies, and state health leadership collaborated on testing, data, best practices, clinical trials, and resource allocation. Science triumphed with the development of new therapies and vaccines.

As medicine was called to respond, so too was the MMA. And we did. I am incredibly proud of all that MMA staff and leadership accomplished in 2020 to support Minnesota physicians and physicians-in-training, and the health of Minnesotans. As we have done since 1853, the MMA remains your partner, your advocate, and your professional community.

Thank you.

Wishing you good health in 2021.

A handwritten signature in blue ink that reads "Janet L. Silversmith". The signature is fluid and cursive, written in a professional style.

Janet L. Silversmith, CEO

MMA LEADERSHIP

(JANUARY THROUGH SEPTEMBER 2020)

2020 Officers

PRESIDENT

Keith L. Stelter, MD, Mankato

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Ashok Patel, MD, Rochester

Laurel Ries, MD, St. Paul

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FINANCE AND AUDIT

Chair: Edwin Bogonko, MD, Shakopee

ETHICS AND MEDICAL - LEGAL AFFAIRS

Chair: Dennis O'Hare, MD, St. Paul

MEDICAL PRACTICE & QUALITY

Chair: Kevin Donnelly, MD, St. Cloud

PUBLIC HEALTH

Chair: Cresta Jones, MD, FACOG,
Minneapolis

COMMITTEE ON ACCREDITATION AND CONTINUING MEDICAL EDUCATIONS

Chair: Robert Moravec, MD, Oakdale

MINNESOTA MEDICINE ADVISORY COMMITTEE

Chair: Zeke McKinney, MD, Minneapolis

MMA Policy Council

Chair: Britt Ehlert, MD

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Christy Boraas, MD, MPH

Dan Carroll, MD

Nicole Chaisson, MD

Bruce Gregoire (medical student)

Osama Ibrahim, MD

Ryan Kelly, MD

Lisa Mattson, MD

Thomas Mulrooney, MD

Anne Pereira, MD

Spencer Pruitt, MD

Frank Rhame, MD

Caleb Schultz, MD

Jennifer Tessmer-Tuck, MD

Rebecca Thoman, MD

Meg Kersey-Isaacson, MD

ZUMBRO VALLEY MEDICAL SOCIETY APPOINTEES

Nusheen Ameenuddin, MD

Suliman El-Amin, MD

James Hebl, MD

Randy Hemann, MD

James Hoffman, DO

Sheila Jowsey-Gregoire, MD

Kathy Lombardo, MD

Ariela Marshall, MD

Ashok Patel, MD

Neel Shah, MBChB

Kristene Tadese (medical student)

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Timothy Dempsey, MD, MPH

MEDICAL STUDENT SECTION

Adrina Kocharian

MMA PRESIDENT-ELECT

Marilyn Peitso, MD

AT-LARGE (APPOINTED BY MMA BOARD OF TRUSTEES)

Chair: Britt Ehlert, MD

Amy Boles, MD

Joshua J. Crabtree, MD, MBA

Robert Koshnick, MD

Ahmed Pasha, MD

Verna Thornton, MD

MMA Medical Student Section

Co-chair: Kate Hanson (University of
Minnesota, Twin Cities Campus)

Co-chair: Kaylie Evers (University of
Minnesota, Duluth Campus)

MMA Resident and Fellow Section

Chair: Christopher Wee, MD, Rochester

MMA Foundation

Board President: Juan Bowen, MD, Rochester

MEDPAC (MMA's political action committee)

Chair: William Nicholson, MD, Maplewood



Responding to a Pandemic

The MMA first reported on the COVID-19 pandemic in its Feb. 27 edition of *MMA News Now*. Although no cases had been reported in the state at the time, the MMA worked to keep Minnesota physicians and physicians-in-training well informed. We created a dedicated webpage with resources on the pandemic; distributed information on the state's response; alerted physicians to executive orders, federal laws, and state policy changes. Among the numerous early inquiries to the MMA were many physicians looking for ways to volunteer to support their colleagues and serve their communities.

In mid-March, Minnesota hit double digits in cases, the governor postponed elective surgeries and procedures, and most of the state's non-essential workers — including MMA staff — began working remotely. Recognizing the urgency of the situation and the importance of timely and relevant information, the MMA focused nearly all of its advocacy efforts on the pandemic and made its email publications available to all Minnesota physicians, regardless of membership status. To complement written updates, the MMA launched a series of popular noon-time virtual COVID-19 forums to bring up-to-date information, resources, and expert content to physicians across the state.

The MMA aggressively advocated for PPE with community and state leaders, as well as with members of the Minnesota congressional delegation. MMA lobbyists urged adoption of a state bill that allocated \$200 million to combat the COVID-19 pandemic. In collaboration with the AMA, the MMA sought changes in Medicare and Medicaid telehealth coverage and payment policies and urged state payers to ease administrative processes.

By the end of March, the MMA had requested executive action for a time-limited stay-at-home order,



for MinnesotaCare tax relief for physician practices, for actions to ensure patients in opioid treatment programs could readily obtain their medications, and to ease the 30-day state limit on opioid prescriptions.

MMA advocacy efforts also ensured that the voice of physicians was brought directly to the virtual tables where decisions were being made. MMA CEO Janet Silversmith served on the health department's COVID-19 community advisory committee; MMA Ethics Committee Chair, Dennis O'Hare, MD, represented MMA on the Minnesota COVID-19 Ethics Collaborative; the Board of Trustees met directly with Commissioner of Health Jan Malcolm, Assistant Commissioner Marie Dotseth, and state epidemiologist and medical director Ruth Lynfield, MD. The MMA Executive Committee met with Gov. Tim Walz and his staff to urge adoption of stronger public protections in mid-November and the MMA,

through member Jill Amsberry, DO, was part of the Minnesota Department of Health (MDH) COVID-19 Vaccine Allocation Advisory Group. Amsberry, a pediatrician practicing at CentraCare Health in St. Cloud, took an active role in communications regarding the rollout of the vaccine in December. MMA was also visible at other state COVID-19 press events, with trustee and emergency physician Carolyn McClain, MD, and member and infectious disease physician Peter Bornstein, MD, MBA providing insights and experiences.

Throughout the summer and as the pandemic delved into its darkest days, the MMA was a visible and reliable source of public health information and guidance as we worked to assert the trusted voice of physicians amid rampant disinformation.

MMA assessed pandemic's impact

During the summer, the MMA surveyed all physicians and medical groups to gather information on the personal, health, and economic impact of COVID-19. It found that Minnesotans experienced adverse health outcomes due to delays in care, the use of telehealth had surged, the bottom lines of physicians and medical practices in Minnesota were hurt significantly during the first months of the COVID-19 pandemic, and physicians feared the next wave of the virus. The results of the study will support MMA's continued advocacy.

The power of partnership

The MMA's COVID-19-related advocacy occurred on both the national and state level. For federal issues, the MMA relied on its relationship with AMA and other

state medical societies. Locally, the MMA convened specialty partners to strengthen our overall impact.

In late March, with the urging of the MMA, the AMA and 138 state medical associations, specialty societies and healthcare organizations, Congress passed the Coronavirus Aid, Relief, and Economic Security (CARES) Act. Of that \$2.2 trillion package, \$100 billion was allocated for healthcare-related entities to compensate for lost revenue and other expenses due to the pandemic.

In April, the MMA and four other healthcare associations in Minnesota (Minnesota Hospital Association, Care Providers of Minnesota, Leading Age Minnesota and the Minnesota Home Health Association) urged Gov. Tim Walz to issue an Executive Order (EO) providing healthcare workers with limited immunity during the state's declared emergency on COVID-19. The push for these liability protections continued throughout the rest of the year.

In May, the MMA and nearly two dozen other medical organizations crafted recommendations to inform changes to Gov. Walz's restrictions on non-essential surgeries and procedures.

In June, the MMA joined more than 30 other healthcare organizations in a letter to HHS Secretary Azar and Seema Verma, administrator for the Centers for Medicare and Medicaid Services (CMS), to request the continuation of the flexibilities regarding telehealth services that had been afforded to providers during the COVID-19 pandemic response.

In late June, the MMA and 20 other state medical societies urged public and private leaders across the



state to require the wearing of face masks or face coverings to help control the spread of COVID-19.

Practice Good Health campaign launched

At a time when misinformation was rampant and the credible voice of physicians was needed, the MMA launched its Practice Good Health campaign.

The campaign was designed to increase the visibility of Minnesota physicians in speaking up about and combatting COVID-19; to encourage Minnesotans to continue taking care of their current health conditions and to not be afraid of seeking care when they need it; to increase MMA's standing as a visible and trusted voice and community leader speaking for the health of Minnesotans; and to increase physician awareness of MMA and its role in supporting physician health, well-being and professional satisfaction.

In late September, a Practice Good Health video featuring more than two dozen members from across the state urging their fellow citizens to "Mask Up, Minnesota" garnered more than 13,000 views.

Pandemic a central focus at Annual Conference

The COVID-19 pandemic took center stage during the MMA's first-ever virtual Annual Conference in September. Infectious disease expert Michael T. Osterholm, PhD, MPH; state epidemiologist and medical director Ruth Lynfield, MD; and front-line physician Jon B. Cole, MD kicked off the conference. They discussed the shifting epidemiology of the disease; the state, federal and world response to the

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pandemic; what the greatest challenges have been in the fight against COVID-19; and what we need to improve to ensure that we are better equipped to handle the next public health emergency.

Conference attendees also explored how COVID-19 exposed the flaws and vulnerabilities in the U.S. healthcare system. Topics addressed were the need to strengthen our public health system, how COVID-19 has exposed racial and ethnic disparities in access to and quality of healthcare, and whether healthcare capacity can survive future crises given current payment models.



**Stay home
when possible**



**Wash your
hands**



THE OTHER PANDEMIC

Racism and Health Inequities

In addition to the COVID-19 pandemic, 2020 was a year that further revealed the “other” devastating pandemic – racism. Minnesota, like most of the US, experienced troubling disparities in COVID-19 cases and deaths among BIPOC communities. But it was the May 25 killing of George Floyd by Minneapolis police that triggered unprecedented outrage and activism, locally and across the globe. Physicians and physicians-in-training joined the public outcry for systemic change. The MMA, too, spoke out and took a hard look at its own actions.

Listening, learning and a reset

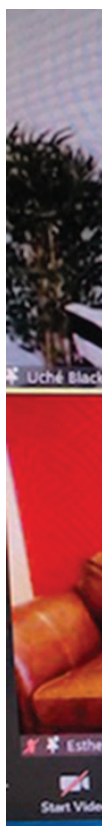
In the immediate aftermath of Floyd’s death, the MMA and the Twin Cities Medical Society (TCMS) issued a public statement. “His death serves as a stark reminder that violent police tactics, discrimination in crime laws, and bias in incarceration pose serious threats to health,” said the statement signed by MMA President Keith Stelter, MD, and TCMS President Ryan Greiner, MD. “Minnesota’s deep and persistent racial and ethnic disparities, including disparities in health, can only be dismantled by changing historic policies and cultures built on racism.”

A week later, MMA leadership released an *Insights* article calling for action to solve systemic racism in health care. “We count the MMA among those organizations that have spent more time talking about and analyzing the problems of health disparities and less time combatting much of the root cause (systemic racism) or demanding change in our society,” said the piece signed by Stelter; Board Chair Randy Rice, MD; Dionne Hart, MD, board member and co-chair of the MMA Health Equity Advisory Group; and CEO Janet Silversmith.

MMA leadership then called upon the chairs of the MMA’s Policy Council, Public Health Committee, and Health Equity Advisory Group to convene physicians from across the state to listen to physicians’ experiences, to assess MMA’s prior health equity work, and to develop recommendations for how the MMA could accelerate its commitment to achieving health equity and to combat the root causes of these inequities – institutional, systemic, and structural racism.

Over the course of two meetings, more than 80 participants, with additional input from a member-wide survey, shared their stories and identified work needed by organized medicine. The group affirmed three key areas of focus – diversifying the physician workforce; addressing the social determinants of health; and reducing structural racism and implicit bias in health care, with a primary focus on the culture of medicine and organized medicine.

The results of the group’s work were presented at the August 2020 meeting of the Board of Trustees and an updated set of initiatives were approved in October. In December, the MMA Board of Trustees approved the formation of two new groups: an MMA Task Force on Barriers to Workforce Diversification in Physician Education, Training & Licensure, and the launch of an MMA Racial Healing & Reconciliation Task Force.



National experts Uché Blackstock, MD, (upper left), Jan van Dis, MD, and Esther Choo, MD, MPH, discussed racism with the MMA's Marilyn Peitso, MD, as part of the Annual Conference.



influence on health outcomes through racism and systemic oppression.

Change starts with awareness and education

Education is a key component of MMA's work and it was deployed again in 2020 to tackle health disparities and address systemic racism. Through live forums, on-demand content, and written publications, the MMA provides Minnesota physicians with the information and tools they need.

In July, MMA member Nathan Chomilo, MD, FAAP, medical director for the state's Medicaid and MinnesotaCare programs, led a virtual forum on "Health Disparities Amid the COVID-19 Pandemic."

Chomilo was also part of a forum in August, "Race in Medicine: A Conversation," that examined the

role that race and racism play in care delivery. He was joined by Mary Owen, MD, and Andrea Westby, MD, and moderator Zeke McKinney, MD. The MMA was pleased to partner on this forum with the Minnesota Chapter of the American Academy of Pediatrics, Minnesota Academy of Family Physicians and Twin Cities Medical Society.

National experts Uché Blackstock, MD, Esther Choo, MD, MPH, and Jane van Dis, MD, examined common barriers to addressing equity in health care and provided a series of compelling arguments for enacting true and measurable changes during the MMA's Annual Conference in late September. David Jones, MD, PhD and Brooke Cunningham, MD, PhD examined the long history of the use of race in clinical care and challenged attendees to seek change.

In addition to these live, virtual events, the MMA added new online courses: "Structural Racism and Other Barriers to Health Equity," "Race in Medicine: A Mini-Course," and "Addressing Racism with Youth of Color in Our Daily Interventions."

The MMA reached an even broader audience through a partnership with the Minnesota Department of Health and the Department of Human Services on their series: "Building Systems for Culturally Responsive Integrated Care."

Strength in numbers

In mid-September, the MMA and 30 Minnesota-based health care organizations, pledged to help Minnesota eliminate systemic racism and committed to addressing racial disparities and inequities.

The groups agreed, among other things, to:

- Re-examine organizational policies with an equity lens and make any policy changes needed to promote equity and opportunity.
- Work to eliminate decisions that negatively impact underrepresented and underserved groups.
- Improve access to and consumer experience for all needed care services -- primary, specialty care, and hospital care.
- Partner with policymakers, employers, and community advocates to remove the economic barriers to health equity.
- Commit to hiring locally and promoting Black, Indigenous, People of Color (BIPOC) and other underrepresented and underserved people into leadership roles. Commit to be employers that hire, develop, retain and support a diverse workforce.
- Renew and expand the commitment to providing anti-racism and implicit bias training for all leaders and staff.

Influencing national policy

The Minnesota delegation to the AMA's House of Delegates submitted a resolution calling for the end of the use of race in medicine as a proxy for biology, genetics, or heredity. The resolution was adopted at the AMA's Interim House of Delegates meeting in mid-November. The resolution also asked that medical education at all levels recognize the harmful effects of presenting race as biology, while also recognizing that race does have an

DESPITE PANDEMIC, OTHER MMA ADVOCACY CONTINUES

Although the twin pandemics of COVID-19 and structural racism dominated much of our attention in 2020, the MMA also made progress on other issues facing medicine in Minnesota.

Prior Authorization

During the 2020 legislative session, several broad patient protections and reforms to reduce the administrative burden of prior authorization (PA) were passed. These measures will ease the delivery of care to patients. The timelines that health plans have to make a PA determination for a drug, procedure or diagnostic test are dramatically shortened. Other elements of the law include:

- Requiring that PA denials of procedures and diagnostic testing be made by Minnesota-licensed physicians who practice in the same or similar specialty as the service being reviewed.
- Requiring that health plans provide a 60-day transition period for patients who have approved services, should they change health plans.
- Requiring that health plans and utilization review organizations (UROs) post on their website the clinical criteria for their PA procedures. Changes to the criteria they use for PA must be transmitted to providers at least 45 days prior to the change taking effect.
- Precluding health plans from retroactively denying PA approvals once granted.
- Precluding health plans from changing coverage terms or clinical criteria during the plan year for patients who have an approved PA.

Tobacco

After years of debate, the Minnesota Legislature voted to increase the age to purchase tobacco and nicotine products from 18 to 21. The measure aligns the state with federal law, and ensures effective enforcement and compliance by tobacco retailers.

In December, the MMA flexed its legal advocacy muscle by joining the AMA and 24 other public health and anti-tobacco organizations on an amicus (“friend of the court”) brief with the Eighth Circuit Court of Appeals in a case that tests the City of Edina’s June 2020 ordinance prohibiting the sale of flavored tobacco products. In the case, tobacco manufacturer R.J. Reynolds sued the City of Edina. The MMA, AMA, Public Health Law Center, and others filed the amicus brief to support the long-standing precedent that a local government can regulate the sale of tobacco products to protect their communities. The brief also argues that Edina’s ordinance is not a “product standard” subject to preemption by the federal Tobacco Contract Act.

Opioid Education

On Jan. 1, 2020, the MMA launched an online, self-paced activity for prescribers in the state to meet the legislative mandate to “obtain at least two hours of continuing education credit on best practices in prescribing opioids and controlled substances.” All prescribers in the state, except those participating in the Minnesota Department of Human Service’s Opioid Prescribing Improvement Program, must comply with this requirement for licensure renewals before the end of 2022. This online activity is free to MMA members and was extremely well-received by members and non-members alike.

Physician Well-being

The MMA continued its work to support physician well-being and professional satisfaction. In addition to easing administrative burdens,

the MMA partnered with Benovate, a Minnesota-based software development company, to provide MMA members with free access to a customized wellness app. Through the personalized app, physicians had unlimited access to tools, information and incentives to help make simple lifestyle changes to improve health and increase overall well-being. The MMA also made a variety of resources available online to physicians dealing with the COVID-19 pandemic

Suicide Prevention Training

The MMA and its Foundation partnered with the National Alliance on Mental Illness (NAMI) Minnesota and the Minnesota Department of Health (MDH) to offer two train-the-trainer opportunities for members who have an interest in leading suicide prevention workshops for colleagues. Josh Stein, MD, and Alexandria Cabrera, a medical student at the University of Minnesota, were trained and certified to lead Question-Persuade-Refer (QPR) Suicide Prevention Gatekeeper Training. Now, the MMA Foundation funds their workshops to train colleagues to recognize the warning signs of a suicide crisis, and to question, persuade, and refer someone to help. Stein and Ann Vogel, MD, were trained to lead Counseling on Access to Lethal Means (CALM) workshops, which are designed to help physicians understand who needs lethal means counseling and how to counsel people at risk for suicide—and their families—to reduce access to lethal means, particularly firearms. The MMA Foundation also funds CALM training for members.

Vaccination Rates

Minnesota has among the weakest vaccination laws in the country due primarily to a provision that allows parents to opt out of vaccines based on a personal, non-medical, objection. The importance of obtaining routine vaccinations was a key message in the MMA’s Practice Good Health campaign and the MMA will continue to seek changes to the law.

Firearm Safety

Although a top MMA priority in 2020, firearm safety failed to move forward. The DFL-led House had planned to pursue several measures to reduce firearm injury and death, including expanded background checks and a “red flag law” to allow law enforcement to temporarily remove firearms from individuals who may be a threat to themselves or others. With the focus shifting to the pandemic and because of strong opposition from the GOP-led Senate, there was no action taken on these bills.

Formulary Changes

A measure to protect patients against mid-year changes in their health plan’s drug formulary cleared the relevant committees in the House, but failed to gain traction in the Senate. Patients—particularly those with chronic conditions—often select their health insurance product based upon the plan’s formulary, yet nothing in law precludes the health insurer from changing the formulary in the middle of an enrollee’s contract year. The state’s health plans opposed this legislation.

MEMBERS MAKING A DIFFERENCE

Medicine is a 24/7 calling. Improving and saving lives. Helping patients feel better. Pushing for improvements. These people go above and beyond the call of duty regularly and are truly making a difference in people's lives. We are proud to call them MMA members.



Heather Bell, MD and Kurt DeVine, MD

For the past few years, Bell and DeVine have been strong advocates for appropriate opioid prescribing programs and for greater medication-assisted treatment accessibility throughout Minnesota, primarily in underserved, rural communities where access previously was limited. Earlier this year, they pivoted their Project ECHO model to focus on COVID-19, and hosted a series of noon-time webinars to help Minnesota physicians stay informed. They were also both recipients of the 2020 MMA President's Award.



Nathan Chomilo, MD

Chomilo is the medical director for Minnesota's health care programs, Medical Assistance and MinnesotaCare, as well as a pediatrician and internist at Park Nicollet. In his position leading the state's public health care programs, Chomilo is tasked with addressing health equity, health care access, and better integration of care across the state. Responsibilities also include implementing a program aimed at decreasing inappropriate overprescribing of opioids, reducing adverse birth outcomes among American Indian and U.S.-born African American women, and finding ways to effectively address social risk factors that impact health. Chomilo is a founding member of Minnesota Doctors for Health Equity, a statewide coalition of physicians, and the medical director for Minnesota's Reach Out & Read program. He was also the MMA's June 2020 Advocacy Champion.



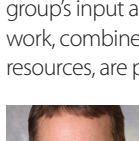
John Goeppinger, MD

Goeppinger, the current president of the Goodhue County Medical Society, volunteers regularly at two free clinics, one in Red Wing and another in Brooklyn Center. The MMA Foundation recognized Goeppinger with the 2019 Physician Volunteerism Award. The award honors physicians who make extraordinary

contributions as volunteers to serve people who have been left behind or who have few options for health care. When the COVID-19 pandemic hit, Goeppinger launched an experiment he calls "Medicine from the Parking Lot" so he could continue providing care directly to patients. Goeppinger has also volunteered extensively in Africa and the Middle East.



Britt Ehlert, MD; Dionne Hart, MD; Cresta Jones, MD; and Christopher Reif, MD, MPH



After the horrific killing of George Floyd in May, MMA leaders sought to focus and accelerate the organization's role in advancing health equity and rooting out racism in health care. Drs. Ehlert, Hart, Jones, and Reif convened more than 80 physicians over two summer meetings. They listened to experiences, challenged past MMA actions, gathered ideas, and developed recommendations for MMA action. Based on the group's input and their leadership, new areas of work, combined with increased organizational resources, are planned for 2021.



John Hick, MD

Hick, board-certified in Emergency Medicine and Emergency Medical Services, currently serves as deputy chief medical director for Hennepin EMS and medical director for emergency preparedness at Hennepin County Medical Center. He has been a leader on the front lines of the COVID-19 pandemic and is a key member of the state emergency operations center. Earlier this year, he was awarded the 2020 MMA President's Award for his work on the pandemic.



Christopher Wee, MD

As the 2019-2020 chair of the MMA-RFS Governing Council, Wee was instrumental in the formation of an ad hoc task force of trainees assembled to create a COVID-19 policy proposal that was ultimately adopted by the MMA Board of Trustees. These recommendations addressed resident concerns regarding access to PPE, sick leave policies, and protections for immunocompromised trainees. Wee serves as chair of the AMA RFS Governing Council for the 2020-2021 term, and also moderated "The Limits of Telehealth and It's Broader Adoption" at the 2020 MMA Annual Conference. Wee is a hematology and medical oncology Fellow at Mayo Clinic.

Making a difference at a local level

MMA's Component Medical Society leaders

HEART OF THE LAKES

President: Robert A. Koshnick Jr., MD

STEARNS BENTON MEDICAL SOCIETY

President: Patrick Zook, MD

GOODHUE COUNTY MEDICAL SOCIETY

President: John L. Goeppinger, MD

PRAIRIE MEDICAL SOCIETY

President: Cindy Firkins Smith, MD

STEELE COUNTY MEDICAL SOCIETY

President: Grant D. Heslep, MD

TWIN CITIES MEDICAL SOCIETY

President: Ryan Greiner, MD

CEO: Ruth Parriott

ZUMBRO VALLEY MEDICAL SOCIETY

Co-President: Dionne A. Hart, MD

Co-President: Ashok Patel, MD

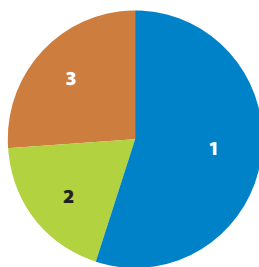
Executive Director: Beth Kangas

2020 Financial Highlights



EXPENDITURES: HOW YOUR DUES ARE USED

- 1 **MEMBER ENGAGEMENT** 17%
Member engagement, Annual Conference, Day at the Capitol, Physician Forums, other events, committees and task forces, student and resident sections, component society services
- 2 **ADVOCACY** 24%
Legislative and regulatory lobbying, policy development
- 3 **COMMUNICATIONS & EDUCATION** 20%
Minnesota Medicine, *MMA News Now*, website, *Insights*, CME (accreditation and joint providership), other education
- 4 **GOVERNANCE** 15%
MMA Board, AMA delegation
- 5 **INFRASTRUCTURE & OVERHEAD** 24%
Office rent, IT, equipment/supplies, finance and human resources, professional development, partnerships and sponsorships



TOTAL MMA OPERATING REVENUE: \$2.9M

- 1 **DUES** 55%
Dues payments from members
- 2 **NON-DUES REVENUE** 19%
Includes revenue from advertising, sponsorships, event registration, CME services, specialty society lobbying, grants.
- 3 **SPENDING POLICY** 26%
Investment income used for operations

2020 Membership Information

NORTH CENTRAL TRUSTEE DISTRICT	482
At-Large	181
South Park Region	43
Stearns Benton	235
West Central.....	13
Wright	10

NORTHWEST TRUSTEE DISTRICT	65
At-Large.....	7
Headwaters.....	18
Heart of the Lakes Region.....	15
Red River Valley	25

NORTHEAST TRUSTEE DISTRICT.....	589
At-Large	589

SOUTHEAST TRUSTEE DISTRICT	5,229
At-Large	81
Freeborn.....	44
Goodhue.....	71
Rice.....	30
Steele.....	57
Wabasha	12
Winona	14
Zumbro Valley	4,920

SOUTHWEST TRUSTEE DISTRICT	571
At-Large	36
McLeod-Sibley.....	19
Nicollet-Le Sueur	21
Prairie	493
Waseca.....	2

TWIN CITIES TRUSTEE DISTRICT	5,081
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TOTAL **12,017**

Counts include: regular/active, retired, students, residents/fellows. Note: Resident and student numbers fluctuate throughout the year. At-Large members are those who work or live in areas without a component medical society.



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WEB: mnmed.org

JOIN US ON FACEBOOK, TWITTER, INSTAGRAM AND LINKEDIN



Membership overview

Year	Total Members	Year	Total Members
2000	9,089	2010	11,250
2001	9,162	2011	10,106
2002	9,109	2012	10,347
2003	9,116	2013	9,998
2004	9,297	2014	10,309
2005	10,858	2015	10,257
2006	10,835	2016	10,171
2007	10,909	2017	10,260
2008	10,969	2018	10,637
2009	11,330	2019	11,011
		2020	12,017

*Numbers as of Jan. 6, 2021

Membership types

Member Type	2020 Count
Regular	4,393
Resident/Fellow	4,147
Retired	1,486
Student	1,991

TOTAL **12,017**