

## **1. Education**

Foster a change in training that enables improvement of OPP, NMM and OMM (OMM knowledge, skills, and utilization for the betterment of patients' health).

1.1 Collaborate with the AOA and other relevant groups and organizations in the development and implementation of a unique OMM faculty development program.

1.2 Expand and improve the NMM residency programs leading to certification.

1.3 Establish mechanisms whereby the AAO may serve as a resource in the profession in the development and implementation of the osteopathic core competency by 2009.

1.4 Collaborate to create and provide educational materials utilizing new technologies and methods.

1.5 Continually re-evaluate the AAO's educational offerings and education plan that includes resources and programming for lifelong learning.

1.5.1 Provide exceptional educational programming through the AAO Convocation, AOA Convention, and other course offerings. Continually review course offerings and events, and alter programming as necessary.

1.5.2 Provide unique educational opportunities to non-osteopathic providers.

1.5.3 Provide unique educational opportunities to international healthcare providers.

1.5.4 Provide distinctive educational opportunities to interns/residents.

1.5.4.1 Team with residency programs and OPTI's to develop curricula regarding techniques for interns/residents to integrate OMM and OMT into their daily care of patients.

1.5.5 Provide distinctive educational opportunities to students.

1.5.5.1 Provide mentoring and hands-on training for osteopathic medical students.

1.5.5.2 Improve and enhance the AOF/AAO Visiting Clinicians Program.

1.5.5.3 Maintain a strong relationship with ECOP for fostering OPP/OMT curricula in osteopathic medical schools.

## **2. Advocacy**

Build advocacy efforts to foster the universal application of OPP, NMM, and OMM throughout all of healthcare.

2.1 To maintain and expand participation in national and international bodies involved in health policy and advocacy.

2.2 Advocate universal recognition of the separations of OMT procedures from Evaluation and Management (E/M) services as an osteopathic medicine standard of care through influencing appropriate reimbursement policies.

2.3 Advocate and support the practice and fair reimbursement of those competencies defined in the NMM residency/board certification.

2.3.1 Partner with the AOA Division of Socioeconomic Affairs to develop hospital credentialing criteria that will facilitate recognition and oversight of inpatient OMT privileges within institutions that require such privileges, and further to develop a position statement on utilization of inpatient OMT by students and residents who are training in allopathic and mixed staff institutions and /or being supervised by allopathic attending physicians.

2.4 Develop a practice management program for osteopathic medical students, interns/residents, and practicing physicians.

2.5 Educate medical students, interns/residents, and physicians regarding appropriate documentation and coding procedures through the development of strategies and resources by March 2009.

2.5.1 Partner with medical schools to incorporate documentation and coding into intern/resident educational opportunities.

2.5.2 Partner with the OPTI's to incorporate documentation and coding into intern/resident educational opportunities.

2.5.3 Ensure every AAO OMT educational session has a documentation and coding procedures segment.

2.6 Generate support materials to facilitate direct payment from patients for those physicians who do not accept reimbursement from third-party payers.

2.7 Enhance current relationships and identify and develop new partnerships with relevant agencies, the AOA, and other organizations to further advance appropriate reimbursement policies.

### **3. Research**

Increase the participation, visibility, and promotion of quality NMM/OMM research and research training.

3.1 Increase member involvement in conducting quality osteopathic research.

3.2. Identify, prioritize, and advocate for areas of greatest research need by March 2008.

3.3 Identify existing and new funding resources for NMM/OMM research.

3.4 Offer NMM/OMM research training opportunities annually.

3.4.1 Promote the creation of opportunities and mentorship within osteopathic medical schools and OPTI's to involve students and residents in osteopathic research.

3.5 Promote the availability of an osteopathic research database, which is easily accessible to AAO members, through the collaboration with other organizations.

### **4. Organization Management**

Reinforce the AAO's position as a healthy and viable osteopathic medical organization – both nationally and internationally – by improving its accessibility, visibility, and relevance.

4.1 Review the AAO's governance structure and needs; and provide the Board of Governors with a report with recommendations by March 2008.

4.2 Strengthen the AAO's leadership structure to ensure continual student, intern/resident, and physician involvement; and provide rewarding volunteer experiences. Complete a review of the structure and provide a leadership development plan to the Board of Governors by March 2009.

4.3 Increase the number of AAO members by 5% annually.

4.3.1 Review membership processes annually to ensure ease and timeliness of joining and renewing memberships.

4.3.2 Develop an annual membership plan by March 2008 to include recruitment, retention, benefits, categories of membership, and related membership communications activities. Implement and review the plan annually.

## STRATEGIC PLAN FOR 2008-2011

4.4 Review current communications strategies and develop a plan by March 2008. Implement and review the plan annually.

4.5 Review the AAO's administrative documents annually to ensure they are meeting the needs of the Academy.

4.6 Fortify the AAO's financial status through appropriate budgeting, monitoring, and reporting; secure sponsorships; and educate leaders on their fiduciary responsibilities and members regarding their role.

4.6.1 Develop an annual report that highlights financial goals, activities, and needed involvement from leadership prior to each fiscal year to align leadership and staff achievements and accountability.

4.7 Identify component societies' needs and create action steps by March 2008 to enhance mutual goals and healthier component societies.

4.8 Enhance the relationship with the AOA and other professional associations by identifying collaborative efforts and supporting mutual goals, and advancing AAO members into leadership positions within the AOA and other professional associations.