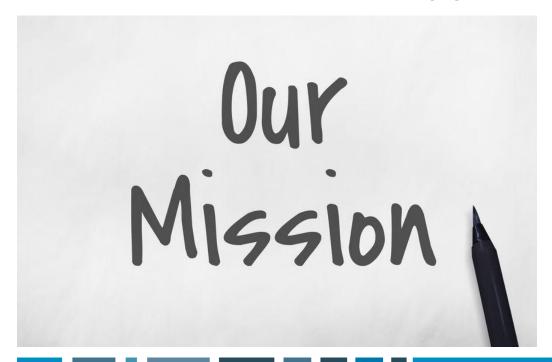
CONTENTS



INFO@LUGPA.ORG LUGPA.ORG

Advocacy

OUR MISSION



LUGPA is the only nonprofit urology trade association in the US. Since its founding in 2008, LUGPA has earned national recognition in the pursuit of our mission: **to preserve and advance the independent practice of urology.** The robust resources we provide help our member groups to meet the challenges of independent practice in today's rapidly changing healthcare marketplace.

A MESSAGE FROM OUR PRESIDENT

RICHARD GERALD HARRIS, MD



I consider it a great honor and privilege to serve as your LUGPA President from 2019 through 2020.

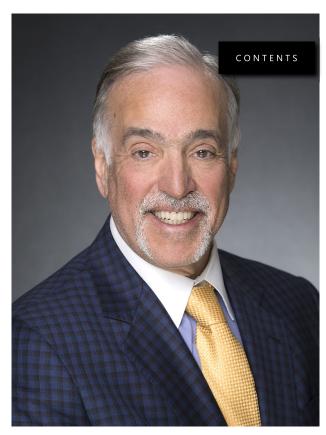
As you look over this Annual Report, you will see that although LUGPA is a relatively small organization, what we do really matters – and the fact is, we do a lot! LUGPA has a long history of supporting integrated urology practices with educational programs, practice management initiatives and other resources they need to thrive.

In 2019, LUGPA has brought about two new notable programs that I am particularly proud of – and I am confident they will continue to serve our membership community well for years to come.

In early 2019, LUGPA launched a new benchmarking tool in partnership with InfoDive[®]. As you may know, LUGPA has been collecting benchmarking data for more than seven years. InfoDive replaces LUGPA's legacy benchmarking product and takes it to the next level. InfoDive's comprehensive business analytics solution allows LUGPA members to measure and track financial, quality and productivity metrics against benchmark data at the practice, provider and patient levels. If you haven't yet looked into it, you MUST visit the Resources section of the LUGPA website to explore what we now offer!

In June of 2019, LUGPA held the first Rising Chief Resident Summit. The sessions offered at this meeting were dedicated to supporting PGY4 and 5 urology residents as they get ready to transition to full-time practice. Not only does the program offer the leaders of tomorrow a chance to rub elbows with key urology physicians from some of the largest independent urology practices in the country, but the program also serves as a "bridge to the future" of the profession.

Each and every year, LUGPA continues to make difference in health policy and political affairs arenas by advocating for independent urology group practices across the US. LUGPA takes a stand to affect change by meeting with members of Congress, CMS and other key agencies, promoting



neutrality of physician reimbursement and by providing comments and testimony about policies that affect urology practices and patients.

Remember, together we stand strong. We cannot continue to attain our goals without your support and the support of your group practice. As you peruse this annual report, keep in mind that you are an important part of LUGPA and you should be proud of your membership.



2019 STRATEGIES



LUGPA'S CORE VALUES

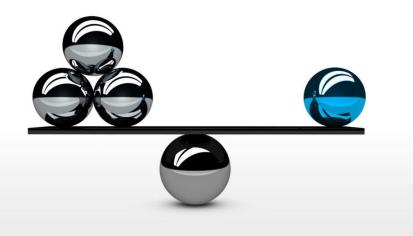
Quality: Ensure the cornerstone of our profession by developing high quality products and services that allow member practices to best serve their patients.

Collaboration: Work together to advance independent urology.

Innovation: Help create the future of independent urology.

Integrity: Advocate for and emulate high ethical conduct in all we do.





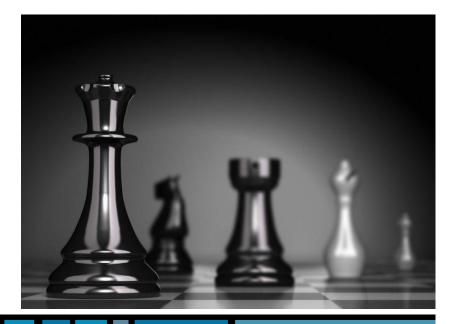
LUGPA'S STRATEGIC PRIORITIES

Advocacy & Health Policy: Continue to lead advocacy efforts for the independent practice of urology.

Value-Based Care: Develop and distribute timely and practical information for independent urology practices to be successful.

Practice Management & Benchmarking: Provide accurate and relevant practice management information urology groups, including opportunities to participate in operational and financial benchmarking.

Leadership Development: Lead training and development opportunities for physicians and administrators.



2019 LEADERSHIP



OFFICERS

President Richard Gerald Harris, MD

Melrose Park, IL

President-Elect Jonathan Henderson, MD

Shreveport, LA

Past President Neal D. Shore, MD, FACS

Myrtle Beach, SC

Chief Executive Officer Celeste Kirschner, CAE, MHSA

Chicago, IL

Treasurer Robert D. Asinof, MSHA

Denver, CO

Secretary Evan R. Goldfischer, MD, MBA, CPI

Poughkeepsie, NY

BOARD OF DIRECTORS

David M. Albala, MD

Syracuse, NY

Dave Carpenter

Stillwater, MN

Michael D. Fabrizio, MD, FACS

Virginia Beach, VA

Scott B. Sellinger, MD

Tallahassee, FL

Jeffrey Spier, MD

El Paso, TX

Mara R. Holton, MD

Annapolis, MD

David J. Ellis, MD, FACS

Philadelphia, PA

Alan D. Winkler MHSA, FACMPE

San Antonio, TX

LUGPA COMMITTEES

Bylaws

Health Policy

Programs

Education

Practice Benchmarking

Active Surveillance

MedReviews

Audit

Investment

Membership

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Political Affairs

Practice Administrators

LUGPA Forward

Guidebook Development

Communications

Nominating

Finance



ADVOCATING FOR INDEPENDENT UROLOGY



LUGPA is the leading voice of independent urology group practices in the United States. Our trade association continues to educate policymakers on the need for and benefits of integrated urologic care.



Dr. Mara Holton discusses LUGPA's 2019 policy victories and upcoming challenges.

Our leaders and members drive grassroots efforts by developing thoughtful analyses and engaging public officials on major legislative and regulatory proposals

CONTENTS

2019 FEDERAL LEGISLATIVE AND REGULATORY PRIORITIES

Throughout 2019 LUGPA members had the opportunity to join the Political Affairs Committee on five "fly-ins" to Washington, DC to promote LUGPA's 2019 legislative agenda. LUGPA's political events are small, intimate meetings between LUGPA members and members of Congress where the association can present LUGPA's legislative agenda indepth to lawmakers and engage in a dialogue with them. LUGPA political affairs events are bipartisan and engage members of both the Senate and the House.

Promote neutrality of physician reimbursement regardless of site of service.

Hospital systems are paid substantially more than physicians by Medicare for the identical procedures. LUGPA is focused on Capitol Hill and in the Administration through rulemaking on levelling the playing field and ensuring that independent physician practices can compete with mega-hospitals and offer more efficient, high quality care in patients' communities.

Promote Stark reform to allow independent practices to thrive under MACRA while maintaining the IOASE.

Policymakers would like to see more physician practices engaged in value-based care where they can take on risk and improve clinical outcomes through "Alternative Payment Models." Yet antiquated Stark and associated fraud and abuse laws prohibit practices from remunerating their physicians based on value or volume even within APMs. Meanwhile, mostly hospital-based Accountable Care

Organizations have been provided blanket waivers from these laws

Maintain patient access to physician administered cancer therapy through Medicare Part B.

The Trump Administration is considering a radical overhaul to how physician administered drugs are reimbursed and provided in Medicare. In an Advanced Notice of Proposed Rule Making, suggests a demonstration project whereby "buy-and-bill" would be eliminated entirely in half of the country and potentially put physician practices in the other half of the country underwater when they prescribe Part B drugs. New vendors with ability to limit physician choice of products for their patients would administer the proposed program. LUGPA is committed to ensuring appropriate patient access to drugs and believes policies of this sweeping nature should be considered by Congress, not imposed by CMS under the auspices of a demonstration project.

Closely monitor CMS development of legislatively mandated radiation therapy bundles to ensure patient access to cancer treatment.

ILIGDA halned secure a navment freeze to proposed cuts to radiation

under the ACA. LUGPA supports enactment of legislation that would permit our practices to test and participate in APMs, without the current volume or value prohibitions. In addition, LUGPA will continue to defend the "In-Office Ancillary Service Exemption" which allows the integrated delivery of care by physician practices under the fee-for service system, including for radiation therapy, labs and advanced imaging by physician practices.

Continue to monitor and provide comments to CMS regarding policies that affect Medicare fee schedules.

CMS is exploring substantial changes to the Medicare physician fee schedule that have disparate impacts on different physician specialties. LUGPA will advocate for policies that benefit our practices and urology patients.

Advocate for physicians' ability to continue to provide in-office dispensing of pharmaceuticals (where allowed by state statute).

Many physician groups offer pharmaceutical dispensing services to their patients. By integrating pharmaceutical dispensing into the physician practice, care coordination is enhanced, and patient compliance is better monitored. Physicians are highly attuned to their patients' clinical needs and LUGPA is committed to protecting patients' ability to receive pharmaceuticals from their physicians when they so choose.

therapy in the physician office setting several years ago. That legislation also required radiation services, CMS i contents ing a proposal. LUGPA will work with CMS and other stakeholders to ensure that the bundle protects adequate patient access to care.

Monitor regulatory implementation of MACRA.

CMS has taken a go-slow approach on MACRA implementation that has resulted in very little upside reward for high performing practices (including many LUGPA members) for those who had made investments and performed well. LUGPA will encourage CMS to reward high performers in MIPS and approve more APMs that our practices can participate.

Promote reform of the USPSTF, to allow for greater transparency and stakeholder engagement.

In 2012, USPTF downgraded PSA testing without adequate stakeholder engagement or a full understanding of the peer-reviewed clinical literature. That opaque and ill-informed process led to tens of thousands of fewer men being identified with prostate cancer and a substantial increase in the number of men later identified with higher risk, more advanced prostate cancer where treatment was less effective. While USPTF has recently changed its rating for certain demographics of men, the process remains non-transparent and the task force deliberations and decisions are not subject to notice and comment rulemaking or consultation with stakeholders. LUGPA supports legislation to provide greater transparency and accountability of the USPTF.

LUGPA'S POLITICAL ADVOCACY

On July 16th, LUGPA representatives had an exclusive meeting with Health and Human Services (HHS) Deputy Secretary Eric Hargan and senior HHS staff to discuss Stark reform. We outlined the impediments the law presents to our member practices, including the inability to work with other providers or physician groups on integrated payment models, the inability to incentivize appropriate

physician behavior for adherence to recognized treatment pathways, and the inability to engage in real world testing of alternative payment models absent Stark reform.

Deputy Secretary Hargan reiterated HHS's commitment to using their full authority to reform Stark in order to promote value-based care; we are expecting to see a Stark reform proposal released by CMS by this fall. Equally encouraging was Secretary Hargan's statements in strong support of site neutral payment and the need to encourage competition between independent physician groups and health systems. LUGPA is gratified that under its current leadership, HHS is quite sensitive to the concerns of independent medicine.



LUGPA GROUPS CHAMPION POLITICAL FUNDRAISING

LUGPA groups organized individual contributions of more than \$613,985 in 2019. Thank you to these LUGPA groups, whose physicians contributed to LUGPA's political advocacy!



Advanced Urology Institute of Georgia Snellville, GA

Arizona Institute of Urology Tucson, AZ

Associated Medical Professionals of NY

Syracuse, NY

Carolina Urology Partners Huntersville, NC

Comprehensive Urologic Care
Lake Barrington, IL

Florida Urology Partners Tampa, FL

Golden Gate Urology San Francisco. CA Amarillo Urology Associates, LLP

Amarillo, TX

Arizona Urology Specialists, PLLC
Phoenix, AZ

Associated Urological Specialists
Palos Heights, IL

Center for Urologic Care of Berks County
Wyomissing, PA

Dayton Physicians, LLC Centerville, OH

Garden State Urology, LLC Morristown, NJ

Greater Boston Urology Framingham, MA **Houston Metro Urology**

Houston, TX

Lancaster Urology

Lancaster, PA

Minnesota Urology

Woodbury, MN

Northwoods Urology of Texas, PLLC

Shenandoah, TX

Pioneer Valley Urology

Springfield, MA

Rio Grande Urology

El Paso, TX

The Urology Center of Colorado

Denver, CO

Urologic Specialists of Oklahoma

Tulsa, OK

Urological Associates, PC

Davenport, IA

Urology Associates of Central Missouri

Columbia, MO

Urology of Indiana

Greenwood, IN

Urology of St. Louis, Inc.

St. Louis, MO

Urology of Virginia

Virginia Beach, VA

Urologic Specialists of

Northwest Indiana /

UroSurgery Associates

Merrillville, IN

Idaho Urologic Institute

Meridian, ID

Michigan Institute of Urology

Saint Clair Shores, MI

New Jersey Urology

Bloomfield, NJ

Oregon Urology Institute

Springfield, OR

Premier Medical Group of

the Hudson Valley

Poughkeepsie, NY

Tennessee Urology Associates

Knoxville, TN

The Urology Group

Cincinnati, OH

Urologic Associates of Southern Arizona

Tucson, AZ

Urological Surgeons of

Northern California, Inc.

San Jose, CA

Urology Associates of the Central Coast

San Luis Obispo, CA

Urology Centers of Alabama, P.C.

Homewood, AL

Urology of San Antonio

San Antonio, TX

Urology Specialists of The Carolinas

Charlotte, NC

UroPartners

Westchester, IL

Kansas City Urology Care, P.A.

Lenex<u>a KS</u>

C O N T E N T S

Bryn Mawr, PA

Northwest Urology, LLC

Portland, OR

Physicians Clinic of Iowa

Cedar Rapids, IA

Regional Urology

Shreveport, LA

The Conrad Pearson Clinic

Germantown, TN

Urological Associates of

Western Colorado

Grand Junction, CO

Urology Associates of

Central California Medical Group

Fresno, CA

Urology Austin, PLLC

Austin, TX

Urology of Central Pennsylvania

Camp Hill, PA

Virginia Urology Centers

Richmond, VA

Wichita Urology Group

Wichita, KS

Wisconsin Institute of Urology

Neenah, WI

Urology Care Alliance

Lawrenceville, NJ





LUGPA'S HEALTH POLICY EFFORTS

The LUGPA Health Policy Committee advises the Board of Directors on health policy initiatives impacting independent group practice. The committee's leadership analyzes major legislative and regulatory actions to assure the best interests of patients and the independent urology groups that serve them are met.

JANUARY

LUGPA filed commentary on the Hospital Outpatient Prospective Payment System ("OPPS") and Ambulatory Surgery Center ("ASC") Payment System Final Rule for 2019

LUGPA's Health Policy Committee has submitted commentary in response to the CMS advance notice of proposed rulemaking with comment concerning the International Pricing Index Model for Part B Drugs. LUGPA's commentary raises concerns with CMS regarding the impact of the proposed model on independent urology practices in providing patients with cancer therapies. Furthermore, LUGPA does not believe indexing drug costs to international prices embodies a practical approach to managing rising Part B expenditures. Such a model would force patients and providers to rely on for-profit intermediaries that will reduce access and increase costs. LUGPA urges CMS to postpone rulemaking until they address stakeholder input.

LUGPA filed commentary on the Hospital Outpatient Prospective Payment System ("OPPS") and Ambulatory Surgery Center ("ASC") Payment System Final Rule for 2019. LUGPA addresses the sweeping changes to Urology APCs in this rule, which includes moving CPT code 50590 for ESWL performed in an ASC setting to a new Ambulatory Payment Classification (APC).

SEPTEMBER

The development of a radiation oncology APM was specified in the radiation therapy payment freeze passed by Congress (2015). LUGPA has been engaged with CMS and other stakeholders to ensure that integrated urology practices

were not excluded from participating in the APM. The LUGPA Health Policy Committee submitted comments on this proposed rule on September 16. The following is a short summary of LUGPA's position on the proposed payment for radiation oncology services.

- We support CMS's application of site neutral payment in the RO Model.
- We support CMS's inclusion of proton beam therapy as one of the modalities in the RO Model.
- · We oppose CMS's proposal to make participation in the RO Model mandatory, especially in free-standing centers.
- We oppose CMS's proposed start dates of January 1 and April 1, 2020.
- We are alarmed by the impact the RO model will have on underserved communities that do not have access to advanced treatment technologies.

DECEMBER

LUGPA Health Policy Chair Deepak Kapoor and Vice Chair Mara Holton represented LUGPA at a meeting with CMS with respect device costs for extracorporeal shock wave lithotripsy (EWSL) represented by CPT code 50590 in the ambulatory surgical center setting.

On December 31, LUGPA sent comment letters to the Department of Health and Human Services and the Centers for Medicare & Medicaid Services regarding the Anti-Kickback Statute Proposed Rule and the Stark Proposed Rule (respectively).

IMPACT

LUGPA's political advocacy work in 2019 advanced access to independent urology by:

- 1. Paving the way for new payment methodologies
- 2. Deepening relationships with elected lawmakers
- 3. Leveling the playing field between hospitals and independent physicians
- 4. Helping LUGPA groups navigate complex payment rules

MEMBER PROGRAMS

LUGPA has continued to expand its programming on both clinical and business topics.

CANCER UPDATE (IPCU)



Serving as LUGPA's first meeting of the calendar year, IPCU 29 was held January 24-27, 2019 in partnership with Grand Rounds in Urology™ at the Westin Riverfront at Beaver Creek in Avon, CO. Approximately 200 people attended.

With more than 30 renowned faculty from around the globe, the conference focused on prostate cancer treatment updates, and featured expert lectures, interactive discussions, a panel roundtable, debates, and case reports. Designed to give physicians exposure to a comprehensive review of treating prostate cancer patients, IPCU 29 gave attendees the opportunity to discuss important issues with peers as well as presenters.

NEW IN 2019: RISING CHIEF RESIDENT SUMMIT





LUGPA introduced the Rising Chief Resident Summit in June 2019 in San Diego. The full-day program was dedicated to supporting PGY4 and 5 urology residents during their transition to full-time practice. The Rising Chief Resident Summit covered crucial topics from vetting employment contracts to early-career financial management and offered residents an opportunity to personally engage with key urology leaders from some of the largest independent urology practices in the country.

BLADDER CANCER ACADEMY



To provide LUGPA members with education on advances in bladder cancer treatment and patient management, the third annual Bladder Cancer Academy (BCA) took place February 28 – March 2, 2019 in St. Louis, MO. This program was cosponsored by LUGPA and MedReviews, LLC, publishers of Reviews in Urology®.

The outstanding faculty presented robust talks on the most relevant topics, including all available preventive, diagnostic, therapeutic and management options for bladder cancer in a highly interactive format. BCA's program included didactic lectures and case-based discussions.

LUGPA'S 2019 REGIONAL MEETINGS







The 2019 LUGPA Regional Meetings helped our members pursue high-quality value-based care by providing educational sessions about advanced oncology and urology practice management. Like the 2018 series of Regional Meetings, LUGPA offered three educational, interactive forums in order to allow maximum flexibility for practices to attend.

The first Regional Meeting was held March 22-23 in New Orleans and featured a special afternoon breakout session for physicians with fewer than 15 years of practice.

The second Regional Meeting was held April 26-27 in St. Petersburg, Fla, and featured a special breakout session for LUGPA group Operations Managers and Supervisors.

The third meeting was held June 7-8 in San Diego, and featured content for urologists and practice administrators.

PROSTATE CANCER ACADEMY





Co-sponsored by LUGPA and MedReviews LLC, the 2019 Prostate Cancer Academy was held in Los Angeles, September 19-21. Attendees had the opportunity to gain the latest, most relevant information on prostate cancer treatment and management, delivered by experts in the field. Presented in an interactive meeting format, PCA included didactic lectures, case-based discussions and faculty panels. It also offered outstanding networking with urology residents, who were eager to meet independent practice physicians.

2019 LUGPA ANNUAL MEETING



LUGPA held its 2019 Annual Meeting in Chicago, IL November 7-9, 2019. The Annual Meeting was the most well-attended event on the LUGPA calendar, with over 500 individuals in attendance, representing more than 150 member groups throughout the United States.

The first day of events featured multiple insightful and interactive workshops for Practice Administrators, Research Coordinators, Advanced Practice Providers, Lab



Directors and Medical Directors. Our popular CME program, Leveraging Disruptive Technology: Pragmatic and Productive Advances for Your Practice productive Advances for attendees.





On day two, Dr. Harris moderated an informative forum with a panel of our policy experts, including Dr. Deepak Kapoor, Dr. Mara Holton, Dr. Gary Kirsh and LUGPA's legislative consultants, John McManus and Tracy Spicer. The first keynote lecture was presented by former Governor of Florida, Jeb Bush, on ways for government and healthcare to work together to improve patients' health and our practices. There was also a lively point/counterpoint debate on the controversial topic of private equity with Victor Houtz and E. Scot Davis, moderated by Dr. Goldfischer.

Our second keynote of the meeting was delivered by Quint Studer, on ways to commit to excellence in our practices. Throughout the three-day event there were many other sessions including APP workshops, clinical CME lectures, plenary sessions and panel discussions.

The final speaker and keynote of the meeting was Joe Theismann, champion quarterback, broadcaster and entrepreneur. Mr. Theismann delivered actionable ways to



embrace change in our practices and continue forward momentum.

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LUGPA BENCHMARKING PROGRAM

IN 2019, LUGPA LAUNCHED A NEW INITIATIVE WITH INFODIVE REPLACING LUGPA'S LEGACY BENCHMARKING TOOL

InfoDive

Optimize Revenue

Monitor Compliance

Improve Productivity

The new offering gives participating groups access to benchmarking data from urology practice groups across the country. This applicable data can be used to both improve clinical performance as well as to identify new opportunities

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to provide care to patients. Groups are using the data to drive business decisions, create more enicient operations, reduce costs, and improve patient satisfaction.

CONTENTS

InfoDive[®] gathers information from participating groups' practice management systems (PMS) to pro benchmarking data reports available about independent urology groups. The web-based business intelligence solution can create practice-specific benchmarking and summary reports. Some of the main categories of information included in this package cover productivity statistics, performance quality, and financial metrics. Practices can quickly and easily analyze productivity and financial metrics when comparing their practice to peers in their specialty community.

UroCareLive









LUGPA continued to collaborate with PlatformQ Health offering members the opportunity to register and participate in unique video-based educational platform. With LUGPA's Virtual Crossfire Event Series, attendees can take advantage of live streaming panel discussions and debates, including real-time question and answer sessions with top faculty.







LUGPA's Education All Year Long

1:22

2019 ON-DEMAND PRESENTATIONS

LUGPA FORWARD: Understanding and Overcoming Challenges faced by Early Career Urologists – Originally aired on January 29, 2019

Hormonal Therapy for Prostate Cancer: Constructing Well-Defined Clinical Decisions – Originally aired on February 5, 2019

Current and Future Treatment Options for the Nonmetastatic CRPC Patient - Originally aired on March 28, 2019

LUGPA Virtual Crossfire Discussion and Debate Series: Overview of Nonmetastatic CRPC and a New Treatment Option – Originally aired on August 27, 2019

Enhancing the Care of Patients with Bladder Cancer: Making Effective Decisions Regarding Immunotherapy in the Urology Clinic – Originally aired on September 18, 2019

Novel Imaging Tools for Prostate Cancer: Facilitating the Management of Patients with Rising PSA and Risk of Recurrence – Originally aired on November 7, 2019

LUGPAOnsite

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LUGPAOnsite brings our experts to you! Not everyone is able to attend LUGPA Region the LUGPA Annual Meeting. Through LUGPAOnsite, LUGPA Leadership and content exconduct a meeting at your practice. LUGPAOnsite was created to increase engagement education by letting LUGPA bring the education directly to the member practice. LUGP leaders work directly with member groups to address practice-specific questions, allot timely, flexible and practice-specific agendas lead each program. LUGPA leaders and five practices in 2019.

REVIEWS IN UROLOGY

Reviews in Urology®, LUGPA's official journal, is published on a quarterly basis and features essential clinic and business articles for LUGPA members. Members receive complimentary print and digital editions of the journal.

RIU is indexed and abstracted in PubMed and has



Vol. 21, Nos. 2/3 · 2019 · Medical Editor: Herbert Lepor, MD



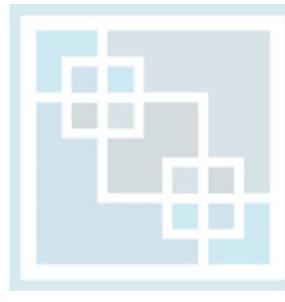
a circulation of approximately 10,000 US-based urologists and Lu The Reviews in CONTENTS Urology app is av lines app store for your Apple devices.

IMPACT

LUGPA's expanded member programming gives independent urology groups the tools they need to succeed, including:

- Cutting edge clinical and practice management information helps groups remain competitive and maintain the legacy of independent practice
- Networking sessions at LUGPA's in-person meetings to develop relationships essential to the survival of independent groups





INDUSTRY SUPPORT

Dozens of companies provided financial support for LUGPA's mission.

Through exhibits, sponsorship and education, these companies provided significant support for our association.

Corporate contributions strengthened many initiatives, including:

- -- LUPGA Regional Meeting in Miami, FL
- -- LUGPA Regional Meeting in Las Vegas, NV
- -- LUGPA Regional Meeting in New York, NY
- 2019 Annual Meeting in Chicago, IL
- -- CME Program
- -- Practice Administrators Program
- -- Practice Management for Urology Groups: LUGPA's Guidebook

Thank you to our top industry supporters.











































MEMBERSHIP

No longer exclusive to large practices, groups of any size engaged in the independent practice of urology are eligible to join LUGPA.

As the only nonprofit urology trade association in the US, LUGPA's mission is to preserve and advance the independent practice of urology. By working together, we can expand our influence for the benefit of our patients and protect our practices' ability to remain independent. As leaders in independent urology, our ability to collaborate is essential to assure the success of all LUGPA member groups. By sharing experiences and providing advocacy resources to advance our legislative priorities, we strengthen independent urology practices across the country.



COMMUNICATIONS

LUGPA's external communications goal is to develop the association's reputation as the leading voice for independent urology in the United States. LUGPA works through the trade press and national media to ensure the Association's advocacy successes and membership value gained audiences with members, prospective members, industry allies, government officials and consumers.

Meanwhile, LUGPA's internal communications tools continue to evolve:

- The weekly integral Monitor aggregates relevant news articles that are of interest to LUGPA member practices. Each week, two members of the Communications Committee review the collected pieces and provide editorial comments in order to provide context, clarification or perhaps even points of contention to what is being population.
- LUGPA's News Stream e-mail goes out monthly to LUGPA members. It contains LUGPA-specific news, including meeting recaps, advocacy/health policy updates and upcoming educational event information.
- LUGPA successfully launched its new website in November 2019, immediately prior to the Annual Meeting in Chicago. The new website unifies the former "public" and "members-only" websites to provide a streamlined, easy-to-navigate, mobile-friendly user experience. Members can self-manage their login profile and participate in discussion forums with other members in the password-protected section of the site.

FINANCIAL HEALTH

Statement of Financial Position

For the year ending December 31, 2019 Assets	
Receivables	\$27,668
Prepaid expenses, deferred charges and deposits	\$68,688
Investments, at market value	\$2,736,043
Total Unrestricted	\$4,781,796
Grants, Restricted	\$74,390
Total Assets	\$5,899,342
Liabilities	
Accounts Payable	\$96,353
Other Liabilities, accrued expenses and deferred income	\$161,877
Total Current Liabilities	\$258,230
Net Assets	
Unrestricted Funds	\$4,510,495

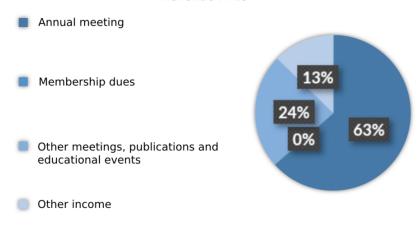
Net Income \$1,120,616

Total Liabilities and Equity

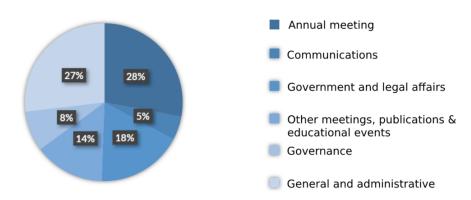
\$5,889,3

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Expenses FY19



STATEMENT OF ACTIVITIES FOR THE YEAR ENDING DECEMBER 31, 2019

Revenues

Annual meeting \$2,983,028

Membership dues	\$1,111,324
Other meetings, publications and educational events	\$1,115,4 CONTENTS
Other income	\$597,977
Total Revenues	\$5,807,743
Expenses	
Program Services	
Annual meeting	\$1,308,907
Communications	\$228,624
Government and legal affairs	\$832,826
Other meetings, publications and educational events	\$674,839
Governance	\$382,492
Total Program Services	\$3,427,688
Supporting services	
General and administrative	\$1,259,439
Total Expenses	\$4,687,126
Change in unrestricted net assets from Operations	\$531,452
Nonoperating activities	
Net investment (loss)/gain	\$261,713
Change in net assets	\$1,120,616

2019 STAFF



Celeste Kirschner, CAE

Chief Executive Offer



CONTENTS

Morgan Cox

Manager, Governance, Membership & Advocacy



Rachel Rusch

Manager, Member Programs



Dan Kotheimer

Manager, Communications

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