

NCMS Board of Directors Meeting Wednesday, February 18, 2026 Teams Call



**NORTH CAROLINA
MEDICAL SOCIETY
175th ANNIVERSARY
1849 - 2024**

The North Carolina Medical Society, established on April 15, 1849, aims to advance medical science, uphold the highest ethical standards, and promote and protect all facets of the medical profession. Its members are dedicated to alleviating suffering and enhancing the health and lives of all North Carolinians.

Agenda

Link to meeting video:

[Recap: NCMS Board Meeting \(CORRECT MEETING REQUEST\)](#)
[Wednesday, February 18 | Meeting | Microsoft Teams](#)

Time	Description	Additional Attachments	Presenter	Action
6:00 PM	Welcome and Call to Order		Dr. Westcott	
6:01 PM	Approval of Minutes: December 2025	DRAFT Minutes		Approve Minutes
6:05 PM	Secretary Treasurer's Report	Report	Dr. Eskra	
6:20 PM	CEO Report		Steve Keene	
6:35 PM	Membership Update		Pam Highsmith	
6:45 PM	Communications Update		Toni Hill	
6:55 PM	May Meeting	Draft Agenda	Steve Keene	
7:05 PM	2026 Session: NC General Assembly		John Thompson	
7:20 PM	Hospice & Palliative Care Society	Proposal, Draft Bylaws, NCMS Bylaws & Draft Motion	Dr. Westcott	Motion
7:30 PM	Merging of Component Societies	Proposal, Draft Bylaws, NCMS Bylaws & Draft Motion		Motion
7:40 PM	COI & Confidentiality Forms	COI & Confidentiality Documents		
7:50 PM	Executive Session		Ashley Rodriguez	
8:00 PM	Adjourn		Dr. Westcott	

Approval of Meeting Minutes

(December 2025)

NCMS Treasurer's Report

BALANCE SHEET

	YTD 11/30/2025	YTD 12/31/2024
Assets		
Petty Cash	\$ 399	\$ 399
Checking Account-Bank	1,575,685	2,193,704
Payroll Checking Account	35,979	542,813
Cash- UBS MM	1,060,506	1,770,959
Marketable Securities	7,929,304	6,943,324
Accounts Receivable	260,692	484,817
Notes Receivable	6,879,005	6,974,662
Right-of-Use Assets-Lease	3,957,187	3,957,187
MSSI Investment	1,000	1,000
Total Assets	\$ 21,699,757	\$ 22,868,865
Liabilities and Net Assets		
Liabilities		
Accounts Payable	\$ 180,854	\$ 272,348
Accrued Salaries/Benefits	497,308	197,308
Agency Obligations		76,341
Advance Pay Dues	397,440	886,599
Operating lease liability	3,977,761	3,977,761
Total Liabilities	\$ 5,053,363	\$ 5,410,357
Net Assets		
Reserve for Operations	\$ 1,000,000	\$ 1,000,000
Reserve for Capital Replacement	3,397,508	3,397,508
Net Worth Operating Fund	12,248,886	13,061,000
Total Net Assets	16,646,394	17,458,508
Total Liabilities and Net Assets	\$ 21,699,757	\$ 22,868,865

Revenue Year 2025

	Year Forecast	YTD	2025	Actual %	Year 2024
	12/31/2025	11/30/2025	Budget	Budget	12/31/2024
Revenues					
State Society Dues	\$1,815,000	\$1,812,531	\$2,100,000	86%	\$2,114,820
Meetings & Confer.	\$0	\$0	\$150,000	0%	\$167,785
Education Services	\$50,000	\$49,450	\$35,000	141%	\$66,500
NCMSF Revenue	\$400,000	\$178,012	\$65,000	274%	\$105,195
Other Grants/ Income	\$10,000	\$8,925	\$160,000	6%	\$10,000
Curi Revenue	\$75,000	\$56,250	\$164,000	34%	\$75,000
MEWA Revenue	\$400,000	\$310,230	\$550,000	56%	\$428,995
Specialty Speciaties	\$665,000	\$650,500	\$715,000	91%	\$618,750
Value Program	\$230,000	\$222,070			
Service Fees	\$1,350,000	\$1,225,081	\$1,170,000	105%	\$1,529,447
Revenue from Bldg	\$430,000	\$396,981	\$541,000	73%	\$353,195
Investment Earnings	\$875,000	\$810,507	\$500,000	162%	\$735,405
Revenue- Bldg.Sale					\$5,590,735
Total Revenues	\$6,300,000	\$5,720,537	\$6,150,000	93%	\$11,795,827

Expenses Year 2025

	Year Forecast	YTD	2025	Actual %	Year 2024
	12/31/2025	11/30/2025	Budget	Budget	12/31/2024
Expenses					
Salaries and Benefits	\$3,875,000	\$3,616,552	\$3,235,000	112%	\$3,615,022
Value Program	\$145,000	\$128,809	\$0		\$0
Specialty Societies	\$637,500	\$594,701	\$565,000		\$42,842
Operations	\$420,000	\$377,863	\$460,500	82%	\$497,637
Membership	\$50,000	\$45,480	\$114,900	40%	\$93,831
Leadership Support	\$170,000	\$156,521	\$108,000	145%	\$102,724
Executive Dept	\$450,000	\$419,582	\$185,500	226%	\$206,999
Annual Meeting	\$45,000	\$44,889	\$100,000	45%	\$241,359
Communications	\$260,000	\$297,796	\$41,600	716%	\$44,491
CME Accreditation	\$37,500	\$32,740	\$35,000	94%	\$33,905
External	\$475,000	\$456,999	\$345,500	132%	\$307,501
Rent Expense Building	\$435,000	\$360,718	\$459,000	79%	\$330,640
Total Expenses	\$7,000,000	\$6,532,650	\$5,650,000	116%	\$5,516,951
SURPLUS/ DEFICIT)	-\$700,000	-\$812,113	\$500,000		\$6,278,876

Income Statement: Specialties & Value Team

Revenue-Expense Year 2025

	Society Management		Value Team	
	YTD Actual	Budget	YTD Actual	Budget
	11/30/2025	12/31/2025	11/30/2025	12/31/2025
Revenues				
Hdqtrs Office Services	\$650,500	\$715,000		
Other Revenue	\$0		\$222,070	\$0
Total Revenues	\$650,500	\$715,000	\$222,070	\$0
Expenses				
Salaries and Benefits	\$486,050	\$565,000	\$45,476	\$0
Other Expenses				
Event Planner-Consultant	\$ 4,000			
Consultant	\$ 48,000		\$ 83,333	
Finance/ Billing est.	\$ 9,000			
Rent	\$ 12,000			
Audit	\$ 2,500			
RE	\$ 30,000			
Insurance	\$ 3,151			
Total Other Expenses	\$ 108,651	\$ -	\$ 83,333	\$ -
Total Expenses	\$ 594,701	\$ 565,000	\$ 128,809	\$ -
Net Income (Loss)	\$ 55,799	\$ 150,000	\$ 93,261	\$ -

Expense Category Changes against 2025 Budget YTD

November 2025



	Salaries	Specialties	Value Team	Operations	Communications	Membership	Leadership	Executive	External	Rent Bldg	Others	Total
Budget 2025	\$ 3,235,000	\$ 565,000	\$ -	\$ 460,500	\$ 41,600	\$ 114,900	\$ 108,000	\$ 185,500	\$ 345,500	\$ 459,000	\$ 135,000	\$ 5,650,000
RIF Savings	\$ (425,000)											\$ (425,000)
Severance	\$ 606,000											\$ 606,000
New CEO	\$ 200,000											\$ 200,000
Salaries			\$ 53,653									\$ 53,653
Consultants			\$ 75,156		\$ 184,000				\$ 116,000			\$ 375,156
DOL Attorney								\$ 26,000				\$ 26,000
Recruiter CEO								\$ 154,000				\$ 154,000
MEWA Attorney								\$ 65,000				\$ 65,000
Other	\$ 552	\$ 29,701			\$ 72,196		\$ (1,479)	\$ (10,918)	\$ (4,501)	\$ (98,282)	\$ (57,371)	\$ (70,102)
IT Cost Reduction				\$ (82,637)		\$ (69,420)						\$ (152,057)
Pres-Stipend-2024							\$ 50,000					\$ 50,000
Diff from Budget	\$ 381,552	\$ 29,701	\$ 128,809	\$ (82,637)	\$ 256,196	\$ (69,420)	\$ 48,521	\$ 234,082	\$ 111,499	\$ (98,282)	\$ (57,371)	\$ 882,650
Actual YTD Nov 2025	\$ 3,616,552	\$ 594,701	\$ 128,809	\$ 377,863	\$ 297,796	\$ 45,480	\$ 156,521	\$ 419,582	\$ 456,999	\$ 360,718	\$ 77,629	\$ 6,532,650
Budget 2026	\$ 2,500,000	\$ 738,000	\$ 500,000	\$ 430,135	\$ -	\$ 286,915	\$ 128,000	\$ 350,000	\$ 494,500	\$ 472,000	\$ 100,450	\$ 6,000,000

2025-2026 Budget Changes

	Salaries	Specialties	Value Team	Operations	Communications	Membership	Leadership	Executive	External	Rent Bldg	Others	Total
Budget 2025	\$ 3,235,000	\$ 565,000	\$ -	\$ 460,500	\$ 41,600	\$ 114,900	\$ 108,000	\$ 185,500	\$ 345,500	\$ 459,000	\$ 135,000	\$ 5,650,000
New Personnel		\$ 107,000	\$ 425,000									\$ 532,000
Salaries-RIF-2025	\$ (735,000)											\$ (735,000)
Consultant						\$ 187,315		\$ 100,000	\$ 132,000			\$ 419,315
MEWA Attorney								\$ 100,000				\$ 100,000
Other		\$ 66,000	\$ 75,000	\$ (30,365)	\$ (41,600)	\$ (15,300)	\$ 20,000	\$ (35,500)	\$ 17,000	\$ 13,000	\$ (34,550)	\$ 33,685
Change	\$ (735,000)	\$ 173,000	\$ 500,000	\$ (30,365)	\$ (41,600)	\$ 172,015	\$ 20,000	\$ 164,500	\$ 149,000	\$ 13,000	\$ (34,550)	\$ 350,000
Budget 2026	\$ 2,500,000	\$ 738,000	\$ 500,000	\$ 430,135	\$ -	\$ 286,915	\$ 128,000	\$ 350,000	\$ 494,500	\$ 472,000	\$ 100,450	\$ 6,000,000

CEO Report

Membership & Communications Update

Communications Evolution | July 2025–2026

From Clarity to Visibility

- July 2025: Communications restructured to one internal lead
- Clear directive: prioritize communications
- 2025: Began redefining who we are & what we offer
- Built infrastructure to support high-value content
- 2026: Scaling visibility statewide
- 50% reduction in external marketing contractor costs

2025: Defining the Story Before Amplifying It

- Rebranded Morning Rounds → Weekly Dose
- Honored member feedback on email fatigue
- Reduced siloed communication across departments
- Clarified advocacy impact & member value
- Implemented consistent, on-brand visuals & messaging
- Shifted from volume → value
- Social media growth followed clarity

2025: Building the Infrastructure to Support the Story

- Implemented new email platform (99%+ deliverability)
- Formalized new renewal & retention campaigns
- Advanced segmentation & behavioral insight now guide strategy
- 74,000+ proprietary digital audience built
- Established a consistent, recognizable NCMS brand

Digital Growth Snapshot

- Social media growth exceeded 3% growth goal (July-December)
 - Instagram: +16.7%
 - LinkedIn: +10.9%
 - Facebook engagement: +11.4%
- Implemented Digital advertising software
 - \$7,541 spend
 - 18 memberships from brand new members
 - 74,759 audience built

Weekly Dose: Infrastructure + Performance

- Deliverability: 99–99.9%
- Open Rates: 40–43%
- Bounce Rate: 9.2% → ~0.1%
- Extremely low unsubscribes
- Open to entire healthcare community

2026: Expanding Visibility Across Channels

- Reducing reliance on email to prevent fatigue
- Expanding video & podcast production
- Implementing Google search advertising
- Continuing digital advertising & retargeting
- Summer database launch: enhanced member experience + advanced segmentation
- Refining website content and user journey internally

Structural Shift: Efficiency, Sustainability & Fiscal Responsibility

- Communications Assistant officially hired – began February 16
- Daily/Weekly execution moved in-house
- External contracts reduced by 50%
- Agencies now more focused on strategic growth initiatives
- Built for sustainable, fiscally responsible scale

Precision Over Volume

Leaner resources require smarter execution
Right message. Right audience. Right time.

2026 Goal

Communications impact should be visible.

Members see it.

Non-members encounter it.

Advocacy feels tangible.

The brand feels cohesive.

We have moved from rebuilding the foundation to scaling with intention.

QUESTIONS?

May Meeting Draft Agenda

Day	Times	Function	Notes
Thursday 5/14	6:00 - 8:00	Social/Networking Event	At Beaufort hotel outside on their Veranda; drinks & apps provided
Friday 5/15	8:00 - 9:00	Breakfast Buffet	President(s) to speak; AV needed
	9:00 - 10:30	Breakout Sessions	2 breakout rooms with AV: 1. Provider Led Entity Medicaid; Speaker: TBD 2. Collaborative Among States & Counties; Speaker: TBD
	10:30 - 11:00	Break	Snacks/Drinks to be included
	11:00 - 12:30	Breakout Session	3 breakout rooms with AV: 1. Specialty Society 2026 Priorities 2. County Society 2026 Priorities 3. Challenges and Opportunities for Medical Society Management (invite only; off agenda)
	12:30 - 1:30	Buffet Lunch	
	1:30 - 2:45	Session	Insurance Agency Initiative (Medical Society of Virginia)
	2:45 - 4:30	Session	Health Insurance Captive; Speaker: TBD
	4:30 - 5:30	Break	
	5:30 - 6:30	Cocktail Hour	On the Veranda
	6:30 - 8:30	Dinner	Presentation TBD
Saturday 5/16	8:00 - 9:00	Breakfast Presentation	Chris Paterson to Speak
	9:00 - 9:30	Session 1	2026 Elections; Speaker: John Thompson
	9:30 - 10:00	Session 2	2026 NCMS Legislative Priorities; Speaker: TBD
	10:00 - 11:30	Session 3	Legislative Panel: Tim Reeder, MD; Grant Campbell, MD; Facilitator: TBD
	11:30 - 12:00	Farewell Remarks	
	12:00	End of meeting	Grab & Go Lunches

2026 Session: NC General Assembly

2025-2026 Legislative Goals

In 2025, the North Carolina Medical Society (NCMS) Board of Directors unanimously directed NCMS staff to obtain two key legislative priorities for the 2025-2026 legislative biennium.

1. Prior Authorization Reform

1. Protect the physician-patient relationship
2. Support legislation reforming insurers' prior authorization processes
3. Key bill: **House Bill 434 (The CARE FIRST Act)**
4. Goals: Expedited approvals (e.g., 24 hours for urgent care), transparency, no retroactive denials, insurer accountability for denied necessary care

2. Safeguarding Patient Safety

1. Oppose legislation allowing non-physicians to independently practice medicine equivalent to physicians
2. Support team-based models with appropriate oversight
3. Key legislation: **House Bill 67 (Session Law 2025-37)** — enacted July 2025
 1. Allows experienced PAs (4,000+ hours) team-based practice without individual supervisory agreements
 2. Maintains physician collaboration, supervision in high-risk areas (e.g., perioperative care, advanced imaging)
 3. Adopts PA Licensure Compact for workforce flexibility

2025 Legislative Session

The 2025 legislative session was productive for NCMS priorities, with the **CARE FIRST** Act passing the House overwhelmingly, advancing through the Senate (with amendments), and **House Bill 67** ratifying important team-based care reforms for experienced physician assistants into law. These two pieces of legislation were in addition to roughly 70 healthcare bills that NCMS tracked and responded to more than 17 of them.

NCMS still has important work ahead in the 2026 short session, including finalizing the CARE FIRST Act in conference committee and defending against ongoing threats to physician-led care.

1. CARE FIRST Act (HB 434) – Prior Authorization Reform

1. Passed House: 109-1 (April 2025)
 1. Passed Senate: 42-3 with amendments (June 2025)
 2. House refused to concur (114-0) Current status:
 3. In conference committee (since June 2025)

2. APRN Independent Practice (Major Threat)

1. House Bill 514 / Senate Bill 537 grants full independent practice to APRNs (NPs, CNMs, CNSs, CRNAs)
 1. Removes physician supervision for diagnosis, treatment, and prescribing
 2. Directly opposes NCMS goal of maintaining physician-led care
 3. Status: Filed March 2025; still in early committee stages; no floor action yet
 4. NCMS and coalition partners successfully prevented legislative activity and movement on the initiative in 2025

3. Other Scope-of-Practice Threats

1. Senate Bill 345: Shifts NP/nurse midwife oversight to Board of Nursing only
 1. NCMS and coalition partners successfully prevented legislative activity and movement on the initiative in 2025

Additional 2025 Government Affairs Wins:

- Interstate Medical Licensure Compact
- PA Interstate Licensure Compact
- CPP – worked with legislators are creating friendly language for physicians
- Pharmacy Test and Treat - worked with legislators are creating friendly language for physicians
- Medicaid Rate Cuts Stopped – worked with key stakeholders to combat the rate cuts and ultimately halted them by issuing a Petition for Contested Case Hearing
- Began combatting the downcoding issue with Aetna and Cigna

Emerging Legislation Bills or initiatives not included in the Board's 2025 directive

Parents' Medical Bill of Rights (House Bill 519, filed March 2025): aimed to limit minors' ability to consent to medical treatment independently.

On minor consent: It narrowed the exceptions under current law (G.S. 90-21.5), restricting self-consent for minors to **pregnancy-related care only** (excluding abortion), while eliminating independent consent for treatment of STDs/STIs, substance abuse, mental/emotional health issues, and other reportable conditions. The bill required parental consent (or access to records) for most other care, with limited exceptions like emergencies, suspected abuse/neglect, or when parents can't be located. It passed the House (68-41) in May 2025 but did not become law (no Senate passage or enactment noted as of early 2026).

Healthcare Practitioner Transparency Act (H696) is currently in conference committee, where its provisions—such as requiring accurate identification of licenses, certifications, or registrations in provider advertisements, prohibiting unlicensed individuals from using physician specialty titles, and including a new statutory definition for APRN—are being negotiated after the Senate limited the bill's scope

Medicaid Budget Funding:

In 2025, DHHS implemented deep physician rate cuts in Medicaid, straining practices and threatening access to care for vulnerable patients. NCMS must push hard in the 2026 short session to ensure sustainable reimbursement rates, preserve provider participation, and protect the Medicaid safety net from further erosion.

Implementation Strategy

Executing the 2025 NCMS Board Directive Coordinated Activities to Advance Priorities & Respond to Emerging Legislation

- **Legislative Activity:** Direct lobbying, bill tracking (summary & analysis), testimony, patient impact stories
- **Political Activity:** Candidate engagement, PAC support, coalition building
- **Grassroots Activity:** Member mobilization, Physician outreach, Constituent contact
- **Political Communications:** Media relations, messaging (members & public), digital campaigns, stakeholder education

GOAL

Fully implement the Board's 2025-2026 priorities through targeted, multi-channel execution while addressing new/emerging issues appropriately.

2026 Legislative and Grassroots Tactics

NCMS Government Relations Team Strategy

The NCMS Government Relations team will deploy a comprehensive, multi-channel advocacy approach to advance physician priorities and influence outcomes at the North Carolina General Assembly:

- **Direct Lobbying:** Scheduled meetings with key legislators and staff at the NCGA (target: 200 meetings, April–July) to build relationships, deliver policy positions, and secure support on priority issues.
- **Stakeholder Engagement:** Ongoing meetings with allied organizations, providers, payers, and influencers to align messaging and strengthen coalitions.
- **Specialty & County Recruitment:** Continuous education and mobilization of specialty societies and county medical societies to expand grassroots reach and physician participation.
- **Legislative Cabinet Committee:** Restructured for enhanced member involvement, strategic input, and active engagement in shaping NCMS legislative priorities.
- **AMA Grant Submission:** Application for funding to support targeted legislative education activities (February–October).
- **NCMS PAC:** Strategic disbursements to supportive candidates and ongoing fundraising to maintain a strong political presence.
- **Independent Expenditure – Patients First NC:** Coordinated campaign including one direct political effort and two educational initiatives to amplify physician voices and public awareness on key health policy issues.
- **In-Person Lunch & Learns:** Monthly sessions (2 per month, February–November) with large physician practices to educate on legislative developments and encourage advocacy.
- **Political Communications:** Weekly Dose, Political Pulse, Healthcare Headlines Webinars, Social Media, Action Alerts, IE Activity, Earned/Paid media

Next Steps for 2026 Legislative Session

- 1. Priority Bills in Committee:** NCMS will coordinate with coalition partners to advance supportive bills through committee or retain/restrict harmful measures as needed.
 - 1. Key Tactics:** Direct lobbying of committee members and leadership; targeted grassroots efforts; strategic political communications (Weekly Dose, Political Pulse, Healthcare Headlines, social media, action alerts, earned/paid media).
- 2. Minor Consent (e.g., HB 519/SB 759 – Minors Health Protection Act)** NCMS remains committed to defending minors' independent consent for sensitive services and will oppose restrictions undermining access and confidentiality.
 - 2. March Convening:** Convene physicians and stakeholders to discuss implications, gather feedback, assess consensus, and—if legislation advances—identify (if any) safeguards for Senate negotiations. Ongoing monitoring, ally coordination, and Board updates to safeguard patient access and physician judgment.
- 3. Medicaid Budget Sustainability** Amid persistent shortfalls (e.g., \$319M gap for SFY 2026 rebase), NCMS will partner with providers, insurers, and stakeholders to advocate for accurate projections and full funding.
 - 3. Targeted Advocacy:** Direct lobbying of key NCGA members and DHHS leadership to secure sufficient state appropriations and federal match, ensuring program viability, provider participation, and beneficiary access. Emphasis on impacts to NC's health infrastructure, economy, and public health. Progress updates forthcoming

Hospice & Palliative Care Society

Draft Motion:

To give a two-year provisional recognition to the Hospice & Palliative Care Society.

Merging of Component Societies

Draft Motion:

That the Board of Directors authorize the physicians of Wayne, Lenoir, Greene, and Duplin Counties to form a new Component Society to be designated as the Wayne-Lenoir-Greene-Duplin Counties Medical Society.

COI & Confidentiality Forms

Executive Session

Adjourn