Call to Order: Dr. Alan L. Felsenfeld, chair, called a regular meeting of the Commission for Continuing Education Provider Recognition to order on Thursday, March 19 at 1:15 p.m. in the Executive Conference Room of the ADA Headquarters Building in Chicago.

Roll Call

CCEPR members: Dr. Eva F. Ackley, Dr. Brian A. Beitel, Dr. Hardeep K. Chehal, Dr. Joseph F. Fiorellini, Dr. Alan E. Friedel, Ms. Janice Gibbs-Reed, Dr. Mark C. Hutten, Dr. Paul Leary, Dr. Eugene J. McGuire, Mr. Conor McNulty, Dr. Ann Steiner, Dr. Mary A. Tavares and Dr. Timothy T. Wheeler were present.

Dr. Red Stevens, Fifth District Trustee, attended as the ADA Board Liaison to the Commission.

Absent: Dr. Timothy C. Kirkpatrick was not able to attend the meeting.

Guests (for portions of the meeting): Dr. Eric Wong, chair, Academy of General Dentistry Program Approval for Continuing Education (AGD PACE) Council (by conference call); Ms. Lynda Lipske-Truback, manager, AGD PACE.

Commission staff: Ms. Mary Borysewicz, director; Ms. Kimberly Hendricks, program assistant.

ADA staff (for all or portions of the meeting): The following ADA staff members attended all or portions of the meeting: Dr. Anthony J. Ziebert, senior vice president, Education/Professional Affairs; Ms. Karen M. Hart, senior director, Education Operations and director, Council on Dental Education and Licensure; Ms. Paula Tironi, Esq., senior associate general counsel; Ms. Tammie Lollis, manager, Education Communications; Ms. Carma Shurley, project manager, Web Development.

Preliminary Business

Adoption of Agenda and Disclosure of Conflicts of Interest: The Commission approved the agenda, as amended and authorized the chair to alter the order of agenda items as necessary to expedite business.

Dr. Felsenfeld directed the Commission’s attention to the ADA Conflict of Interest Policy. No Commission members reported a conflict of interest with regard to any item discussed during the meeting.

Fiduciary Duty and ADA Professional Conduct Policy: Ms. Paula Tironi gave a short presentation regarding fiduciary duty, the ADA Conflict of Interest policy, and the ADA Professional Conduct Policy.

Consent Calendar: A consent calendar was prepared to expedite the business of the Commission. Dr. Felsenfeld reminded Commission members that any report, recommendation or resolution could be removed from the consent calendar for discussion. The following report was taken off the consent calendar:

On-line Application Submissions Status Report

The following reports in their entirety, including recommendations, were placed on the consent calendar and adopted as received:
Minutes of the November 20, 2014 CCEPR Meeting (approved via email ballot)
CCEPR Communication and Marketing Plan
Appointments to the Commission
Future Meeting Dates
CERP Participation and Provider Data
Results of Spring 2015 CERP Applicant Survey
Providers Requesting Extension of Recognition Term
Providers Voluntarily Withdrawing

Commission Business

Report to the Commission from the Academy of General Dentistry’s PACE Council: Dr. Wong reported on several items considered by the PACE Council at its February 2014 meeting. PACE currently approves approximately 680 providers nationally. Another 850 providers are approved by AGD state societies through the local approval process. The PACE Council voted to establish a six-year recognition term for providers that demonstrate substantial compliance with the PACE Guidelines by achieving two consecutive 4-year recognition terms. PACE anticipates that granting longer recognition terms will reduce the number of applications that must be reviewed at any one time and will improve workflow for staff. The Council is also considering modifications to the PACE Guidelines to include definitions and criteria related to “blended learning” CE activities that include elements of live instructions and self-study. More information is needed regarding acceptance of these types of activities by licensing boards.

ADA Board of Trustees Liaison Report: Dr. Red Stevens greeted the Commission members and staff on behalf of the Board of Trustees. Dr. Stevens briefly described his role as the Board Liaison and indicated that he is happy to serve as a resource to the Commission.

Appeal Process Subcommittee Report: Dr. Ackley presented the Appeal Process Subcommittee’s recommended draft procedures for managing appeals of adverse recognition actions (Appendix 1), in accordance with ADA Bylaws and CCEPR Rules. The Subcommittee’s draft contained proposed modifications to the existing CERP Procedures for an Adverse Action to reflect the new governance of ADA CERP and to afford CE providers the opportunity for a nonprejudicial hearing in the event that recognition is denied or withdrawn by the Commission. The Commission discussed the draft and proposed certain amendments, which are reflected in Appendix 1 (deletions in strikeout, additions underlined).

Action: The Commission adopted the CCEPR Procedures for an Adverse Action Against a CE Provider, as amended (Appendix 1).

Action: The Commission directed that providers submitting an appeal be assessed an administrative fee, set at $1,000 in 2015, and that in addition to this fee, providers requesting an in-person hearing shall be required to pay a fee to cover the travel expenses of the three hearing panel members, based on the ADA’s standard budget assumptions for volunteer travel for a one-day meeting.

CCEPR Rules and Policies: The Commission discussed its responsibilities as a new ADA agency and the need to periodically assess whether existing policies and procedures support efficient operations and program goals. As needed, the Commission will identify areas where new or modified policies may contribute to the agency’s effectiveness.

CMS Open Payments/Sunshine Act Update: Ms. Borysewicz updated the Commission on changes to the Centers for Medicare & Medicaid Services (CMS) Final Rule for implementing Section 6002 of the Affordable Care Act, explaining that, effective in 2016, CMS eliminated the exemption for continuing education that was accredited or certified by certain listed entities, including ADA CERP.
CCEPR “Micro-site” Update: Ms. Lollis presented an overview of the home page and navigational features planned for the Commission’s micro-web site. The new site, to be located in the “ADA Websites,” section of ADA.org, will be dedicated to information about the Commission and ADA CERP. The home page will include dynamic features that will enable the Commission to highlight new or time-sensitive information. No advertising will be permitted on the CCEPR micro-site. The URL for the current ADA CERP home page, ADA.org/CERP, will automatically redirect users to ADA.org/CCEPR. The target date for launching the new web site is mid-May.

2016 Budget Process: Dr. Felsenfeld presented a preliminary budget for 2016 to the members of the Commission. The budget projects that CCEPR direct costs will be covered by provider fees. Dr. Felsenfeld noted that projected revenues were based on provider fees proposed by the CERP Committee at its October 2014 meeting. He also noted that the budget may be modified in the course of the administrative review process. The Commission requested that staff explore costs for additional strategies to promote ADA CERP to members. For future discussion, the Commission requested staff to assess new fee structures and their potential impact on CCEPR’s budget.

ADA CERP Standards, Policies and Procedures

CERP Policies and Procedures Update Subcommittee Report: Dr. Wheeler presented updates to the ADA CERP Recognition Standards and Procedures proposed by the Subcommittee to reflect the change in program oversight from the Council on Dental Education and Licensure to the Commission (Appendix 2; proposed deletions in strikeouts, proposed additions underlined). The changes proposed were primarily of an editorial nature and separate from the comprehensive review of the Standards that is planned for 2015-2016, described in another section of this report. Dr. Wheeler noted that although the Commission is now referenced throughout the Recognition Standards and Procedures as the agency responsible for developing standards and making recognition decisions, the program remains the ADA Continuing Education Recognition Program, and CE providers approved through the program will continue to be designated as ADA CERP recognized providers.

Action: The Commission adopted the revisions to the ADA CERP Recognition Standards and Procedures shown in Appendix 2, effective immediately.

Standards Revision Process Launch: Dr. Felsenfeld reminded the Commission that in 2014 the CERP Committee and the Council on Dental Education and Licensure determined to conduct a comprehensive review of the CERP Recognition Standards in 2015-2016, noting that the ADA CERP Standards were last reviewed in 2008. Periodic review and revision of accreditation guidelines is a standard practice in all types of accreditation. Conducting such periodic reviews will help ensure that CERP continues to establish relevant standards for quality continuing dental education. The Commission reviewed an outline of the process proposed by the CERP Committee, updated to reflect that the Commission will conduct the review, and the time frame adjusted accordingly. The process will include: a scan of the literature related to continuing professional development; input and feedback from stakeholder groups, including CERP recognized providers, state dental boards, state and local dental societies, etc., through formal calls for comments and open hearings; a review of accreditation or recognition standards from agencies that accredit or approve continuing education in the health care professions; and a review of the CERP Standards to identify redundant criteria and those that may no longer be relevant. A subcommittee was appointed to conduct the process. As a first step in the process, the communities of interest will be invited to provide suggestions for revisions to the CERP Standards.

Action: The Commission directed that a call for comments be circulated to the following communities of interest requesting input on revisions to the ADA CERP Recognition Standards and Procedures:

- ADA CERP recognized providers
- state dental boards,
- dental associations,
- dental specialty certifying boards.
Action: The Commission directed that the Subcommittee on Standard Revisions review any comments received from the communities of interest on the revisions to the ADA CERP Recognition Standards and Procedures and report its findings and recommendations to the Commission at its September 2015 meeting.

Procedures for Non-compliance with Standard XIII: The Commission considered whether providers cited for deficiencies related to patient protection criteria outlined in ADA CERP Standard XIII should be required to demonstrate improved compliance with these criteria in an expedited time frame. Under current procedures, recognized providers that do not meet specific standards may be required to submit a progress report documenting compliance with the criteria. Progress reports are usually due within six to twelve months for review at a regularly scheduled meeting of the Commission. However, the Commission may request reports at other specified intervals, as stated in the Regulations Governing the Recognition Process. As patient protection is essential, the Commission concurred that providers cited for deficiencies in this area should be required to demonstrate improvements prior to the Commission’s next meeting, for example within 60 days, or another period to be determined by the Commission. Providers that fail to demonstrate improvements within the timeframe specified may be notified of the Commission’s intent to withdraw recognition, in accordance with procedures for an adverse action (discussed in a separate report). The Commission directed staff to advise providers of the importance of submitting documentation demonstrating full compliance with patient protection criteria, when applicable, and to notify them that deficiencies related to Standard XIII will need to be corrected within a specified time frame.

Eligibility Criteria for International Providers: New eligibility criteria for CE providers based outside the United States and Canada were introduced by the CERP Committee and Council on Dental Education and Licensure in 2014, and a Pre-application Process for International Providers (PPIP) launched to gather information to assist in assessing these providers’ eligibility to move forward with the ADA CERP application process. The Pre-Application Process is also designed to help international providers understand and meet CERP requirements. The Council believed that expanding recognition to eligible international CE providers may help foster global standards for continuing dental education, promote awareness of ADA standards and services, and support opportunities for American dentists to obtain CE credits abroad.

Since implementation of the PPIP, the Commission has reviewed five eligibility surveys from international providers. In evaluating the new process and gaining more information regarding continuing professional development systems and requirements in other countries, the Commission has noted that, as currently written, the eligibility requirements may be prohibitive to an unforeseen degree. In particular, many providers would not be considered eligible because no recognition or accreditation process exists within these providers’ countries. Recognition by an authorized accreditation or governmental agency is one of the CERP eligibility criteria for international providers. In light of these considerations, the Commission appointed a subcommittee to reevaluate the eligibility criteria for international providers and to report its findings to the Commission in September.

ADA CERP Administration

CERP Extended Approval Process (EAP) 2015-2016: Ms. Borysewicz provided an overview of the Extended Approval Process, the program that allows state dental societies and ADA recognized specialty organizations that have been granted ADA CERP to extend ADA CERP recognition to their local societies. Participation in EAP is voluntary. Societies that elect to participate in EAP conduct their own review processes, and are required to submit to CERP the names of the components approved on an annual basis, as well as periodic documentation of their review processes. The program was developed in 1995 in order to expand acceptance of ADA CERP and thereby increase member access to quality continuing dental education. For the May 2015–June 2016 approval period, 16 CERP approved providers (four specialty societies and 12 state societies) report that they will be extending approval to a total of 109 component societies. The list of EAP approved providers is posted on ADA.org/CERP. Noting that dental
societies that have had staff changes may not be familiar with EAP, the Commission directed staff to provide information about the program to eligible societies through avenues such as the American Society of Constituent Dental Executives and the ADA’s client services outreach initiatives.

On-line Application Submissions Status Report: In post-application surveys conducted 2013-2015, providers have consistently commented that the process of assembling and duplicating hard copies of the application and materials is burdensome. Between 69-82% of providers responding to these surveys have indicated that they would be able to complete an online application. Staff are in the process of evaluating two software platforms that could support web-based application submissions and reviews. It is anticipated that proposals will be submitted in the second or third quarter of 2015.

2015 CERP Workshop for CE Providers: A workshop for CE providers is scheduled to be held on November 5 during ADA 2015 in Washington, DC. Dr. Felsenfeld will moderate the session. Dr. Mary Tavares and Dr. Paul Leary volunteered to serve as presenters, along with Ms. Borysewicz. The session is educational for CE providers with an interest in applying for and maintaining CERP recognition. A registration fee will be assessed to cover the operational expenses for the session.

Spring 2015 Recognition Decisions: The Commission acted on 13 new applications for recognition, 66 applications for continued recognition, one supplemental report in response to postponed action, and 16 progress reports. Five pre-application surveys for international providers (PPIP) were also evaluated. The Commission was notified of seven providers voluntarily withdrawing from the program; the most common reasons for discontinuing participation are a merger of two CE providers or the discontinuation of the provider’s CE program. Including the March 2015 actions on recognition, there are 435 ADA CERP recognized providers. The Commission’s actions are noted in Appendix 3, which is a confidential section of these minutes. The official list of ADA CERP recognized providers is published at ADA.org/CCEPR.

Action: The Commission granted recognition or continued recognition to a total of 70 continuing dental education providers. The Commission’s March 2015 actions regarding ADA CERP recognition are summarized in Appendix 3.