

ADA Strategic Forecast Adopted October 2024

Mission and Vision

202H-2024. Resolved, that the ADA House of Delegates retain the current mission and vision statements of the American Dental Association as set forth below:

Mission Statement: Help dentists succeed and support the advancement of the health of the public.

Vision Statement: Empowering the dental profession to achieve optimal health for all.

Direct to Dentist Component of 2024 Strategic Forecast

203H-2024. Resolved, that the American Dental Association adopt an inaugural Strategic Forecast in order to focus efforts and financial support in the subject matter area of Direct to Dentist in a manner that results in sustainable positive growth toward the ADA's Mission and Vision statements, and be it further

Resolved, that the high-level outcome of an increase in interpersonal and digital connections with members, dental students, and future members over the next five years be, and hereby is established, as a part of the ADA's Strategic Forecast, with the following high-level goals:

- By 2030, 75% of all dentists are engaging with the ADA digitally and interpersonally.
- By 2030, 75% of all dentists consider the ADA as indispensable to their success and are professionally satisfied.
- By 2030, ADA's market share will be 70% of Generation Z and new dentists.

and be it further

Resolved, that Appendix 1 of the Report of the Strategic Forecasting Committee to the 2024 House of Delegates, and also appended here, which reflects the work product of the Direct to Dentist Action Groups, shall be communicated to the appropriate ADA agencies so that additional supporting elements to the identified high-level goals may be given consideration for those agencies' work product under any approved Strategic Forecast, and be it further

Resolved, that all appropriate ADA agencies charged with carrying forward the work of the Association support the overarching high-level elements of this Strategic Forecast in all their efforts, including, but not limited to, creation of, evaluation of and prioritization of any strategic decisions or work product from each's specific area of expertise or responsibility, either currently in existence or to be implemented, in such a manner that positive progress toward achieving the desired outcomes is demonstrated in a year-over-year fashion This also includes thoughtful consideration, revamping, or discontinuation of activities determined to be of lesser or no impact in supporting the Strategic Forecast, and be it further

Resolved, that the ADA communicate and collaborate with states and local dental societies before offering a new product or service in that state, and be it further

Resolved, that the outcomes and goals, as well as any of the Associations supporting objectives, be tracked against the Strategic Forecast through the use of the Quarterly Business Review or similar vehicle, and that such reporting be made available to the House of Delegates on a quarterly basis.

**Appendix 1
Direct to Dentist**

The tables below outline the work product of all levels of the SFC with regard to Direct to Dentist discussions. The Outcomes category notes the highest level, overarching target of the Strategic Forecast. The tables also contain input from Councils and Committees, in addition to that of the Action Groups, especially in the areas of Objectives.

- Purpose: Indicate the reason this outcome is sought.
- Five-Year Goals: Indicates the current five-year highest priority targets.
- Outcomes: Represent the highest-level desired state for the ADA to reach.
- Objectives / Key Results: Supporting goals and tactical initiatives that might support reaching the desired outcomes, subject to evaluation and potential implementation by the ADA agencies charged with the area of responsibility under which they fall AND availability of funds.
- In certain instances within the key results, “x” means the baseline has yet to be determined and the measure will be inserted once that baseline work is completed.

Direct to Dentist Table 1

Purpose	5-Year Goals	Outcomes	Objectives
<p>1a. Improve ADA’s ranking as a trusted source of information.</p> <p>1b. Collaboration among interested affiliated dental organizations.*</p>	<p>1a. By 2030, 75% of all dentists are engaging with the ADA digitally and interpersonally. [Based on 2025 Baseline goal from Fonteva/ Salesforce].</p> <p>1b. By 2030, ADA and interested affiliated dental organizations* collaborate on areas of mutual interest.</p>	<p>1. ADA universal engagement and loyalty.</p>	<p>1a. By 2030, more dentists are engaging with the ADA in new ways. Includes: loyalty program, new membership model, custom / personalized content, Salesforce, Marketing Cloud, social media, ADA App, ADA.org, Google search, Omni-Channel content engagement, proactive social media, marketing, communications, paid/earned/shared/owned, products/services, etc.</p> <p>1b. Organizations will achieve Operational efficiency to benefit the organizations and their dentists.</p>

Direct to Dentist Table 2

Purpose	5-Year Goals	Outcomes	Objectives
<p>2a. Ensure dentists and dentistry thrives in tomorrow’s healthcare environment.</p> <p>2b. Consistent value delivered at each level of the Tripartite.</p>	<p>2a. By 2030, 75% of all dentists consider the ADA as indispensable to their success and are professionally satisfied. [Baseline: x%].</p>	<p>2a. Help dentists succeed today and thrive tomorrow in a rapidly-changing healthcare environment.</p> <p>2b. Support dentists and connect DSO / large group practice and clinical leaders.</p>	<p>2a. By 2030, at least x% of dentists engage with ADA-developed regulatory compliance tools, clinical information, guidelines, science, financial services, etc. Loan Forgiveness, CDT, financial resources, HIPAA / OSHA / Regulatory Compliance / new guidelines, advocacy, credentialing, contract analysis, global brand building, etc.</p>

*Affiliated dental organizations may include, but are not limited to: dental specialty societies, dental school related organizations such as the American Student Dental Association (ASDA) and American Dental Education Association (ADEA), DSO-related organizations such as the Association of Dental Support Organizations (ADSO) and Women in DSO, diverse organizations such as the National Dental Association (NDA) and Hispanic Dental Association (HDA), and such entities as the American College of Dentists (ACD), International College of Dentists (ICD), and Pierre Fauchard Academy (PFA).

	<p>2b. By 2030, ADA members receive consistent and equitable value, regardless of their location and practice modality.</p>	<p>2c. Global oral health improvements and global brand building.</p>	<p>2b. By 2030, dentists engage with ADA to prepare and shape the future of dentistry. Includes: HPI Trends, AI-enabled tools to improve practice efficiency on both admin and clinical issues, ADA co-pilot, DenTech, products, etc.</p> <p>2c. Overall member value will be clearly defined, being both collaborative and customizable across national, state and local societies to ensure consistency, as practice modalities evolve, and dentists become increasingly mobile in their careers.</p> <p>2d. Total member price will be customizable and reflective of members' perceived value.</p>
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Direct to Dentist Table 3

Purpose	5-Year Goals	Outcomes	Objectives
<p>3. Making the generational transition to engage with future members.</p>	<p>3. By 2030, ADA's market share will be 70% of Generation Z dentists and new dentists. [Baseline today's generational market share and forecasted future generational market share: x%].</p>	<p>3. Reimagined, unified end-to-end dental students-to-dentists strategy and activation.</p>	<p>3a. By 2030, ADA engages x% of early career dentists and dental students. Includes: Reimagined end-to-end student and early career engagement, experiences, career guidance content, loan forgiveness, financial services, student ambassadors, targeted content, social media.</p> <p>3b. By 2030, converting more early career dentists to membership or engagement. Includes: Reimagined early career engagement and value delivery, new membership model, loyalty program, early career engagement and CE, social media.</p>

Direct to Dentist Table 4

Purpose	5-Year Goals	Outcomes	Objectives
<p>4. Consumers / patients view ADA as a key source for trusted oral health information.</p>	<p>4. By 2030, x% of consumers / patients are aware of and see ADA as a trusted source for oral health information.</p>	<p>4. Direct-to-consumer: promoting healthy behaviors.</p>	<p>4a. By 2030, x% increase in consumer / patient awareness of the ADA. Reimagined Mouth Healthy and Find a Dentist, direct-to-consumer campaigns, paid/earned/shared/owned marketing, Seal products promotion.</p> <p>4b. By 2030, x% of consumers / patients view ADA as a trusted source for oral health information. Global brand building, direct-to-consumer marketing, ADA Seal products promotion.</p>

Tripartite Component of 2024 Strategic Forecast

204H-2024. Resolved, that the American Dental Association adopt an inaugural Strategic Forecast in order to focus efforts and financial support in the subject matter area of the Tripartite in a manner that results in sustainable positive growth toward the ADA's Mission and Vision statements, and be it further

Resolved, to achieve a stable and successful Tripartite, that the high-level outcomes of promoting Tripartite stability, success, and future growth, along with aligning member value across the Tripartite, be, and hereby are, established as part of the ADA's Strategic Forecast, with the following five-year goals:

- By 2030, the Tripartite will achieve financial stability and operational efficiency across all three levels.
- By 2030, ADA members will receive consistent and equitable value, regardless of their location and practice modality.
- By 2030, ADA and interested affiliated dental organizations will align on areas of mutual interest.

And be it further

Resolved, that Appendix 3 of the Report of the Strategic Forecasting Committee to the 2024 House of Delegates, and also appended here, which reflects the work product of the Tripartite Action Groups, shall be communicated to the appropriate ADA agencies so that additional supporting elements to the identified high-level goals may be given consideration for those agencies' work product under any approved Strategic Forecast, and be it further

Resolved, that all appropriate ADA agencies charged with carrying forward the work of the Association support the overarching high-level elements of this Strategic Forecast in all their efforts, including, but not limited to, creation of, evaluation of and prioritization of any strategic decisions or work product from each's specific area of expertise or responsibility, either currently in existence or to be implemented, in such a manner that positive progress toward achieving the desired outcomes is demonstrated in a year-over-year fashion. This also includes thoughtful consideration, revamping, or discontinuation of activities determined to be of lesser or no impact in supporting the Strategic Forecast, and be it further

Resolved, that the ADA communicate and collaborate with states and local dental societies before offering a new product or service in that state, and be it further

Resolved, that outcomes and goals, as well as any of the Association's supporting objectives, be tracked against the Strategic Forecast through the use of the Quarterly Business Review or similar vehicle, and that such reporting be made available to the House of Delegates on a quarterly basis.*

*Affiliated dental organizations may include, but are not limited to: dental specialty societies, dental school related organizations such as the American Student Dental Association (ASDA) and American Dental Education Association (ADEA), DSO-related organizations such as the Association of Dental Support Organizations (ADSO) and Women in DSO, diverse organizations such as the National Dental Association (NDA) and Hispanic Dental Association (HDA), and such entities as the American College of Dentists (ACD), International College of Dentists (ICD), and Pierre Fauchard Academy (PFA).

**Appendix 3
Tripartite**

The tables below outline the work product of all levels of the SFC with regard to Tripartite discussions. The Outcomes category notes the highest level, overarching target of the Strategic Forecast. The tables also contain input from Councils and Committees, in addition to that of the Action Groups, especially in the areas of Objectives.

- Purpose: Indicate the reason this outcome is sought.
- Five-Year Goals: Indicates the current five-year highest priority targets.
- Outcomes: Represent the highest-level desired state for the ADA to reach.
- Objectives & Key Results: Supporting goals and tactical initiatives that might support reaching the desired outcomes, subject to evaluation and potential implementation by the ADA entities charged with the area of responsibility under which they fall AND availability of funds.

Tripartite Table 1

Purpose	5-Year Goals	Outcomes	Objectives	Key Results
1. A stable and successful Tripartite.	1. By 2030, achieve financial stability and operational efficiency across all three levels of the Tripartite.	1a. Promote Tripartite stability, success, and future growth.	1a. National, state, and local societies have clearly defined roles.	1a. Study structure/size/capacity and purpose of state/local societies for consideration of equitable value offerings and services for all members by 12/2026.
			1b. National, state, and local societies will be financially net positive.	1b. Offer operational stabilization components to pilot states as they transition onto the new membership model through collaborative and customizable service level Agreements (2025-2027). -Explore and implement shared revenue models to address inequities by 12/2027.
			1c. National, state, and local societies will achieve operational efficiency.	1c. Offer leadership, financial, HR, marketing / communications, and technology training, resources, and support (through collaborative and customizable service level agreements) for state and subsequently, local societies: ongoing through 2029.
				1d. Adoption and utilization of technology platforms. -Salesforce/Fonteva, among national, state, and local societies by 2025 dues cycle. -Others TBD.

			1d. Each level of the Tripartite will achieve 70% market share for Gen Z and new dentists to ensure relevance, vibrancy, and future growth of the Tripartite.	1e. Offer leadership, marketing / communications, technology, programing and staff training, resources, and support (through collaborative and customizable service level agreements) for state societies by 12/2026.
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Tripartite Table 2

Purpose	5-Year Goals	Outcomes	Objectives	Key Results
2. Consistent value delivered at each level of the Tripartite.	2. By 2030, ADA members receive consistent and equitable value, regardless of their location and practice modality.	2. Align member value across the Tripartite.	2a. Overall member value will be clearly defined, being both collaborative and customizable across national, state, and local societies to ensure consistency, as practice modalities evolve, and dentists become increasingly mobile in their careers.	2a. Alignment and clear communication on unique value among the Tripartite on national, state, local offerings by 12/2027 (allows for 1 year after the study is completed above).
				2b. Leverage technology to provide stronger member support through personalized value propositions and engagement at all three levels of the Tripartite: ongoing through 2029.
				2c. Implementation of Group Practice Initiative, including: -Launch of Clinical Mastery Certificate Program at the national level by 12/2025. -Development of Tripartite group practice value proposition by 12/2025. -Implementation of Tripartite Culture of Acceptance Program by 12/2025.
				2d. Exploration and implementation of best practice member leadership engagement (including new dentists) guidelines, resources, and support by 12/2026.

				<p>2e. Implementation of Dental Student to Dentist Initiative, including:</p> <ul style="list-style-type: none"> -Placement of faculty ambassadors at each school by 6/2025. -90% capture of new grad data through Signing Day and other tactics by 6/2025. -Implementation of consistent and measurable state and local engagement with the dental schools and students by 12/2025. -Implementation of seamless transition experience for students to dentist Tripartite members by 12/2026.
				<p>2f. Identify and fill value gaps at the state and local level through collaborative and customizable service level agreements: ongoing through 2029.</p>
			<p>2b. Total member price will be customizable equitable and reflective of members' perceived value.</p>	<p>2g. Implementation of new Membership and Engagement Model by 2028 dues cycle.</p>
				<p>2h. Implementation of pilot for group practice model (including dental schools and large group practices) by 2026 dues cycle.</p>

Tripartite Table 3

Purpose	5-Year Goals	Outcomes	Objectives	Key Results
<p>3. Collaboration among interested affiliated dental organizations.*</p>	<p>3. By 2030, ADA and interested affiliated dental organizations collaborate on areas of mutual interest.</p>	<p>3. Foster organizational collaboration.</p>	<p>3. Organizations will achieve operational efficiency to benefit the organizations and their dentists.</p>	<p>3a. Adoption and utilization of technology platforms, such as Salesforce/Fonteva, to share mutually beneficial data and insights: ongoing through 2029.</p>

*Affiliated dental organizations may include, but are not limited to: dental specialty societies, dental school related organizations such as the American Student Dental Association (ASDA) and American Dental Education Association (ADEA), DSO-related organizations such as the Association of Dental Support Organizations (ADSO) and Women in DSO, diverse organizations such as the National Dental Association (NDA) and Hispanic Dental Association (HDA), and such entities as the American College of Dentists (ACD), International College of Dentists (ICD), and Pierre Fauchard Academy (PFA).

				<p>3b. Exploration and implementation of cross promotion of organizational membership offerings and pricing incentives: ongoing through 2029.</p>
				<p>3c. Additional collaboration opportunities TBD.</p>

Public Profession Component of 2024 Strategic Forecast

320H-2024. Resolved, that the American Dental Association adopt an inaugural Strategic Forecast in order to focus efforts and financial support in the subject matter area of Public Profession in a manner that results in sustainable positive growth toward the ADA’s Mission and Vision statements, and be it further

Resolved, that for the purposes of improving oral health and ensuring that dentistry thrives in tomorrow’s healthcare environment the following outcomes be, and hereby are, established as a part of the ADA’s Strategic Forecast over the next five years:

- Promote Healthy Behaviors
- Increase and Improve Dental Coverage & Access
- Support a Healthy, Well-Distributed, Skilled & Scoped Workforce
- Drive Evidence-Based, Ethical Quality Care

and be it further

Resolved, in order to support foundational work toward the above outcomes, that the following five-year goals be, and hereby are, established:

- By 2030, at least 50% of the U.S. population should utilize oral health care. (Supporting an increase in and improvement of dental coverage and access, while also highlighting the need for a healthy, well-distributed, skilled, and scoped workforce.)
- By 2030, the majority of clinicians are aware of new guidelines within 18 months of publication, and ADA and the ADA Forsyth Institute remain the leaders on research, guidelines, and standards for dentistry and oral health. (Supporting driving evidence-based ethical quality care.)
- By 2030, only 11.5% of daily calories are from added sugars consumed by people aged 2 years and over. (Supporting promotion of healthy behaviors.)
- By 2030, only 11.3% of children grades 6-12 report using any product containing nicotine in the past 30 days. (Supporting promotion of healthy behaviors.)
- By 2030, 77.1% of people served by community water systems will have optimally fluoridated water. (Supporting promotion of healthy behaviors.)
- By 2030, at least 80% of adolescents aged 13 through 15 years received recommended doses of the HPV vaccine. (Supporting promotion of healthy behaviors.)

and be it further

Resolved, that Appendix 2 of the Report of the Strategic Forecasting Committee to the 2024 House of Delegates, and also appended here, which reflects the work product of the Public Profession Action Groups, shall be communicated to the appropriate ADA agencies so that additional supporting elements to the identified high-level goals may be given consideration for those agencies' work product under any approved Strategic Forecast, and be it further

Resolved, that all appropriate ADA agencies charged with carrying forward the work of the Association support the overarching high-level elements of this Strategic Forecast in all their efforts, including, but not limited to, creation of, evaluation of and prioritization of any strategic decisions or work product from each one's specific area of expertise or responsibility, either currently in existence or to be implemented, in such a manner that positive progress toward achieving the desired outcomes is demonstrated in a year-over-year fashion. This also includes thoughtful consideration, revamping, or discontinuation of activities determined to be of lesser or no impact in supporting the Strategic Forecast, and be it further

Resolved, that outcomes and goals, as well as any of the Association's supporting objectives, be tracked against the Strategic Forecast through the use of the Quarterly Business Review or similar vehicle, and that such reporting be made available to the House of Delegates on a quarterly basis.

Appendix 2 Public Profession

The tables below outline the work product of all levels of the SFC with regard to Public Profession discussions. The Outcomes category notes the highest level, overarching target of the Strategic Forecast. The tables also contain input from Councils and Committees, in addition to that of the Action Groups, especially in the areas of Objectives.

- Purpose: Indicate the reason this outcome is sought.
- Five-Year Goals: Indicates the current five-year highest priority targets.
- Outcomes: Represent the highest-level desired state for the ADA to reach.
- Objectives & Key Results: Supporting goals and tactical initiatives that might support reaching the desired outcomes, subject to evaluation and potential implementation by the ADA agencies charged with the area of responsibility under which they fall AND availability of funds.
- In certain instances, within the key results, "x" means the baseline has yet to be determined and the measure will be inserted once that baseline work is completed.

Public Profession Table 1

Purpose	5-Year Goals	Outcomes	Objectives	Key Results
1. Improve oral health. Ensure dentistry thrives in tomorrow's healthcare environment.	1a. By 2030, only 11.5% of daily calories are from added sugars consumed by people aged 2 years and over. <small>Baseline / Source: 13.5% of daily calories are from added sugars consumed by people aged 2+ years [Healthy People 2020: 2017 - 2020].</small>	1. Promote healthy behaviors.	1a. Children and parents / guardians will reduce consumption of foods and beverages high in added sugars / ultra-processed foods.	1a. By 2030, x% of children and parents / guardians report reduction in consumption of foods and beverages high in added sugars. <small>Baseline / Source: Not available/ New Data Collection Needed by HPI</small>
	1b. By 2030, only 11.3% of children grades 6 - 12 report using any product		1b. Children will reduce use of any product containing nicotine (cigarettes & vaping).	1b. By 2030, x% of children refrain from using nicotine containing products. <small>Baseline / Source: Not available/ New Data Collection Needed by HPI</small>

	<p>containing nicotine in the past 30 days. Baseline:18.3% for children grades 6 - 12 report using any tobacco product in the past 30 days [Healthy People 2030].</p>			
	<p>1c. Brushing behavior change goal for 2030 still to be defined. Baseline data needs to be established.</p>		<p>1c. People will brush 2x per day with fluoride toothpaste.</p>	<p>1c. By 2030, x% of parents of vulnerable at-risk children report improvement in brushing behavior. Baseline / Source: Not available/ New Data Collection Needed by HPI.</p>
	<p>1d. By 2030, 77.1% of people served by community water systems will have optimally fluoridated water. Baseline: 72.8% of community water systems are fluoridated [Healthy People 2030, OH-11]</p>		<p>1d. Children, adults, people with physical and/or mental disabilities, and the elderly population will benefit from systemic and topical fluoride modes of action delivered by water fluoridation.</p>	<p>1d. By 2030, 77.1% of people served by community water systems will have optimally fluoridated water as recommended by the U.S. Department of Health and Human Services.</p>

Public Profession Table 2

Purpose	5-Year Goals	Outcomes	Objectives	Key Results
<p>2. Improve oral health. Ensure dentistry thrives in tomorrow's healthcare environment.</p>	<p>2. By 2030, at least 50% of the U.S. population should utilize care. Baseline/Source: 43.3% for U.S. population overall and 24.9% for low-income adults [MEPS/ HPI Analysis]</p>	<p>2. Increase and improve dental coverage & access.</p>	<p>2a. Employer-sponsored dental plans will be comprehensive, efficiently administered, meet standards with minimum cost-sharing and will have adequate reimbursement rates to support a sufficient provider network.</p>	<p>2a. -By 2025, establish criteria to define "comprehensive" benefits. -By 2030, the majority of covered individuals in the employer sponsored large group markets are in plans that appropriately address annual maximums and co-insurance with coverage, plan policies and use of premium dollars are transparently reported to participants and providers. -By 2030, ensure that self-funded plans are subject to state laws (e.g., non-covered services, assignment of benefits etc.) and payers cannot claim ERISA pre-emption. -By 2025, ADA and state dental associations will have an aligned commercial insurance reform agenda across the Tripartite and by 2026, any state public affairs funding allocated for the commercial market will be directed to move this agenda forward. Baseline / Source: Industry Data Reports</p>

			<p>2b. State Medicaid programs will provide comprehensive dental benefits to adults, will be efficiently administered, and will have adequate reimbursement rates to support a sufficient provider network to increase access for children and adults.</p>	<p>2b. -By 2025, ADA and state dental associations have an aligned Medicaid reform agenda across the Tripartite and by 2026, any state public affairs funding allocated for the Medicaid market is directed to move this agenda forward. -By 2030, all state Medicaid programs include an appropriately defined comprehensive adult dental benefits. -By 2030, fewer low-income adults report cost barriers to dental care. -By 2030, all state Medicaid programs will have sufficient provider networks. Baseline / Source: TMSIS, MEPS Data available</p>
			<p>2c. Dental insurance plans offered on ACA marketplaces will meet standards including comprehensive benefit, and minimum cost-sharing requirements (like separate dental deductibles), will be efficiently administered, and will have adequate reimbursement rates to support a sufficient provider network.</p>	<p>2c. -By 2030, all states establish oral health for adults as a required EHB in ACA health insurance marketplaces and adult oral health benefits with separate dental deductibles are required to be purchased. Baseline / Source: Staff assessment</p>
			<p>2d. If Medicare includes dental benefits, then the program should be sufficiently funded and efficiently administered, and the benefit should meet standards including range of services necessary to achieve and maintain oral health and minimum cost-sharing requirements in line with ADA policy.</p>	<p>2d. -By 2030, CMS adopts a payment system for dental services recommended by the ADA for those dental services intrinsically related to medical procedures covered by Medicare. If CMS further expands payment for dental services under Medicare, then ADA will work to assure that an appropriately defined range of services necessary to achieve and maintain oral health is included to assure necessary services can be accessed by beneficiaries. Baseline / Source: Staff Assessment</p>

			<p>2e. Vulnerable patients will be able to navigate care to establish a dental home.</p>	<p>2e. -By 2030, 30% of low-income adult Medicaid beneficiaries visit the dentist. -By 2030, at least 3 state Medicaid programs have a tool to help beneficiaries find open appointment times with participating dental providers. Baseline / Source: TMSIS, MEPS Data available</p>
		<p>3. Support a diverse, healthy, well-distributed, skilled and scoped workforce.</p>	<p>3a. Dentists and team members will be comfortable seeking mental health care and fewer will report burnout and levels of distress.</p>	<p>3a. -By 2030, based on the Well-Being Index (WBI) risk assessment data of most recent reassessments, decrease the number of participants distressed and struggling by 12%, therefore decreasing the risk of suicide. Baseline / Source: 2023 ADA sponsored Mayo WBI Index</p>
			<p>3b. Dentists will practice to the level of their competency, utilizing technology to support their practice. There will be a sufficient pipeline of allied team members such as hygienists, assistants and EFDA as needed within each state to optimize access to care under the supervision of the dentist in line with ADA policy.</p>	<p>3b. -By 2025, conduct necessary studies to establish policy along with a futuristic model dental practice act for what the dental team of the future looks like, including for public health/safety net workforce agreed upon by key stakeholders. -By 2025, ADA and state dental associations will have an aligned workforce legislative agenda across the Tripartite and by 2026, any state public affairs funding allocated for workforce issues will be directed to move this agenda forward. -By 2030, the pipeline of allied team members should be such that dental offices report that they are able to fill positions within x months. Baseline / Source: HPI Survey</p>
			<p>3c. Dental workforce will thrive as new practice models emerge including models within integrated healthcare systems in alignment with current ADA policy.</p>	<p>3c. -By 2025, initiate the process of identification of what the practice model of the future looks like including dentistry as part of primary care, agreed upon by identified key stakeholders and in alignment with ADA policy. -By 2030, deliver clinical support tools to enhance dentists' clinical</p>

				care and solutions to manage administrative functions for the office to increase practice efficiency for all practice models. Baseline / Source: Staff Assessment.
			3d. Dental workforce will be sufficient and appropriately distributed geographically, and education costs will not limit dentists from serving in underserved areas.	3d. -By 2030, a higher share of the U.S. population will have adequate geographic access to dentists, particularly populations in rural areas, and Medicaid populations. Baseline / Source: HPI Data Available
			3e. An adequate number of dental residency programs will exist to accommodate graduating dental students and such programs are sufficiently funded using federal / state dollars.	3e. -By 2030, there is sufficient and stable funding through HHS like the GME funding streams, for all primary care (GPR, AEGD) and dental specialty residency programs. Baseline / Source: Staff Assessment

Public Profession Table 3

Purpose	5-Year Goals	Outcomes	Objectives	Key Results
<p>4. Improve oral health.</p> <p>Ensure dentistry thrives in tomorrow's healthcare environment.</p>	<p>4. By 2030, the majority of clinicians are aware of new guidelines within 18 months of publication, and ADA and the ADA Forsyth Institute remain the leaders on research, guidelines, and standards for dentistry and oral health.</p> <p>Baseline/ Source: 42.1% adherence to guidelines [Unpublished calculated from 2023 Registry Sample].</p>	<p>4. Drive evidence-based, ethical quality care.</p>	<p>4a. ADA will publish evidence-based clinical practice guidelines and dental teams will continuously learn from care experience and research including their own performance to provide high-quality care.</p>	<p>4a. -By 2025, publish at least 1 evidence-based guideline every 18 months with at least x% of all practicing dentists aware of new guidelines within the next 6 months.</p> <p>-By 2029, at least top 5 practice management systems will provide clinical decision support tools and performance dashboards based on ADA guidelines at the point of care.</p> <p>Baseline / Source: Staff Assessment & Industry Survey</p>
			<p>4b. Medical colleagues will learn that oral health is a modifiable risk factor for overall health and EHR/EDR systems will allow multidisciplinary teams to coordinate care in support of whole person health.</p>	<p>4b. -By 2026, all key medical societies accept oral health as a modifiable risk factor for overall health.</p> <p>-By 2027, the Office of the National Coordinator for Health IT adopts a robust roadmap for clinical and administrative data exchange in dentistry including strategies to incentivize adoption of EHR's, safe and responsible incorporation of AI in clinical care</p>

				<p>and secure exchange of patient information.</p> <p>-By 2030, at least 50% of the dental EDR market is able to exchange data seamlessly between dental-dental and dental-medical systems to coordinate care.</p> <p>Baseline / Source: Staff Assessment & Industry Survey</p>
			<p>4c. The United States government and manufacturers will rely on ADA for standards and ethical guidance on technology including Artificial / Augmented Intelligence.</p>	<p>4c. -By 2030, the (1) Food and Drug Administration (FDA) recognizes at least 60% of applicable ADA and ADA-informed ISO standards to establish safety and efficacy of dental products, (2) ONC recognizes ADA interoperability standards for clinical and administrative data exchange, (3) CMS only uses Dental Quality Alliance measures for dental programs, and (4) Any federal agency and all national organizations developing standards that may impact practice of dentistry and patient safety rely on ADA for dental expertise.</p> <p>-By 2030, establish mechanisms to ensure that the use of AI-driven technologies in dentistry are ethically sound and meaningfully contribute to improvements in patient care and oral health.</p> <p>Baseline / Source: Staff Assessment and FDA Reports</p>