

# 2017

Transactions

158th Annual Session  
Atlanta, Georgia  
October 20–23, 2017

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American Dental Association  
211 East Chicago Avenue  
Chicago, Illinois 60611

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# Minutes of the Board of Trustees

February 19–21

May 7–9

August 13–15

September 16–18

October 24

November 21

December 4

## Notes

## Minutes of the Board of Trustees

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February 19–21, 2017

Headquarters Building, Chicago

**Call to Order:** The third regular meeting of the Board of Trustees of the American Dental Association was called to order by Dr. Gary L. Roberts, president, on Sunday, February 19, 2017, at 11:00 a.m. in the Board Room of the ADA Headquarters Building, Chicago.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Gary L. Roberts, Joseph P. Crowley, Irene Marron-Tarrazzi, G. Lewis Mitchell, Glen D. Hall, Ronald P. Lemmo, Kathleen T. O'Loughlin, Rickland G. Asai, Robert N. Bitter, Richard C. Black, Raymond A. Cohlma, Jeffrey M. Cole, Judith M. Fisch, Chad P. Gehani, Gary E. Jeffers, Daniel J. Klemmedson, Andrew J. Kwasny, Billie Sue Kyger, Kenneth McDougall, Kirk M. Norbo, Lindsey A. Robinson, Alvin W. Stevens, Jr., W. Roy Thompson. Dr. Cesar R. Sabates participated via telephone conference.

Following the roll call, Dr. Hall announced that a quorum was present.

The following ADA staff were in attendance for all or portions of the meeting at the invitation of the president: Marcelo Araujo, vice president, Science Institute; Jerome K. Bowman, chief, Governance and Strategy Management; J. Craig Busey, Esq., general counsel; James Goodman, vice president, Conferences and Continuing Education; Michael A. Graham, senior vice president, Government and Public Affairs; Stephanie Moritz, chief communications officer; David Preble, vice president, Practice Institute; Bill Robinson, vice president, Member and Client Services; Paul Sholty, chief financial officer; Michael D. Springer, senior vice president, Business and Publishing; Marko Vujcic, chief economist and vice president, Health Policy Institute; James Willey, senior director, Practice Institute; and Anthony Ziebert, senior vice president, Education/Professional Affairs.

Guests in attendance for a portion or portions of the meeting included: Dr. Michael Glick, editor, *The Journal of the American Dental Association*; Dr. David J. Fulton, Jr., chair, Advisory Committee on Annual Meetings; Dr. Emily R. Ishkanian, chair, New Dentist Committee; Dr. William Calnon, president and interim executive director, ADAF; Ms. Diane Knoepke, The Alford Group; Ms. Turi McKinley and Ms. Lindsey Mosby, Frog Design Inc. Dr. David Perrott, ADA representative to The Joint Commission Board, participated via telephone conference.

Others in attendance for all or portions of the meeting were: Tomisena Cole, senior manager, Board and House Matters; Thomas C. Elliott, Jr., Esq., deputy general counsel; Judith Jakush, editor, *ADA News*; Michelle Kruse, director, Administrative Services; Molly Potnick, coordinator, Board and House Matters; Robert Quashie, senior director, Business Analyst; Kyle Smith, manager, House of Delegates; and Wendy Wils, Esq., deputy general counsel. Other ADA staff members were in attendance for specific agenda items.

Before consideration of business, Dr. Roberts called attention to the ADA Disclosure Policy statement included on the meeting agenda and the requirement to disclose any conflicts of interest. No conflicts were disclosed at this time.

## Preliminary

### Approval of Agenda and Consent Items

*Approval of Agenda.* Before requesting approval of the agenda, Dr. Roberts asked if there were any items of new business. The following items of new business were identified:

- Limiting ADA vice president position to a new dentist
- Granting Board of Trustees access to standing committee folders and material on ADA Connect

Without objection the new items of business were added to the agenda and the amended agenda was adopted by general consent.

**B-1-2017. Resolved,** that the agenda, as amended, be approved as the official order of business for the current meeting of the Board of Trustees except that the President may alter the order of the agenda when necessary to expedite business.

*Approval of Consent Calendar.* Dr. Roberts reviewed the list of proposed consent items; the following report was removed from consent.

- Report on the Status of the 2017 Operating Contingent Fund

Without objection, the amended consent calendar was adopted.

**B-2-2017. Resolved,** that the resolutions contained on the Consent Calendar for Board of Trustees consideration, as amended, be approved and reports be filed.

### Approval of Minutes of Previous Sessions

*Minutes of the December 10–11, 2016, Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-3-2017. Resolved,** that the minutes of the December 10-11, 2016, meeting of the Board of Trustees be approved.

### Reports of Standing Committees of the Board of Trustees

**Report of the Audit Committee:** On behalf of the Committee, Dr. Gary Jeffers, chair, presented the report of the Audit Committee's February 18, 2017, meeting. The report identified major topics discussed, reports received and actions taken. This report included a Risk Assessment Update and Internal Audit Plan authored by the Association's internal auditor. Dr. Jeffers noted, that because of security concerns, hard copies of the complete Internal Audit Report External Penetration Assessment as of December 2016 would be provided to the Board upon request only.

Based on a request of the Task Force on Budget Authority for access to the August 2016 Budget and Financial Planning Report approved by the Committee in September 2016, Dr. Roberts asked the Board if there was any objection to making the Report available to Task Force members. Hearing no objection, distribution of the August 2016 Report to the Task Force on Budget Authority was approved.

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Jeffrey Cole, chair, presented the report of the Budget and Finance Committee's February 17, 2017, meeting. The report

identified major topics discussed, reports received and actions taken. The Committee presented its recommendations on the following resolutions for the Board of Trustees' consideration.

*Business Model Study.* Dr. Cole and Mr. Bill Robinson provided an update on the Business Model Study reporting that under the oversight of the Budget and Finance Committee, the ADA issued a comprehensive request for proposal to 17 potential vendors and 11 vendors responded. After interviewing finalist firms, the Committee recommended Frog Design to perform the study. On behalf of the Committee, Dr. Cole moved Resolution 17 with a recommendation to adopt.

Prior to consideration of Resolution 17, the Board of Trustees heard a presentation from Frog Design.

On vote, Resolution 17 was adopted by the Board of Trustees.

**B-17-2017. Resolved**, that staff is authorized to negotiate and execute a contract with Frog Design to undertake a study of the ADA business model pursuant to the ADA's request for proposal, at a price for consulting services and reimbursable expenses not to exceed \$1.5 million, and be it further

**Resolved**, that the expenditure of these funds be tracked in a separate cost center as part of the ADA Long Term Reserve Account with separate appropriate monthly reporting of activity and remaining Account balance.

*Contingent Fund Request—Council on Communications.* Dr. Cole moved Resolution B-10 with the Committee's recommendation to adopt; on vote Resolution B-10 was adopted by the Board of Trustees.

**B-10-2017. Resolved**, that the following appropriation be made from the 2017 Contingent Fund and be allocated to the line item in the listed cost center as noted below, in accordance with the terms of the supplemental appropriation requested:

*Division of Integrated Marketing and Communications*  
Cost Center: 090-1240-000  
Second in-person Council meeting - Up to \$25,000

*Contingent Fund Request—Council on Education/Professional Affairs.* On behalf of the Committee, Dr. Cole moved Resolution B-6 as amended by Committee with the recommendation to adopt. Hearing no objection, the Board adopted the proposed amendment to Resolution B-6.

**B-6. Resolved**, that the Department of Testing Services be requested to implement the DLOSCE business plan presented in Appendix 1, and be it further

**Resolved**, that the President appoint the DLOSCE Development Steering Committee (two Board members, one of whom shall serve as chair; two CDEL members, both of whom shall be general practitioners; two dentist educators with experience teaching comprehensive clinical dentistry; and two current dentist state dental board members) charged to oversee the development and validation of the DLOSCE that can replace current clinical licensure examinations, and be it further

**Resolved**, that contingent funds of \$287,500 be allocated to support initiation of the DLOSCE business plan in 2017, and be it further

**Resolved**, that funds be budgeted in 2018-2021 as outlined in Appendix 2 for the continued development of the DLOSCE, and be it further

**Resolved**, that progress on this program be reported to the Board of Trustees at its August 2017 meeting.



Subsequent to discussion that occurred during executive session, Dr. Crowley moved to amend the second resolving clause by inserting the word “ADA” between the words “two” and “Board members.” Hearing no objection, the amendment was adopted. On vote, Resolution B-6, as amended, was adopted by the Board of Trustees. Dr. Jeffers requested that the record reflect his abstention from the vote. Hearing no objection, the request that the minutes reflect Dr. Jeffers’ abstention was adopted by the Board of Trustees.

**B-6-2017. Resolved**, that the Department of Testing Services be requested to implement the Dental Licensure Objective Structured Clinical Examination (DLOSCE) business plan presented in Appendix 1, and be it further

**Resolved**, that the President appoint the DLOSCE Development Steering Committee (two ADA Board members, one of whom shall serve as chair; two CDEL members, both of whom shall be general practitioners; two dentist educators with experience teaching comprehensive clinical dentistry; and two current dentist state dental board members) charged to oversee the development and validation of the DLOSCE that can replace current clinical licensure examinations, and be it further

**Resolved**, that contingent funds of \$287,500 be allocated to support initiation of the DLOSCE business plan in 2017, and be it further

~~**Resolved**, that funds be budgeted in 2018-2021 as outlined in Appendix 2 for the continued development of the DLOSCE, and be it further~~

**Resolved**, that progress on this program be reported to the Board of Trustees at its August 2017 meeting.

Note. Appendix 1, Background and Rationale for Development, is confidential and filed with the reports of the February 2017 Board Meeting.

*Contingent Fund Request—Conferences and Continuing Education.* Dr. Cole moved Resolution B-15 with the Committee’s recommendation to adopt; on vote, Resolution B-15 was adopted by the Board of Trustees.

**B-15-2017. Resolved**, that the following appropriation be made from the 2017 Contingent Fund and be allocated to line items in stated cost center in accordance with the terms of the supplemental appropriation request for two trips related to the successful planning and execution of ADA hosting the 2019 FDI World Dental Congress.

*Division of Conferences and Continuing Education*

Cost Center: (090-1350-000)

Trips related to ADA hosting the 2019 FDI World Dental Congress - Up to \$60,000

*Report of Medicare Symposium Sponsorship.* On behalf of the Committee, Dr. Cole moved Resolution B-20, as editorially amended, with the recommendation to adopt; on vote, Resolution B-20 was adopted by the Board of Trustees.

**B-20-2017. Resolved**, that the following appropriation be made from the 2017 Contingent Fund and be allocated to line items in stated cost center in accordance with the terms of the supplemental appropriation request to co-sponsor the 2017 Symposium, Access for Older Adults: Advocating for Oral Health in Medicare, Part III.

*Practice Institute*

(Cost Center: 090-1500-000)

~~Consulting expenses~~ Sponsorship - Up to \$30,000

*Renaming Contingent Fund.* Dr. Cole moved Resolution B-21 with the Committee's recommendation to adopt; on vote, Resolution B-21 was adopted by the Board of Trustees.

**B-21-2017. Resolved**, that the "Contingent Fund" be renamed the "Board Contingency" in the *Organization and Rules of the Board of Trustees*.

*Report of Dr. Judith Fisch: Financial Request of the Dental Lifeline Network (DLN).* On behalf of the Committee, Dr. Cole moved Resolution B-18, as editorially amended, with the recommendation to adopt. Dr. Fisch reported that the DLN had sent a letter to Dr. O'Loughlin requesting consideration of the ADA's \$100,000/annual contribution, which had been the traditional ADA contribution until 2011, when it was reduced to \$50,000 annually. Several questions were asked regarding the ADA's relationship with DLN. Dr. Asai moved to postpone consideration of Resolution B-18 definitely. Dr. Crowley spoke against the motion to postpone. On vote, the motion to postpone definitely consideration of Resolution B-18 was not adopted. On vote, Resolution B-18 was adopted by the Board of Trustees.

**B-18-2017. Resolved**, that the following appropriation be made from the 2017 Contingent Fund and be allocated to the line item and stated cost center in accordance with the terms of the supplemental appropriation request.

~~Division of Administrative Services~~ *General Administration*

Cost Center: (190-1410-000)

Additional Funding in 2017 to the Dental Lifeline Network – Up to \$50,000

**Report of the Business Innovation Committee:** On behalf of the Committee, Dr. Andrew Kwasny, chair, presented the report of the Business Innovation Committee's February 17, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

**Report of the Compensation Committee:** This report was presented during the Board of Trustees executive session. In open session, the following resolutions were considered and adopted without objection by the Board of Trustees.

**B-26-2017. Resolved**, that the timing of the performance evaluation of the Executive Director occur such that it includes review of the full prior year's financial performance and also best allows evaluation findings to be applied to influence current year's operating goals to the greatest extent possible, and be it further

**Resolved**, that the 2017 Executive Director performance evaluation be conducted through a special telephonic meeting of the board to occur at a time between March 20 and March 31, 2018.

**B-27-2017.** (Confidential Action)

**Report of the Diversity and Inclusion Committee:** On behalf of the Diversity and Inclusion Committee, Dr. Andrew Kwasny, chair, presented the report of the Committee's February 18, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

**Report of the Governance Committee:** On behalf of the Governance Committee, Dr. Red Stevens, chair, presented the report of the Committee's February 17, 2017, meeting. The report identified major topics discussed, reports received and actions taken. On behalf of the Committee, Dr. Lindsey Robinson, chair of the Board Rules Subcommittee, presented recommendations on the following resolutions for the Board of Trustees' consideration.

*Advisory Committee on Annual Meetings.* Dr. Robinson moved Resolution B-22 with the Committee's recommendation to adopt; on vote, Resolution B-22 was adopted by the Board of Trustees.

**B-22-2017. Resolved**, that the *Organization and Rules of the Board of Trustees* be amended to include the following passage concerning the Advisory Committee on Annual Meetings (additions underscored) (*Board Rules*, page 7):

### STANDING COMMITTEES

The Board of Trustees has the following standing committees:

\* \* \*

**Advisory Committee:** New Dentist Committee. Selections for the New Dentist Committee shall be in accordance with the *Bylaws*.

**Advisory Committee on Annual Meetings.** Selection of members for the Advisory Committee on Annual Meetings shall be in accordance with the selection criteria and process set forth in the charter of the committee.

*Trustee Nominations to Councils and Commissions.* Dr. Robinson moved Resolution B-23 with the Committee's recommendation to adopt; on vote, Resolution B-23 was adopted by the Board of Trustees.

**B-23-2017. Resolved**, that each Trustee District of the American Dental Association is encouraged to consider the practices and procedures used within the District for nominations to ADA councils and commissions by the District's Trustee and, in light thereof, whether the District wishes to consider providing guidance relating to the nomination of family members, business affiliates or other like-related individuals so that the likelihood of any perception or appearance of favoritism can be minimized.

*SPA Oversight Committee Charter.* Dr. Robinson moved Resolution B-24 with the Committee's recommendation to adopt; on vote, Resolution B-24 was adopted by the Board of Trustees.

**B-24-2017. Resolved**, that the charter of the SPA Oversight Committee be amended as follows (additions underscored, deletions ~~stricken through~~):

#### **SPA Oversight Committee**

The Board of Trustees has been charged with administering the State Public Affairs (SPA) program created by the House of Delegates. Day to day responsibility of the program has been delegated to the Council on Government Affairs with support of the Council on Communications. Board oversight of the program is provided through the SPA Oversight Committee. The charter of the SPA Oversight Committee is as follows:

#### *Purpose, Powers and Duties:*

1. To provide volunteer oversight to the State Public Affairs Program (SPA), focusing on allocation of SPA grants to a state or for the benefit of multiple states. ~~Among the states and developing criteria for the selection of states in the program.~~
2. To develop criteria for selection of states in the program.
23. To annually select appropriate areas of focus for the SPA program, in consultation with the Council on Government Affairs and staff from State Government Affairs.

With the remaining paragraph numbers of the SPA Oversight Charter being renumbered accordingly.

*FDI Delegation Proposed Change to the Organization and Rules of the Board of Trustees.* Dr. Stevens moved Resolution B-11 with the Committee's recommendation to adopt; on vote, Resolution B-11 was adopted by the Board of Trustees.

**B-11-2017. Resolved**, that the paragraph titled, “FDI WORLD FEDERATION DELEGATION” in the section on POLICIES ON NOMINATIONS, APPOINTMENTS AND CONSULTANTS of the *Organization and Rules of the Board of Trustees*, be amended as follows (new language underscored; deletions stricken):

**FDI World Dental Federation Delegation:** Subject to funding allocated in the approved budget, the ADA/FDI Delegation shall consist of 10 delegates. The delegates shall be the current President, the President-elect, the Immediate Past President, the Previous Immediate Past President, a fourth-year trustee, a third-year trustee, a second-year trustee, a first-year trustee, the USA National Liaison Officer, who shall serve as chair and spokesperson, and a presidential appointee. Subject to funding allocated in the approved budget, there shall be two alternate delegates ~~the Executive Director and one additional presidential appointee who are~~ ADA members that shall be appointed by the President. ~~who and may be a members of the ADA with broad international experience.~~ In the event a smaller delegation is funded in any given year, the President shall choose the delegates from among the full delegation.

In the event a delegate position becomes vacant, the President shall appoint an ADA ~~trustee~~ representative for the unexpired portion of the term.

Within sixty (60) days following the close of the annual congress of the FDI World Dental Federation, the USA National Liaison Officer shall submit a written report containing observations and/or recommendations from the delegation that will be of assistance to the Board of Trustees in guiding the course of the Association’s future relationship to the FDI.

The Board shall annually appropriate a sum to finance the delegation.

*Process for Certificate for International Volunteer Service.* Dr. Stevens moved Resolution B-12 with the Committee’s recommendation to adopt; on vote, Resolution B-12 was adopted by the Board of Trustees.

**B-12-2017. Resolved**, that the eligibility criteria and process for awarding the Certificate for International Volunteer Service be adopted, and be it further

**Resolved**, that Governance Committee include the criteria and process in the *Organization and Rules of the Board of Trustees*.

The Governance Committee report included a draft Board Report regarding Potential Council on Dental Education and Licensure Restructuring. The Committee approved a motion to transmit the draft report to the Board, not for approval at this time, but for comment and direction. The Committee asked that Board members submit comments on the report to staff. The Committee will consider comments and revisit the report in May or August. In addition, the Committee suggested that the Board may wish to consider asking leadership to consult with CDEL leaders prior to the Board taking any final action.

**Report of the Information Technology Committee:** On behalf of the Information Technology Committee, Dr. Andrew Kwasny, chair, presented the report of the Committee’s February 17, 2017, meeting. The report identified major topics discussed, reports received and actions taken. The report included the Technology Adoption Plan which identified major IT projects in process for a three-year timeframe along with any deployment risks.

*ADA Connect Demonstration and Update on Video Conferencing.* Ms. Carma Shurley, project manager, Web Development, Department of Content and Data Management Solutions, gave a demonstration on the new look and functionality of the ADA Connect site that will be rolled-out to members later in the year. Updates include improved user experience, documentation standards, and mobile access. An update on Video Conferencing was not provided at this meeting.

**Report of the Strategic Planning Committee:** On behalf of the Committee, Dr. Jeffrey Cole, chair, presented the report of the Strategic Planning Committee's February 17, 2017, meeting. The report identified major topics discussed, reports received and actions taken. The report included the slide deck used in a December 2016 presentation by HPI on the State of the U.S. Dental Care Market.

Dr. Cole moved Resolution B-25 with the Committee's recommendation to adopt; on vote, Resolution B-25 was adopted by the Board of Trustees.

**B-25-2017. Resolved,** that item 3, under Powers, in the Strategic Planning Committee charter be amended to read as follows:

3. Review the Quarterly Management Report as a comprehensive report to the Board on progress under the strategic plan on a quarterly basis.

and be it further

**Resolved,** that the Governance Committee is authorized to make conforming changes to the Board Rules.

**Report of the Pension Committee:** On behalf of the Committee, Dr. Ron Lemmo, chair, presented the report of the Committee's December 14, 2016, meeting. The report identified major topics discussed and actions taken (consent calendar item).

**Report of the Pension Committee:** On behalf of the Committee, Dr. Ron Lemmo, chair, presented the report of the Committee's February 16, 2017, special joint meeting with the Standing Committee on Budget and Finance. The report identified major topics discussed and actions taken (consent calendar item).

## **Reports and Resolutions to the Board of Trustees**

### **Communications and Marketing**

**Report of the Council on Communications: Update on Resolution 67H-2016: Drive Utilization of Dental Services for ADA Members:** This informational report provided an update on 67H-2017 that calls for a three-year campaign to increase dental visits for ADA dentists.

**Report of the Chief Communications Officer: ADA Spokesperson Candidates:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-4-2017. Resolved,** that the following ADA national spokesperson candidates be invited to serve as a spokesperson through the 2017 ADA annual meeting.

*Consumer Advisors*

Brittany Seymour, D.D.S., M.P.H., Boston, MA

Tyrone Rodriguez, D.D.S., Yakima, WA

*Expert Advisors*

Rico Short, D.M.D., Powder Springs, GA (Endodontics)

Thomas Sollecito, D.M.D., Philadelphia, PA (Oral Medicine)

### **Conferences and Continuing Education**

**Report of the Committee on Annual Meetings: 2018 Chair Nominations:** The Board of Trustees, at its December 2016 meeting, adopted Resolution B-152-2016, which, in part, asked the Advisory Committee on Annual Meetings to forward to the Board by the end of January 2017 three nominations each for chair, to

serve as 2017–18 chair, and vice chair, to serve as 2018–19 chair. On behalf of the Committee on Annual Meetings, Dr. David Fulton, chair, presented Resolution B-19, which included the following list of nominees, for the Boards' consideration:

Dr. Howard I.A. Lieb  
Dr. C. Roger Macias  
Dr. Andrea Richman

**B-19. Resolved**, that \_\_\_\_\_ is selected as the 2017-18 chair of the Advisory Committee on Annual Meetings,

and be it further

**Resolved**, that the nomination for the position of the 2017-18 vice chair be postponed definitely until a permanent charter for the Advisory Committee on Annual Meetings is adopted by the Board of Trustees.

Following a discussion that occurred during a closed session, the Board balloted on the nominations to select the 2017–18 chair. On vote, Resolution B-19, as amended, was adopted.

**B-19-2017. Resolved**, that Dr. Howard I. A. Lieb, is selected as the 2017-18 chair of the Advisory Committee on Annual Meetings, and be it further

**Resolved**, that the nomination for the position of 2017-18 vice chair be postponed definitely until a permanent charter for the Advisory Committee on Annual Meetings is adopted by the Board of Trustees.

**Committee on Annual Meetings Charter:** The following resolution was presented for the Board's consideration. A motion was made to postpone definitely Resolution B-16. On vote, the motion to postpone definitely consideration of Resolution B-16 until the May Board meeting was adopted.

**B-16. Resolved**, that the Board of Trustees approves the Committee on Annual Meetings Interim Charter as outlined in this report.

**Report of the Department of Continuing Education: Short Video Series Update:** In response to Resolution B-87-2016, the Department of Continuing Education provided an informational report on the feasibility of launching a series of easy-to-access, short video presentations of clinical procedures.

## **Education/Professional Affairs**

**Progress Report of the Task Force on Specialty and Specialty Certifying Board Recognition:** Dr. Ziebert provided an update on progress made to date by the Recognition Task Force. The Task Force will submit its final report to the August Board.

**Update on the ADA Credentialing Service:** This informational report provided an update on the ADA Credentialing project that included an ADA Credentialing Service Relaunch Timeline.

**Consideration of CODA Public Member Nominees Recommended by the Council on Dental Education and Licensure:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-5-2017. Resolved,** that the nominations of Dr. Linda Casser and Dr. Linda Hatzenbuehler to serve as public members on the Commission on Dental Accreditation Board of Directors be transmitted to Dr. Harold Mark Livingston, chair, Commission on Dental Accreditation.

**Report of the Commission on Dental Accreditation: Informational Report on 2016 Research and Development Fund:** This informational report provided a summary (January through November) on the 2016 Research and Development Fund activity and estimated 2017 expenses (consent calendar item).

**Report of the Joint Commission on National Dental Examinations: Informational Report on 2016 Research and Development Fund:** This informational report provided a summary (January through December) on the 2016 Research and Development Fund activity (consent calendar item).

## Finance and Operations

**Report on the Final Status of the 2016 Operating Contingent Fund.** It was reported that a Contingent Fund of \$1 million was authorized in the 2016 budget. In 2016, the Board of Trustees approved total supplemental requests in the amount of \$708,100, leaving a balance of \$291,900 (consent calendar item).

**Informational Report Regarding Officer Approval of Expenditures from Capital Replacement Reserve.** In compliance with Board Resolution B-58-2015, Capital Reserve Spending Approval Process, the Budget and Finance Committee submitted the following summary of approvals of spending from the capital replacement reserve fund (consent calendar item).

1. Approved capital expenditures in the amount \$438,970 for a tenant lease expansion in the ADA Chicago HQ building.

Because the total capital expenditure for this lease expansion is less than \$500,000, this request was submitted for approval to the President, President-elect and Treasurer with a recommendation for approval. The President, President-elect and Treasurer voted on November 18 and 19, 2016 to approve these expenditures.

**Report on the Status of the 2017 Operating Contingent Fund.** It was reported that a Contingent Fund of \$1 million was authorized in the 2017 budget. The Board of Trustee approved one set of total supplemental requests in the amount of \$372,500, leaving a balance of \$314,844. Mr. Paul Sholty reported that with the adoption of Resolutions B-18, B-20, and B-24 the Board had approved an additional \$410,000 in spending leaving a remaining balance of \$217,500.

## Government and Public Affairs

**Report of the Senior Vice President, Government and Public Affairs: Federal and State Legislative, Regulatory and Public Affairs Update:** Mr. Graham provided an update on developments in Washington, D.C. The following key issues were identified in this report: Affordable Care Act Reform, Regulatory Reform, State Activity, and ADPAC. The report included a report of SPA program expenditures as of January 6, 2017.

**Report of the Senior Vice President, Government and Public Affairs: Action for Dental Health Update:** This informational report provided a summary of prioritized initiatives, which include the Community Dental Health Coordinator program, Medicaid, Community Water Fluoridation and ER Referral programs, as well as key research learnings, successes in 2016 and 2017 integrated marketing objectives and strategies (consent calendar item).

**Report of the Workgroup to Study Issues Relative to Native American Tribal Efforts: ACA Provision Related to Dental Therapists on Tribal Lands:** In response to Resolution B-164-2016 that created a Board Workgroup to study Medicaid reimbursement in tribal lands, Dr. Daniel Klemmedson, chair, presented a

confidential report on the Workgroup's findings. Other members of the Workgroup were: Dr. Judith Fisch, Dr. Rickland Asai, and Dr. Kirk Norbo.

## **Legal Affairs**

**Report of the Division of Legal Affairs: Summary of Litigation and Other Matters:** This confidential report was provided for the Board's information (consent calendar item).

## **Member and Client Services**

**Report on the Feasibility of Connecting ADA Members with Financial and/or Legal Advisors:** This informational report provided an update on the Division of Member and Client Services (DMCS) creation of a list of recommended financial and legal advisers available for members through the ADA (consent calendar item).

## **Practice Institute**

**Report of the Council on Dental Practice: ADA Standards Volunteer Awards Program:** The Board of Trustees adopted the following resolutions (consent calendar action).

**B-8-2017. Resolved,** that the 2016 Standards Committee on Dental Products volunteer award be presented to Mr. Bruce Schemehorn.

**B-9-2017. Resolved,** that the 2016 Standards Committee on Dental Informatics volunteer award be presented to S. Brent Dove, D.D.S.

**Report of the Council on Dental Practice: Status of Policy Development Related to Dentistry's Role in Sleep-Related Breathing Disorders:** This informational report provided an update on activities related to Resolution 96H-2015, which directed the ADA to develop policy on dentistry's role in sleep related breathing disorders. The Council reported on the draft policy presented to the full Council during its December 2016 meeting. Interest in the draft policy was expressed by several individual dentists and dental organizations during this development period. In anticipation of widespread interest in the policy and desire for inclusion and transparency, CDP determined the draft should be circulated for all interested party review prior to its next Council meeting in May 2017. The evidence brief and draft policy can be downloaded online at <http://www.ada.org/sleepapnea> where comments can also be electronically filed.

**Update on Dental Quality Alliance Activities:** This informational report provided an update on recent activities of the DQA, as well as notable activities from 2016 (consent calendar item).

**Electronic Health Records Interagency Workgroup Update:** This informational report provided an update on the activities of the Workgroup. Due to recent organizational changes, the EHR-IW members determined at its December 5, 2016 meeting that the group's task is complete. The group passed a unanimous resolution to sunset EHR-IW at the earliest possible time (consent calendar item).

**Report of the Liaison to The Joint Commission: Governance Changes:** Dr. David Perrott, ADA Representative to the Joint Commission Board, participated via conference call on the discussion of the Joint Commission's proposed changes to its Bylaws. After Dr. Perrott left the meeting, Dr. Bitter moved Resolution B-7. On vote, Resolution B-7 was adopted by the Board of Trustees.

**B-7-2017. Resolved,** that the ADA support the proposed changes to The Joint Commission Board bylaws.

## **ADA Business Enterprises, Inc.**



**Report of ADABEI:** This informational report provided a summary of 2016 activities through November (consent calendar item).

## **ADA Foundation**

**Report of the ADA Foundation on (1) The Alford Group's Philanthropic Market Assessment and (2) the Report of the Blue Ribbon Panel:** The report, presented by Dr. William Calnon, president and interim executive director, ADAF and Mrs. Diane Knoepke, Alford Group Consultant, was considered during an executive session of the Board of Trustees. In open session, the following resolutions were considered and adopted without objection by the Board of Trustees.

**B-13-2017. Resolved,** that the ADA Board of Trustees directs the ADA President to formally communicate to the ADA Foundation and the National Institute of Standards and Technology, the ADA's commitment to "annually furnishing sufficient financial support, as an addition to generated non-Association funding, to assure the continued viability of the Foundation's research activities" immediately.

**B-14-2017. Resolved,** that the ADA Board of Trustees approves the grant request from the ADA Foundation for Volpe Research Center lab equipment upgrades for an amount not to exceed \$300,000 to be made from the 2017 Contingent Fund to the appropriate ADAF cost center.

**B-28-2017. Resolved,** that the ADA Board of Trustees make a request to the ADA Foundation for a detailed set of three year actual results as compared to budget (2015, 2016, 2017 year to date) and financial projections (2017, 2018, 2019) for the ADA Foundation with separate detail by division including the Volpe Research Center by March 31, 2017.

## **Organizational/Other**

**Report of the President and President-elect: Direction to the New Dentist Committee:** Dr. Crowley presented the following resolution for the Board of Trustees consideration.

**B-161 (2016). Resolved,** that the Board thanks the New Dentist Committee for its report to the Board on its areas of focus for 2017, and be it further

**Resolved,** that the Board directs the Committee to focus its efforts on advising the Board on issues affecting the decision of new dentists to join or renew membership, and be it further

**Resolved,** that the Board asks that the Committee address whether it can effectively, and should, focus on new dentist membership issues through state and local societies within each Committee member's district and report back to the Board prior to the 2017 House of Delegates.

At the December 2016 meeting, Resolution B-161 was postponed definitely to the February 2017 Board meeting. In December, it was suggested that the New Dentist Committee be provided with an opportunity to meet among themselves and assess how much they think they can do and report back to the Board at its February meeting. On behalf of the New Dentist Committee, Dr. Gary Jeffers, trustee liaison, New Dentist Committee, shared with the Board comments provided by the chair of the New Dentist Committee. The New Dentist Committee asked the Board to consider the importance of the Committee sharing responsibility of fostering leadership and asked the Board to discuss what direction to give the Committee to address both the members versus leadership focus and whether the Committee members have capacity to truly have an impact at the state and local level. Discussion ensued on the comments provided by the New Dentist Committee.

After discussion, Dr. Crowley moved to amend Resolution B-161 by striking the last resolved clause. On vote, the pending amendment was adopted. On vote, Resolution B-161 as amended was adopted.

**B-161-2016. Resolved**, that the Board thanks the New Dentist Committee for its report to the Board on its areas of focus for 2017, and be it further

**Resolved**, that the Board directs the Committee to focus its efforts on advising the Board on issues affecting the decision of new dentists to join or renew membership., ~~and be it further~~

~~**Resolved**, that the Board asks that the Committee address whether it can effectively, and should, focus on new dentist membership issues through state and local societies within each Committee member's district and report back to the Board prior to the 2017 House of Delegates.~~

The Board discussed the value of requiring one or both of the vice president positions being filled by a new dentist. A district may bring forward a resolution for submission by the 2017 House of Delegates. If not, the Board directed that the Governance Committee be prepared to develop a resolution, with the appropriate *Bylaws* language, in time for the August 2017 meeting.

**Report of the President:** Dr. Gary Roberts presented an oral report that summarized his activities since the December Board meeting.

**Report of the President-elect:** Dr. Joseph Crowley gave an oral report of meetings attended and trips taken since the December Board meeting.

**Report of the Executive Director:** Dr. Kathleen O'Loughlin provided an update on ADA staff efforts to identify which Association projects include an interprofessional component in the operating plan.

## Liaison Reports

**Report of Dr. Red W. Stevens: Liaison to the Committee on Annual Meetings:** This report was presented in a closed session.

**Report of Dr. Raymond Cohlma, Liaison to the American Student Dental Association:** This informational report summarized the January 21–22, 2017, ASDA meeting (consent calendar item).

**Report of Dr. Raymond Cohlma, Liaison to the Commission on Dental Accreditation:** This information report summarized the February 1–3, 2017, CODA meeting (consent calendar item).

**Report of Dr. Rickland G. Asai, Liaison to the Council on Advocacy for Access and Prevention:** Dr. Asai reported on his attendance at the January 12–14, 2017, CAAP meeting.

**Report of Dr. Daniel Klemmedson, Liaison to the Council on Scientific Affairs:** Dr. Klemmedson reported on his attendance at the February 9–10, 2017, CSA meeting.

## Special Orders of Business/Special Appearances

**New Dentist Committee Update:** Dr. Emily Ishkanian, chair, New Dentist Committee presented a report on the New Dentist Committee's February 17–18, 2017, meeting. The New Dentist Committee participated in a joint strategic session with the Board of Trustees on Sunday, March 19, 2017 to discuss effective ways to leverage the new dentist voice in ADA governance.

**Membership Update:** Dr. Bill Robinson, vice president, Member and Client Services reviewed the year-end numbers for 2016. Active-licensed members saw a net increase of 1,276 and market share held steady at 63.6%. While instituting provisional membership contributed significantly to these gains, there are several

other positive signs of membership success. Non-renew rates declined both in full dues payers (from 4.3% to 4.0%) and all active members (from 6.1% to 5.6%). Market shares held steady or slightly increased across most of the ten year age bands of members. New dentist market share increased to 66.3%. These increases can be attributed to a number of factors including increased efficiency from Aptify, strong collaboration with the state societies and more impactful marketing. This success is important, but the Business Model Reconsideration project is necessary to truly reverse our current membership trends.

**Presentation—Frog Design Inc.:** Prior to the presentation, Mr. Bill Robinson and Dr. O'Loughlin gave introductory remarks regarding the Business Model Study and RFP process reporting that, pursuant to B-69-2016, the Budget and Finance Committee had selected Frog Design, a global product strategy and design firm, as its recommended outside consultant firm to evaluate the business model of the ADA. Frog Design was recommended to perform the study because of their impressive credentials with significant companies, personal connections to dentistry, case studies focused on developing long term loyalty, good cultural fit with the ADA, and unique methodology. Ms. Turi McKinley, executive director, Frog Design, and Ms. Lindsey Mosby, vice president, strategy and frogHealth, Frog Design presented a company overview and high-level vision for the ADA over a 17-week timeframe. The proposed approach, as outlined by Frog Design, is to work with the ADA to define the member-centered vision and forward-looking strategy which will reshape future relationships with members.

**Presentation—New Tenant Introduction:** The ADA entered into a lease agreement with Children's Hospital. Mr. Patrick M. Magoon, President and CEO, Ann & Robert Lurie Children's Hospital and Mr. Eric Hoffman, senior director, Facility Services, Ann & Robert Lurie Children's presented an overview of their relocation and construction plan.

## **New Business**

Hearing no objection, the Board considered an item of new business requesting an additional New Dentist Committee meeting. Dr. Marron-Tarrazzi presented the following resolution for the Board's consideration. On vote, Resolution B-29 was adopted by the Board of Trustees.

**B-29-2017. Resolved,** that if the New Dentist Committee feels it is necessary, the Board fund up to \$30,000 for an additional meeting for NDC in 2017 from the Board Contingency.

*Virtual Study Club.* The Board urged the Executive Director to direct the appropriate resources to move forward with developing a virtual study club as a pilot project and that the New Dentist Committee be informed of this action. In addition, the Board directed that usage be tracked and reported to the Board so that a final decision can be made on continuing the project.

The Board considered an item of new business requesting that all Board members have access to non-confidential meeting materials of the Board's Standing Committees in order to have a full understanding of the issues being discussed. This issue was referred to the Governance Committee for consideration with a recommendation to the Board at its May 2017 meeting.

## **Closed Session**

Closed sessions of the Board of Trustees were held at various times during the February 19–21, 2017, meeting of the Board of Trustees. The minutes of the closed sessions are separately recorded; however, non-confidential actions taken by the Board are reflected in the minutes of the open session. The following reports were considered during the closed sessions:

- Report of Dr. Red Stevens, Liaison to the Committee on Annual Meetings
- Appearance of Dr. David Fulton, chair, Committee on Annual Meetings
- Report of the Compensation Committee

- Appearance of Mr. Jim Wiggett, chief executive officer, Jackson Hole Group

**Adjournment**

Without objection, the third regular meeting of the Board of Trustees adjourned *sine die* on Tuesday, February 21, 2017 at 11:01 a.m.

## Minutes of the Board of Trustees

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May 7–9, 2017

Headquarters Building, Chicago

**Call to Order:** The fourth regular meeting of the Board of Trustees of the American Dental Association was called to order by Dr. Gary L. Roberts, president, on Sunday, May 7, 2017, at 8:30 a.m. in the Board Room of the ADA Headquarters Building, Chicago.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Gary L. Roberts, Joseph P. Crowley, Irene Marron-Tarrazzi, G. Lewis Mitchell, Glen D. Hall, Ronald P. Lemmo, Kathleen T. O'Loughlin, Rickland G. Asai, Robert N. Bitter, Richard C. Black, Raymond A. Cohlma, Jeffrey M. Cole, Judith M. Fisch, Chad P. Gehani, Gary E. Jeffers, Daniel J. Klemmedson, Andrew J. Kwasny, Billie Sue Kyger, Kenneth McDougall, Kirk M. Norbo, Lindsey A. Robinson, Cesar R. Sabates, Alvin W. Stevens, Jr., and W. Roy Thompson.

Following the roll call, Dr. Hall announced that a quorum was present.

The following ADA staff were in attendance for all or portions of the meeting at the invitation of the president: Marcelo Araujo, vice president, Science Institute; Jerome K. Bowman, chief, Governance and Strategy Management; J. Craig Busey, Esq., general counsel; Judith Fleeks, director, Talent, Compensation and Employee Relations; James Goodman, vice president, Conferences and Continuing Education; Michael A. Graham, senior vice president, Government and Public Affairs; Stephanie Moritz, chief communications officer; David Preble, vice president, Practice Institute; Bill Robinson, vice president, Member and Client Services; Paul Sholty, chief financial officer; Michael D. Springer, senior vice president, Business and Publishing; Marko Vujicic, chief economist and vice president, Health Policy Institute; James Willey, senior director, Practice Institute; and Anthony Ziebert, senior vice president, Education/Professional Affairs.

Guests in attendance for a portion or portions of the meeting included: Dr. Michael Glick, editor, *The Journal of the American Dental Association*; Dr. Emily R. Ishkanian, chair, New Dentist Committee; Dr. William Calnon, president and interim executive director, ADA Foundation; Ms. Turi McKinley and Mr. Geoffrey Schwartz, Frog Design Inc.; and Dr. Tom Hart, senior director, Volpe Research Center. Dr. Eric Lin, chief, Materials Science and Engineering Division, National Institute of Standards and Technology, participated via telephone conference.

Others in attendance for all or portions of the meeting were: Tomisena Cole, senior manager, Board and House Matters; Thomas C. Elliott, Jr., Esq., deputy general counsel; Judith Jakush, editor, *ADA News*; Michelle Kruse, director, Administrative Services; Molly Potnick, coordinator, Board and House Matters; Robert Quashie, senior director, Business Analyst; Kyle Smith, manager, House of Delegates; Wendy Wils, Esq., deputy general counsel; and Mr. Robert Zinn, director, Accounting and Reporting. Other ADA staff members were in attendance for specific agenda items.

Before consideration of business, Dr. Roberts called attention to the ADA Disclosure Policy statement included on the meeting agenda and the requirement to disclose any conflicts of interest. No conflicts were disclosed at this time.

## Preliminary

### Approval of Agenda and Consent Items

*Approval of Agenda.* Before requesting approval of the agenda, Dr. Roberts asked if there were any items of new business. The following item of new business was identified:

- Additional ADA Honorary Membership nomination

Without objection the new item of business was added to the agenda and the amended agenda was adopted by general consent.

**B-33-2017. Resolved,** that the agenda, as amended, be approved as the official order of business for the current meeting of the Board of Trustees except that the President may alter the order of the agenda when necessary to expedite business.

*Approval of Consent Calendar.* Dr. Roberts reviewed the items on the proposed consent calendar; no items were removed from the consent calendar. On vote, the Board adopted the following resolution.

**B-34-2017. Resolved,** that the resolutions contained on the Consent Calendar for Board of Trustees consideration be approved and reports be filed.

### Approval of Minutes of Previous Sessions

*Minutes of the February 19–21, 2017, Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-35-2017. Resolved,** that the minutes of the February 19–21, 2017, meeting of the Board of Trustees be approved.

### Reports of Standing Committees of the Board of Trustees

**Report of the Audit Committee:** On behalf of the Committee, Dr. Gary Jeffers, chair, presented the report of the Audit Committee's May 6, 2017, meeting. The report identified major topics discussed, reports received and actions taken. The report included the consolidated draft audited financial statements as of December 31, 2016, as part of the internal audit plan for the ADA, performed by the Association's internal auditor. The following resolutions were considered and adopted by general consent by the Board of Trustees.

**B-50-2017. Resolved,** that the draft audited 2016 consolidated financial statements and supplemental schedules of the ADA and subsidiaries be approved and final copies thereof be released for posting.

**B-51-2017. Resolved,** that the draft Headquarters Building Operating Expense Report as of December 2016 be approved.

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Jeffrey Cole, chair, presented the report of the Budget and Finance Committee's May 5, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

*Update on the Business Model Study.* Dr. Cole gave an update on conference call scheduling tied to project milestones and referred to the Frog Design presentation for a more detailed update on the business model project. (See Frog Design Presentation—Update on Business Model Project on page 158).

*Approval of Quarterly Financial Statements.* Dr. Cole moved Resolution B-48 with the Committee's recommendation to adopt; on vote, Resolution B-48 was adopted by the Board of Trustees.

**B-48-2017. Resolved,** that the ADA quarterly financial statements as of December 31, 2016 and March 31, 2017 be filed and posted in the appropriate delegates section.

*Report on the Status of the 2017 Board Contingency.* Mr. Robert Zinn reported information on the contingent fund of \$1 million that was authorized in the 2017 budget. Prior to this meeting the Board approved total requests in the amount of \$888,925 leaving a balance of \$115,075. Later in the meeting, following the Report of the Budget and Finance Committee, Mr. Zinn reported an updated approved funds balance of \$1.366 million.

*Board Contingency Request: ADA/ADEA Licensure Task Force.* Dr. Cole reported that the Committee made no recommendation regarding Resolution B-30. On behalf of the ADA/ADEA Licensure Task Force, Dr. Jeffers moved Resolution B-30. On vote, Resolution B-30 was adopted by the Board of Trustees.

**B-30-2017. Resolved,** that the ADA Board of Trustees supports the three recommendations of the ADA-ADEA Joint Licensure Task Force, as reported in May 2017 Progress Report of the Joint ADA-ADEA Licensure Task Force to the Board of Trustees.

Dr. Cole moved Resolution B-31, as revised for format and to reflect division and cost center, with the Committee's recommendation to adopt. On vote, the Board of Trustees adopted Resolution B-31 as amended.

**B-31-2017. Resolved,** that the following appropriation be made from the 2017 Board Contingency and be allocated to line items in stated cost center in accordance with the terms of the supplemental appropriation request to support the ADA's continued involvement in the ADA/ADEA/ASDA Coalition for Reform in Dental Licensure in 2017.

*Division of Education and Professional Affairs*

Cost Center: (090-1600-000)

**Support ADA's continued involvement in the ADA/ADEA/ASDA Coalition for Reform in Dental Licensure - Up to \$33,680**

On behalf of the Committee, Dr. Cole moved Resolution B-32 and reported that the Committee made no recommendation regarding Resolution B-32. The Board discussed concern over the resolution setting a precedent different than the current budget process supported by the Board. Dr. Robinson spoke in support of the resolution and felt it established an ability to budget beyond one year. On vote, Resolution B-32 was not adopted.

**B-32. Resolved,** that funds be included in 2018 submissions for ongoing support of the ADA/ADEA/ASDA Coalition for Reform in Dental Licensure.

*Board Contingency Request: IT – Enterprise Reporting and Analytics Expert Consultants.* Dr. Cole moved Resolution B-37 with the Committee's recommendation to adopt. Ms. Toni Mark reported on the need for appropriating funds from the 2017 Board Contingency to cover the costs of securing consultants to complete the Enterprise Reporting and Analytics project. In a discussion, several Board members expressed concern about Board Contingency spending. Dr. Lemmo clarified, citing traditional historical perspective, the difference between allocated funds and funds spent. On vote, Resolution B-37 was adopted.

**B-37-2017. Resolved,** the following appropriation be made from the Board Contingency and be allocated to line items in stated cost center in accordance with the terms of the supplemental

appropriation request to cover the costs of securing consultants to complete the Enterprise Reporting and Analytics project.

Division of Information Technology  
(Cost Center: 090-1450-000)

**Enterprise Reporting and Analytics Expert Consultants – Up to \$256,000**

*Board Contingency Request: Expert Consulting for Aptify Web Upgrade.* Dr. Cole moved Resolution B-38 with the Committee's recommendation to not adopt. Ms. Mark reported that the requested funds were no longer needed to complete the project due to a recent negotiation. On vote, Resolution B-38 was not adopted.

**B-38. Resolved**, that the following appropriation be made from the Board Contingency and be allocated to line items in stated cost center in accordance with the terms of the supplemental appropriation request to cover the costs of completing the Aptify Web Upgrade.

Division of Information Technology  
(Cost Center: 090-1450-000)

**Expert Consulting for Aptify Web Upgrade – Up to \$135,000**

*Board Contingency Request: Expert Consulting for NetSuite Financial Software Application Architect.* Dr. Cole moved Resolution B-39 with the Committee's recommendation to adopt. Ms. Mark commented on the need for appropriating funds from the 2017 Board Contingency to cover the costs for expert consulting services to complete the NetSuite Financial System implementation. On vote, Resolution B-39 was adopted.

**B-39-2017. Resolved**, that the following appropriation be made from the Board Contingency and be allocated to line items in stated cost center in accordance with the terms of the supplemental appropriation request to cover the costs for expert consulting services to complete the NetSuite Financial System implementation.

Division of Information Technology  
(Cost Center: 090-1450-000)

**NetSuite Financial Software Application Architect – Up to \$192,000**

**Report of the Business Innovation Committee:** On behalf of the Committee, Dr. Andrew Kwasny, chair, presented the report of the Business Innovation Committee's May 5–6, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

Mr. Michael Springer, senior vice president, Business and Publishing, and Ms. Stephanie Moritz, chief communications officer, presented a new business opportunity to the Board of Trustees for consideration. Subsequently, on behalf of the Committee, Dr. Kwasny moved Resolution B-56 with the recommendation to adopt. On vote, the Resolution B-56 was adopted by the Board of Trustees.

**B-56-2017.** (Confidential Action – to be reported at a later date)

**Report of the Compensation Committee:** On behalf of the Compensation Committee, Dr. Red Stevens, chair, presented the report of the Committee's May 7, 2017, meeting. The report identified major topics discussed, reports received and actions taken. Dr. Stevens moved Resolution B-54 with the Committee's recommendation to adopt; on vote, Resolution B-54 was adopted by the Board of Trustees.

**B-54-2017. Resolved**, that the attached proposed changes to the Compensation Committee Charter be approved.



The Compensation Committee Charter, as amended, is appended (see page 163).

Dr. Stevens reported that the Compensation Committee is scheduled to conduct a review of Officer and Trustee pay in 2018 as part of a reasonableness review under I.R.C. 4958. In preparation for the 2018 review, position descriptions were developed in 2013 and will be reviewed in 2017 by the Board officers and three trustees: Dr. Robinson, representing a one state district; Dr. Cohlma, representing a four state district and Dr. Klemmedson, representing a seven state district.

**Report of the Diversity and Inclusion Committee:** On behalf of the Diversity and Inclusion Committee, Dr. Andrew Kwasny, chair, presented the report of the Committee's May 5, 2017, meeting. The report identified major topics discussed, reports received and actions taken. Dr. Kwasny moved the following resolutions with the Committee's recommendation to adopt; on vote, the following resolutions were adopted by the Board of Trustees.

**B-52-2017. Resolved,** that the following 16 candidates be approved to participate in the 2017-2018 class of the ADA Institute for Diversity in Leadership:

Burrill, Courtney, Alaska  
 Chhina, Parampreet, Pennsylvania  
 Cook, Cathy, Georgia  
 Glover Andrews, Rebecca, North Carolina  
 Irelan, Estella, Wisconsin  
 Khetarpal, Ruchika, Ohio  
 Klauser, Donna, California  
 Moriarty, Janis, Massachusetts  
 Pasala, Mamatha, Texas  
 Patel, Mehu, Michigan  
 Ramirez, Daniel, California  
 Singh, Amisha, Colorado  
 Slashcheva, Lyubov, Iowa  
 Small, Chanelle, New York  
 Ton, Thanh tam, California  
 Ware, Tawana, Indiana

**B-53-2017. Resolved,** that the following three candidates be approved as alternates for the 2017-2018 class of the ADA Institute for Diversity in Leadership:

Thusu, Akshay, Texas  
 Warner, Shanna, Louisiana  
 Chebbi, Yasmin, Massachusetts

**Report of the Governance Committee:** On behalf of the Governance Committee, Dr. Red Stevens, chair, presented the report of the Committee's May 5, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

**Report of Governance Committee Regarding Committee on Annual Meetings (CAM) Charter:** On behalf of the Committee, Dr. Stevens moved Resolution B-46 with the Committee's recommendation to adopt. Dr. McDougall moved to amend the charter under the section titled General member selection, adding "No general committee members shall serve simultaneously in leadership on any constituent, component or private meetings." as the first bullet point under the requirements of General Committee members and striking "while serving on CAM or" from the second bullet point. Hearing no objection, a friendly amendment was made to add "significant" before private meetings in the first bulleted item, so the section, as amended, would read as follows:

General Committee members must also meet the following requirements:

- No general committee members shall serve simultaneously in leadership on any constituent component or significant private meetings.
- General Committee members shall not participate in leadership of the Hinman, Greater New York, Yankee Dental, Chicago Midwinter or California Dental Association meetings ~~while serving on CAM~~ or during any part of the three years immediately preceding assuming a position on CAM.
- Prior to assuming a position on CAM, a General Committee member must agree, in a form approved by the ADA Legal Division, not to serve on the board of the Hinman, Greater New York, Yankee Dental, Chicago Midwinter or California Dental Association meeting for two years after leaving CAM.

Dr. McDougall also recommended adding a stand-alone section: "Confidentiality. All information regarding future ADA meetings shall be considered confidential unless otherwise noted" to the charter. The amendment was adopted by general consent. On vote, Resolution B-46 was adopted as amended by the Board of Trustees.

**B-46-2017. Resolved**, that the Board approves, as amended, the Charter of the Committee on Annual Meetings (CAM) as attached Appendix A to the May 2017 Report of the Governance Committee, and be it further

**Resolved**, that the Governance Committee is authorized to make conforming changes to the *Organization and Rules of the Board of Trustees*.

The Charter of the Committee on Annual Meetings, as amended, is appended (see page 165).

*Potential Council on Dental Education and Licensure Restructuring.* The Board received a draft Report of the Board of Trustees to the House of Delegates: Potential Council on Dental Education and Licensure Restructuring. A motion was made to postpone definitely to the August Board meeting in order to allow CDEL time to review. On vote, the motion to postpone definitely to the August Board meeting the Report of the Board of Trustees regarding Potential Council on Dental Education and Licensure Restructuring was adopted. Hearing no objections, the report will be shared with the Council on Dental Education and Licensure.

**Report of the Information Technology Committee:** On behalf of the Information Technology Committee, Dr. Andrew Kwasny, chair, presented the report of the Committee's May 5, 2017, meeting. The report identified major topics discussed, reports received and actions taken. Dr. Kwasny also reported that Aptify was recently acquired by another company and that further information is needed for what this means for the ADA, States and Locals and their relationship with Aptify.

**Report of the Pension Committee:** On behalf of the Committee, Dr. Ron Lemmo, chair, presented the report of the Committee's May 5, 2017, meeting. The report identified major topics discussed and actions taken.

## Reports and Resolutions to the Board of Trustees

### Communications and Marketing

**Report of the Council on Communications: Update on Resolution 67H-2016: Drive Utilization of Dental Services for ADA Members:** Ms. Stephanie Moritz, chief communications officer, presented this informational report that provided an update on the Resolution 67H-2017 Campaign to Increase Utilization of Dental Services. The advertising launch has been moved from May to July to allow more time for members to update their Find-a-Dentist profiles. As of May 3, the database has 19,956 photo profiles and 5,432 profiles that are 100% complete, meaning the member has filled in all the fields in the profile. Given the later launch date, the Council on Communications passed a resolution to extend the deadline for applications for state and local societies to apply for matching funds to amplify the national campaign in their regions, and to give its workgroup more flexibility in matching funds, meaning at a higher level than 50% if funds are available. Staff provided jump drives with the video that demonstrated how to update a Find-a-Dentist profile.

## Conferences and Continuing Education

### **Report of the Advisory Committee on Annual Meetings: Annual Session Society Reimbursement Policy:**

This report provided a summary on the Committee's review of the current society reimbursement policy to evaluate if changes needed to be made to keep it fair and consistent, and to leverage opportunities relevant to the current Dental meetings environment. The Board of Trustees adopted the following resolution (consent calendar action).

**B-40-2017. Resolved**, that the Committee on Annual Meetings recommended changes/updates to the Annual Session Society Reimbursement Policy, thus updating and renaming it the Annual Meeting Society Reimbursement Policy, be approved.

## Education/Professional Affairs

**Progress Report of the Task Force on Specialty and Specialty Certifying Board Recognition:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-36-2017. Resolved**, that the Task Force on Specialty and Specialty Certifying Board Recognition circulate the draft *Bylaws* for the proposed National Commission on Recognition of Dental Specialties and Certifying Boards to the broad communities of interest for comment, and be it further

**Resolved**, that the Task Force on Specialty and Specialty Certifying Board Recognition circulate the draft *Rules* of the proposed National Commission on Recognition of Dental Specialties and Certifying Boards to the broad communities of interest for comment.

## Finance and Operations

**Updated February 2017 Report on the Status of the Board Contingency.** It was reported that a Contingent Fund of \$1 million was authorized in the 2017 budget. After the February Board meeting, the Board of Trustees approved total supplemental requests in the amount of \$884,925, leaving a balance of \$115,075. This total includes a December 2016 Board action that was inadvertently missed in an earlier report (consent calendar item).

### **Informational Report Regarding Officer Approval of Expenditures from Capital Replacement Reserve.**

In compliance with Board Resolution B-58-2015, Capital Replacement Reserve Spending Approval Process, the Budget and Finance Committee submitted the following summary of approved spending from the capital replacement reserve fund (consent calendar item).

1. A new 10 year lease extension for 13,618 square feet on the 12<sup>th</sup> floor in the ADA Chicago HQ building for an existing tenant, Chicago Women's Health Group (CWHG). Total capital expenditures of \$442,585.

Because these expenditures were less than \$500,000, this request was submitted for approval to the President, President-elect, and Treasurer of the Association with a recommendation for approval. The President, President-elect, and Treasurer voted on April 17 and 19, 2017 to approve these expenditures.

## Government and Public Affairs

**Report of the Senior Vice President, Government and Public Affairs: Federal and State Legislative, Regulatory and Public Affairs Update:** Mr. Graham provided an update on developments in Washington, D.C. The following key issues were identified in this report: Affordable Care Act Reform, McCarran-Ferguson

Reform, Non-Covered Services Bill, Student Loan Debt Relief, CDHC Program, Action for Dental Health Marketing Communications, and ADPAC. The report included a report of SPA program expenditures as of March 14, 2017.

## **Legal Affairs**

**Report of the Division of Legal Affairs: Summary of Litigation and Other Matters:** This confidential report was provided for the Board's information (consent calendar item).

During the meeting, the Board concurred with general counsel's recommendation to join an amicus brief at the appeal level in American Society for *Testing and Materials, et al., v. Public.Resource.Org, Inc.*, a lawsuit involving copyright infringement of standards and codes.

## **Practice Institute**

**Report of the Vice President, Practice Institute: Update on PI Activities:** This informational report provided a summary on recent activities of the Division (consent calendar item).

**Request from The Joint Commission: Oral Health Care for Hospital Patients:** This informational report provided a summary on the Hospital Acquired Pneumonia Prevention Initiative (HAPPI) and requested support to promote this work to The Joint Commission (TJC) (consent calendar action).

**B-47-2017. Resolved,** that the ADA President issue a letter to The Joint Commission highlighting the need to promote standards and performance measures to reduce incidence of non-ventilator hospital acquired pneumonia through oral care, and be it further

**Resolved,** that the ADA approve the oral healthcare protocol developed by Sutter Health to reduce incidence of non-ventilator hospital acquired pneumonia.

## **Science Institute**

**Report of the Council on Scientific Affairs: Recent Activities:** This informational report provided a summary on recent activities of the Council (consent calendar item).

## **ADA Business Enterprises, Inc.**

**Report of ADABEI:** This informational report provided a final wrap up of 2016 activities and a summary of 2017 activities through February (consent calendar item).

## **ADA Foundation**

**Report of the ADA Foundation:** This report was presented in closed session.

## Organizational/Other

**Report of Insights and Priorities of the New Dentist Committee:** This informational report provided a summary of the February 2017 Board of Trustees and New Dentist Committee joint discussion and identified key aspects of the discussions and Committee insights in three areas: collaboration, communication and structure.

**Report of the New Dentist Committee: The Future of the New Dentist Conference:** Dr. Emily Ishkanian, chair, New Dentist Committee, presented a report on the New Dentist Committee's recent activities, ASDA relations, and focus on membership directives. In response to the Resolution 104H-2014, the NDC, at the Board's direction, evaluated the format of the New Dentist Conference at the annual meeting. The Committee recommended that the current format of the New Dentist Conference be continued. The Board agreed with the NDC recommendation to continue the current format with ongoing enhancements to meet the needs of new dentist attendees and intends to follow that direction.

**Report of New Dentist Committee Consultants:** This informational report named the Federal Dental Service consultants to the New Dentist Committee for 2016–2017 (consent calendar item).

**Report on Nominations for ADA Honorary Membership:** The Board of Trustees adopted the following resolutions (consent calendar actions).

**B-41-2017. Resolved,** that the Board Rule relating to the timing of the consideration of the Honorary Membership be suspended.

**B-42-2017. Resolved,** that the 2017 Honorary Membership of the American Dental Association be presented to:

Mr. Patrick W. Finnerty, B.S., M.P.H.

**B-43-2017. Resolved,** that the 2017 Honorary Membership of the American Dental Association be presented to:

Tin Chun Wong B.D.S., L.D.S.R.C.S., M.Sc.Orth, D.Orth.R.C.S. F.H.K.A.M., F.C.D.S.H.K

**Nomination for ADA Distinguished Service Award:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-44-2017. Resolved,** that the Board Rule relating to the timing of the consideration of the Distinguished Service Award be suspended, and be it further

**Resolved,** that the 2017 Distinguished Service Award be presented to Dr. Patricia L. Blanton.

**Nominations to the Council on Scientific Affairs:** The Board of Trustees considered multiple nominations for the four open positions on the Council on Scientific Affairs. Trustees who nominated an individual were given the opportunity to offer comments on their nominee's qualifications. In accordance with the *Organization and Rules of the Board of Trustees*, the Board balloted on the nominations and selected four nominees to present to the 2017 House of Delegates. On vote, Resolution B-45 was adopted by the Board of Trustees.

**B-45-2017. Resolved,** that the names and qualifications of the following four individuals be transmitted to the 2017 House of Delegates as nominees for membership on the Council on Scientific Affairs for four year terms.

Dr. Satish Alapati (District 8)  
 Dr. Ana Bedran-Russo (District 8)  
 Dr. Lauren Patton (District 16)  
 Dr. Parthasarathy Madurantakam (District 16)

**Report of the Task Force on Budget Authority:** On behalf of the Task Force on Budget Authority, Dr. Ronald Lemmo, chair, presented a draft report that proposed shifting the authority of budget approval to the Board and presented benefits to the proposal. After an extensive discussion, which included proposed and adopted edits to the draft report, the Board determined that more time was needed before final consideration of the report is taken. Dr. Marron-Tarrazzi moved the resolution as presented in the draft report. A motion was made to postpone definitely discussion on the draft Task Force Report to the August Board meeting. The motion to postpone definitely was adopted by the Board of Trustees.

**Oral Report on the Golden Apple Award:** Dr. Kathleen O'Loughlin reported on the sunsetting the Golden Apple Award due to its staff and monetary demand and to the existence of other effective ways to acknowledge state performance.

**Report of the President:** Dr. Gary Roberts presented an oral report that summarized his activities since the February Board meeting.

**Report of the President-elect:** Dr. Joseph Crowley gave an oral report of meetings attended and trips taken since the February Board meeting.

**Report of the Executive Director:** Dr. Kathleen O'Loughlin gave an oral report of meetings attended and trips taken since the February Board meeting as well as various obstacles of the licensure reform effort.

## **Liaison Reports**

**Report of Dr. Judith M. Fisch, Liaison to the Dental Lifeline Network:** This informational report summarized the February 23, 2017, Dental Lifeline Network Board of Directors meeting (consent calendar item).

**Report of Dr. Judith M. Fisch, Liaison to the Council on Members Insurance and Retirement Programs:** This informational report summarized the March 23, 2017, CMIRP meeting (consent calendar item).

**Report of Dr. Rickland G. Asai, Liaison to the Standards Committee on Dental Informatics:** This informational report summarized the February 26–28, 2017, SCDI meeting (consent calendar item).

**Report of Dr. Kenneth McDougall, Liaison to the Commission for Continuing Education Provider Recognition:** This informational report summarized the April 6–7, 2017, CCEPR meeting (consent calendar item).

**Report of Dr. Richard C. Black, Liaison to the Council on Communications:** This informational report summarized the March 31–April 1, 2017, Council on Communications meeting (consent calendar item).

**Report of Dr. Raymond A. Cohlma, Liaison to the American Student Dental Association (ASDA):** This informational report summarized the April 23, 2017, ASDA meeting (consent calendar item).

## **Special Orders of Business/Special Appearances**

**Presentation—Frog Design Inc.:** Ms. Turi McKinley, executive director, and Mr. Geoffrey Schwartz, strategy director, Frog Design, presented an update on the Business Model Project. The update included the program overview, immersion process, field research, and projected next steps.

**Presentation—The ADA's Technology Strategy in Support of ADA Business Objectives/IT Discussion:** Dr. Kathleen O'Loughlin reported the purpose of the presentation was to discuss ADA's technology strategy, how the business strategy is supported by technology, and the overall spend of the technology strategy. Ms.

Stephanie Moritz reported on the importance of “laying the rails” and risk of staying still. Mr. Robert Quashie, Mr. Bill Robinson, and Dr. Anthony Ziebert commented on challenges of technology in the credentialing project as well as removing friction from the credentialing market. Ms. Toni Mark reported on how IT is navigating risk management and cost management while delivering high quality services to members and customers. Ms. Mark gave a presentation on the department’s challenges, programs, technology service delivery organization, application architecture, spend benchmarks, and technology investments. The following resolution was considered and adopted without objection by the Board of Trustees.

**B-57-2017. Resolved**, that the current “Innovation Reserve” be expanded to include technology funding requests in between the regular annual budget cycle, subject to the approval of the Budget and Finance Committee and the Board of Trustees, and be it further

**Resolved**, that the current “Board Contingency” be used for all non-IT/business innovation funding requests in between the regular budget cycle, and be it further

**Resolved**, that the Governance Committee be authorized to make conforming changes for the technology funding requests in the *Organization and Rules of the Board of Trustees*.

**Board Strategic Discussion: A 5-3-1 Approach:** Dr. Kathleen O’Loughlin presented a brief historical overview of the ADA’s strategic planning activities. Mr. Robert Quashie, senior director, Business Analyst, presented an overview of the four pillars of the current ADA business model and explained the 5-3-1 Framework. Dr. David Preble, vice president, Practice Institute, provided an overview and led a discussion of the Member Value for Dentists pillar. Ms. April Kates-Ellison, director, Client Services, provided an overview and led a discussion of the Client Services for State and Local Societies pillar. Ms. Stephanie Moritz provided an overview and led a discussion of the Stakeholder Engagement pillar. Mr. Michael Springer provided an overview and led a discussion of the Non-Dues Revenue pillar.

## New Business

*Report of Dr. Judith M. Fisch: Reception at ADA Annual Meeting for Women Dentists.* Dr. Fisch presented the following resolution, as editorially amended, for the Board’s consideration. On vote, Resolution B-49 was adopted by the Board of Trustees.

**B-49-2017. Resolved**, that the ADA host a women leaders ~~delegates~~ reception at the ADA Meeting in 2017.

*Additional ADA Honorary Membership Nomination.* Dr. McDougall requested that the Board *Rules* be suspended to allow consideration of an additional nominee for ADA Honorary Membership. On vote, the Board approved the motion to suspend the Board *Rules*. On vote, Resolution B-55 was adopted by the Board of Trustees.

**B-55-2017. Resolved**, that the 2017 Honorary Membership of the American Dental Association be presented to:

Lawrence F. Carl, CAE

*Selection of 2018-19 Advisory Committee on Annual Meetings (CAM) Chair.* On vote, Resolution B-58 was adopted by the Board of Trustees.

**B-58-2017. Resolved**, that Dr. C. Roger Macias is selected as the 2018-19 chair of the Advisory Committee on Annual Meetings.

*Institute for Diversity and Leadership.* Dr. Kwasny and Dr. O’Loughlin reported on the Committee’s desire to expand the class size from 15 to 25 and further plans to amplify the program. Dr. O’Loughlin informed the

Board about sponsorship opportunities. During discussion, several Board members spoke in opposition to sponsorship.

*Discussion on the Budget.* Dr. Black requested extra time in the future to allow for a more robust budget discussion. Subsequently, Dr. Roberts requested that staff begin drafting talking points for the Board. In addition, Dr. Roberts announced plans for a town hall meeting to discuss turning the budget over to the Board.

## **Reports and Resolutions to the House of Delegates**

### **Reports and Resolutions Relating to Reference Committee A (Budget, Business, Membership and Administrative Matters)**

**Report 3 of the Board of Trustees to the House of Delegates: New Dentist Conference Direction:** The Board of Trustees voted to transmit Board Report 3 to the House of Delegates. (Vote: Unanimous)

**Illinois State Dental Society Resolution 2: ADA Sponsored Members Association Health Plan:** The Board of Trustees voted to transmit Resolution 2 to the House of Delegates with the following comment and recommendation to vote no. (Vote: 2 Yes—Drs. Bitter and Marron-Tarrazzi; 18 No: Drs. Asai, Black, Cohlmiia, Cole, Crowley, Fisch, Gehani, Jeffers, Klemmedson, Kwasny, Kyger, McDougall, Mitchell, Norbo, Robinson, Sabates, Stevens, and Thompson)

The Board wishes to thank ISDS for its resolution raising awareness of the current health insurance market conditions and proposed legislation under the Small Business Health Fairness Act (H.R. 1101) in support of the development of association group health plans. While the Board appreciates the concerns expressed by the Illinois State Dental Society, the Board notes that the ADA has in past years explored the feasibility of developing a national health insurance plan in response to the introduction of similar legislation. There are fundamental risks inherent in the underwriting and pricing of voluntary group health insurance plans, namely adverse selection and inflation, which can negatively influence the financial viability of the program. These are factors that fall outside the control of a plan sponsor.

In addition, from a competitive perspective, there are tripartite considerations due to the number of state dental society endorsed plans already available which generate non-dues revenue to the ADA affiliate association or their for-profit subsidiary. It is unlikely that all states would be interested in supporting a nationally endorsed program unless ADA's plan could provide new tangible economic value combined with a consensus by the states on revenue-sharing arrangements.

The recent proposal for new legislation further assumes that more insurance companies would reenter the association group marketplace under new rules to underwrite plans at the national level. Inasmuch as a self-funded plan would not likely be a financially viable long-term option for the ADA membership, it would be necessary to identify an insurer who could meet ADA plan specifications, in addition to the legal and reserve funding requirements of plan sponsors as proposed in H.R. 1101, which as drafted appears onerous.

The Board believes that the needs of its members are currently being met through plan offerings at the state level and access to the ADA-endorsed AHIX.com (American Health Insurance Exchange) web portal, administered by JLBG Health, Inc. The Board will continue to monitor the broader health insurance marketplace and pending legislation to ensure ADA is well positioned to address any changes impacting the availability and affordability of coverage for ADA members.

For these reasons and pending Senate approval of H.R.1101, the Board does not recommend further study of the legal and financial possibilities of offering a national health insurance plan for its members at this time. To do so would necessitate retaining an outside consultant to conduct an initial feasibility study at an estimated cost of \$25,000-\$35,000.



## Reports and Resolutions Relating to Reference Committee D (Legislative, Health, Governance and Related Matters)

**Report of the 2017 Task Force to Evaluate the Business of the House of Delegates Resolution 1:** The Board voted to transmit Resolution 1 to the House of Delegates with the following comment and recommendation to vote yes on substitute Resolution 1B. (Vote: 19 Yes—Drs. Bitter, Black, Cohlma, Cole, Crowley, Fisch, Gehani, Jeffers, Klemmedson, Kwasny, Kyger, Marron-Tarrazzi, McDougall, Mitchell, Norbo, Robinson, Sabates, Stevens, and Thompson; 1 No: Dr. Asai)

The Board thanks the Task Force for its work, but is not generally in favor of requiring supermajorities to take action. The Board believes that the requirement of a supermajority in order to introduce new business unduly burdens the districts, especially those which do not meet in advance of the House meeting. Accordingly, the Board proposes that new business be allowed to be introduced upon a vote by a simple majority. Accordingly, the Board proposes the following Board substitute:

**1B. Resolved**, that effective with the close of the 2017 House of Delegates, CHAPTER V. HOUSE OF DELEGATES, Section 130. RULES OF ORDER, A. STANDING RULES AND REPORTS, e. INTRODUCTION OF NEW BUSINESS, of the ADA Bylaws be amended as follows (additions **highlighted**; deletions ~~double strike-out~~):

### *Section 130: RULES OF ORDER*

e. INTRODUCTION OF NEW BUSINESS. No new business shall be introduced into the House of Delegates less than 15 days prior to the opening of the annual session, ~~unless~~ except when such new business is submitted by a Trustee District or the American Student Dental Association Delegation and is permitted to be introduced by a ~~two-thirds (2/3) affirmative vote~~ **majority** vote of the delegates present and voting. ~~No new business shall be introduced into the House of Delegates at the last meeting of a session except when such new business is submitted by a Trustee District or the American Student Dental Association Delegation and is permitted to be introduced by a two-thirds (2/3) affirmative vote of the delegates present and voting.~~ The motion introducing such new business shall not be debatable. Approval of such new business shall require a majority vote except new business introduced at the last meeting of a session that would require a bylaw amendment cannot be adopted at such last meeting. Reference committee recommendations shall not be deemed new business.

**Report 4 of the Board of Trustees to the House of Delegates: Governance Reforms Since 2012:** The Board of Trustees voted to transmit Board Report 4 to the House of Delegates. (Vote: Unanimous)

## Closed Session

Closed sessions of the Board of Trustees were held at various times during the May 7–9, 2017, meeting of the Board of Trustees. The minutes of the closed sessions are separately recorded; however, non-confidential actions taken by the Board are reflected in the minutes of the open session. The following reports were considered during the closed sessions:

- Oral Report of Dr. William Calnon, president and interim executive director, ADAF
- Discussion of AADB Relationship

### **Adjournment**

Without objection, the fourth regular meeting of the Board of Trustees adjourned *sine die* on Tuesday, May 9, 2017 at 11:47 a.m.

## Appendix 1

### *Charter of Compensation Committee: proposed changes as of May 2017*

#### **Compensation Committee**

**Composition.** The Committee shall consist of the President, President-elect, and four trustees, one from each trustee class, who are not serving on the Budget and Finance Committee or Audit Committee, with the senior trustee serving as chair, and shall also consist of the Treasurer without the right to vote. Each year the President shall appoint one first-year trustee to the Committee. The Committee shall form and delegate authority to subcommittees or other persons when appropriate, provided that such subcommittee members are in compliance with applicable laws and regulations.

**Term.** The term of service for the trustee members of the Committee shall be four years.

**Meetings.** The Committee shall meet a minimum of twice each year; (i) prior to the August Board meeting, to review the Executive Director's performance and to determine recommendations for salary, any incentives, and any non-standard fringe benefits for the next fiscal year or such other period as deemed appropriate by the Committee, and review and determine recommendations for any other compensation-related matters; and (ii) to discuss overall compensation and related management issues with the Executive Director. The Committee shall keep minutes of its meetings.

**Duties.** The duties of the Committee shall be:

1. To establish and maintain performance review procedures for the Executive Director and review the Executive Director's performance pursuant to those procedures periodically, but not less than once per calendar year;
2. To establish the recommended salary, including increases, any incentive opportunity, and develop guidelines for any additional fringe benefits other than the customary ADA employee benefits, that may be offered to the Executive Director, provided that such determinations will be discussed and determined during periodic Committee executive session meetings that the Executive Director may not attend;
3. To report to the Board on the Executive Director's performance, and make recommendations on the Executive Director's contract, salary and benefits, taking into account the accounting, tax and public reporting treatment of each element of compensation;
4. To periodically (but not less than once per calendar year) review the expense reports of the Treasurer; and at the request of the Treasurer to be available to review expense reports of the Executive Director, President and President-elect;
5. In consultation with the Executive Director and in conjunction with oversight of any approved and active ADA executive and staff incentive compensation plan(s), (i) to review and recommend to the Board personal and organizational goals and objectives relevant to the annual incentive compensation of the Executive Director, and (ii) in light of such approval goals and objectives, to review and consider the financial and operating performance of the ADA for the prior fiscal year for purposes of recommending any incentive compensation to be paid for such performance;
6. To review an annual report from the Executive Director on the performance of senior executive officers and the Executive Director's recommendations for any salary adjustments or payment of eligible incentive pay allocations and to report on related compensation actions to the Board; also to recommend to the Board guidelines developed by the Executive Director for any compensation or benefit arrangements other than the customary ADA employee compensation and benefit that the Executive Director may offer

to other senior executive officers taking into account the accounting, tax and public reporting treatment of each element of compensation;

7. To periodically (but not less than once every three to five calendar years) review the ADA's staff compensation philosophy and financial metrics for reasonableness against external benchmarks and for purposes of internal equity, and commission a benchmark study of the pension and retirement benefit programs; reporting results of the review and study to the Board.
8. To review and make recommendations annually regarding stipends for officers and trustees to the Board;
9. To keep minutes of its meetings, and at each meeting, review and approve the minutes of its preceding meeting(s);
10. To periodically (but not less than once every two years) (i) review and assess the adequacy of this Compensation Committee Charter, and the performance and compensation of the Committee's independent consultant, legal counsel and other advisors, and (ii) receive training on current corporate governance practices in the area of executive compensation;
11. To annually report to the ADA Budget and Finance Committee on any approved compensation actions or recommendations with financial impact on ADA operating expenses;
12. To meet in executive session to determine the Executive Director's compensation and benefits. The Executive Director may attend meetings to determine any special compensation arrangements of senior executive officers other than the Executive Director, but the Executive Director may not vote on these matters. The Executive Director shall not attend that portion of any meeting where the Committee is discussing the Executive Director's performance or compensation, and no Senior Management Team Member shall attend that portion of any meeting where the Committee is discussing that member's performance or compensation, in either case, unless specifically invited by the Committee.

## Appendix A

### ADVISORY COMMITTEE ON ANNUAL MEETINGS CHARTER

*Purpose.* The primary purpose of the Committee on Annual Meetings (CAM) is to provide oversight in a manner that provides an exceptional member experience at the annual meeting, to provide meeting oversight in a manner that generates non-dues revenue, and to advise the Board on matters relating to the Committee's duties.

*Composition and Selection.* The Committee on Annual Meetings shall consist of thirteen (13) members: nine (9) general members, two (2) Local Arrangements members, and two (2) trustees or vice presidents.

*General member selection:* The Board shall select the members to fill open positions on the committee based on nominations from any Board member. The nine (9) general members shall be selected based on specific skill sets. All nominees to the Committee shall meet the one or more criteria listed below:

General Committee members must have experience with one or more of the following areas:

- Continuing Education
  - content curation and/or speaker selection,
  - continuing education planning or dental education experience at local, state, regional or national dental meetings
  - university or corporate professional continuing education planning
  - knowledge of the current speaking circuit.
- Exhibitor Relations
- Meeting logistics

General Committee members must also meet the following requirements:

- No general committee members shall serve simultaneously in leadership on any constituent, component or significant private meetings.
- General Committee members shall not participate in leadership of the Hinman, Greater New York, Yankee Dental, Chicago Midwinter or California Dental Association meetings during any part of the three years immediately preceding assuming a position on CAM.
- Prior to assuming a position on CAM, a General Committee member must agree, in a form approved by the ADA Legal Division, not to serve on the board of the Hinman, Greater New York, Yankee Dental, Chicago Midwinter or California Dental Association meeting for two years after leaving CAM.

*Local Arrangements Member Selection:* The Board shall approve one (1) member from the state hosting the current year's meeting and one (1) member from the following year's meeting location. A letter will be sent from the Committee to the state dental organization in which the annual meeting will take place two and a half years prior to the scheduled meeting, requesting a nomination from that state to serve on the Committee. The nominee shall be submitted to the President for approval by the Board prior to becoming a member of the Committee.

*Two Trustees or Vice Presidents:* Two (2) Board of Trustee members (trustees or vice presidents), appointed by the President, shall be members of CAM without the right to vote.

*Liaisons:* The Committee shall have two (2) liaisons, one (1) from the New Dentist Committee (NDC) and one (1) from the American Student Dental Association (ASDA), both non-voting and selected by their representative committee and organization and confirmed by the President. The Committee may have liaisons from other councils, committees or commissions or other outside entities with the approval of the President.

*Term.* The nine (9) general members are to each serve a single staggered four (4) year term; the two (2) Local Arrangements members are to each serve a single two (2) year term; the two (2) trustees or vice presidents shall each serve a single two (2) year term; the New Dentist Committee liaison and ASDA liaison are to each serve a one (1) year term.<sup>1</sup>

*Vacancies:* The President shall appoint a general committee member subject to Board approval if a vacancy occurs. If the term of the vacated general member position has less than fifty percent (50%) of a full four-year term remaining at the time the successor general member is appointed or elected, the successor general member shall be eligible for election to a new four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment, the successor general member shall not be eligible for another term.

*Chair, Vice Chair, General Chairs:* The Committee shall have a Chair, Vice Chair, General Chair of the [current year] Meeting, General Chair of the [following year] Meeting and General Chair of the [second following year] Meeting.

*Duties of Committee Chair:* In consultation with committee staff, the Committee Chair shall be responsible for the governance of the Committee and shall preside over all Committee meetings, develop meeting agenda and, in general, assure appropriate functioning of the Committee.

*Duties of Committee Vice Chair:* The Committee Vice Chair shall assist the Committee Chair in his or her duties, shall fulfill the duties of the Committee Chair in his or her absence, and shall succeed to the position of Committee Chair at the end of the Committee Chair's term or when that position is vacated.

*Duties of General Chair of the [year] Meeting:* The General Chair of the [year] Meeting shall oversee the carrying out of the Committee's duties with respect to the meeting for which he or she serves as General Chair. The General Chair shall provide reports to the Committee Chair in the usual course of his or her duty and shall provide reports to the Committee at the request of the Committee Chair. The General Chair may make appointments from among CAM members to carry out these duties.

*Selection of Committee Vice Chair and Committee Chair:* The Committee Vice Chair shall be named by the President, with Board approval, from among Board trustees and vice presidents, for a total term of two years. Following one year as Committee Vice Chair, he or she shall automatically succeed to the position of Committee Chair for one year.<sup>2</sup>

*Selection of General Chairs of the Meetings:* The Committee shall elect the General Chair of the [year] Meeting three years prior to the year meeting for which he or she will serve as General Chair. Members of the Committee interested in that position will submit their curriculum vitae and statements of interest two months prior to the nominee selection process.

Each nominee will be given equal time to present a nominating speech to the Committee. The Committee shall select the nominee by majority vote.<sup>3</sup>

*Program Chair:* The General Chair of each Meeting may select the Program (or CE) chair for that meeting.

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<sup>1</sup> To take effect at the close of the 2017 House meeting, the Board shall select two members for one year terms; two members for two year terms; two members for three year terms; and, three members for four year terms. This footnote shall expire after the close of the 2021 House of Delegates.

<sup>2</sup> Initially, the President shall appoint, with Board approval, two trustees or vice presidents to CAM, to take a seat after the close of the 2017 House. One trustee shall be the Committee Chair, with a term of one year. The other trustee shall serve a two year term and shall be Committee Vice Chair in his or her first year on the committee. This footnote shall expire at the end of the 2018 House of Delegates.

<sup>3</sup> The current chair for the 2018 Meeting shall be the General Chair of the 2018 Meeting. The Board shall select the General Chair of the 2019 Meeting. The Committee shall elect the General Chair of the 2020 Meeting in accordance with this charter. This footnote shall expire at the end of the 2020 House of Delegates.

*Ad Hoc Committees and Subcommittees.* The Committee shall have an Ad Hoc Committee on Local Arrangements for the current year's annual meeting and a Second Ad Hoc Committee on Local Arrangements for the following year's annual meeting.

The First Ad Hoc Committee shall be made up of the designated Local Arrangements member that sits on the Committee on Annual Meetings. This person shall serve as the chair of this committee. He or she shall choose up to five (5) other committee members from the district in which the meeting is being held. The committee is to function on a local basis in the recruitment of volunteers for the annual meeting and to help onsite during the annual meeting. Only the chair of the committee is a member of the Committee on Annual Meetings.

The Second Ad Hoc Committee shall be made up of the designated Local Arrangements member that sits on the Committee on Annual Meetings. This person shall serve as the chair of this committee. He or she shall choose up to five (5) other committee members from the district in which the meeting is being held. The committee is to function on a local basis in the recruitment of volunteers for the annual meeting and to help onsite during the annual meeting. Only the chair of the committee is a member of the Committee on Annual Meetings.

The Committee on Annual Meetings may have other ad hoc committees or subcommittees as it deems appropriate.

*Budget.* Funding for the work of the Committee shall come from the budget of the Division of Conferences and Continuing Education.

*Meetings.* The Committee on Annual Meetings will meet at a minimum one time per year in person. The Committee may meet in person additionally as needed to fulfill its work and subject to funding. The Committee may meet by conference call to adequately fulfill all the obligations and duties outlined in the charter. All Committee members are expected to attend each meeting, in person or electronically. In addition, subcommittees may meet in person, subject to funding, or by conference call. The Committee shall utilize ADA Connect to the extent practical to carry out its work.

*Meetings of the Exhibitor Advisory Committee<sup>4</sup>:* The General Chair of the current Meeting shall nominate to the President for the President's approval one or two committee members to attend meetings of the Exhibitor Advisory Committee.

*Confidentiality.* All information regarding future ADA meetings shall be considered confidential unless otherwise noted.

*Duties.* The Committee shall provide oversight and advice on:

- Strategic planning – based on organizational strategic plan and goals; advise the Board on how annual meetings align and assist in the delivery of the plan goals.
- Continuing Education Program – Oversee the development the CE program.
- Exhibitor Relations.
- Special Events.
- Networking for members and attendees outside of scheduled social / special events.
- Site Selection –Recommend to the Board for its approval site selection criteria for future meeting locations and, after consultation with the Speaker and Secretary of the House of Delegates, recommend to the Board for its approval locations that meet this criteria.
- Onsite Meeting Management – Assist staff and local volunteers with the onsite management and execution of the annual meeting.
- Scouting—Propose to the Board for its approval a specific scouting plan necessary to carry out these duties.

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<sup>4</sup> A committee of vendors; not an ADA committee.

## Minutes of the Board of Trustees

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August 13–15, 2017

Headquarters Building, Chicago

**Call to Order:** The fifth regular meeting of the Board of Trustees of the American Dental Association was called to order by Dr. Gary L. Roberts, president, on Sunday, August 13, 2017, at 7:00 a.m. in the Board Room of the ADA Headquarters Building, Chicago.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Gary L. Roberts, Joseph P. Crowley, Irene Marron-Tarrazzi, G. Lewis Mitchell, Glen D. Hall, Ronald P. Lemmo, Kathleen T. O'Loughlin, Rickland G. Asai, Robert N. Bitter, Richard C. Black, Raymond A. Cohlmia, Jeffrey M. Cole, Judith M. Fisch, Chad P. Gehani, Gary E. Jeffers, Daniel J. Klemmedson, Andrew J. Kwasny, Billie Sue Kyger, Kenneth McDougall, Kirk M. Norbo, Lindsey A. Robinson, Cesar R. Sabates, Alvin W. Stevens, Jr., and W. Roy Thompson.

Following the roll call, Dr. Hall announced that a quorum was present.

The following ADA staff were in attendance for all or portions of the meeting at the invitation of the president: Marcelo Araujo, vice president, Science Institute; Jerome K. Bowman, chief, Governance and Strategy Management; J. Craig Busey, Esq., general counsel; Judith Fleeks, vice president, Human Resources; James Goodman, vice president, Conferences and Continuing Education; Michael A. Graham, senior vice president, Government and Public Affairs; Toni Mark, chief technology officer; Stephanie Moritz, chief communications officer; David Preble, vice president, Practice Institute; Bill Robinson, vice president, Member and Client Services; Paul Sholty, chief financial officer; Michael D. Springer, senior vice president, Business and Publishing; Marko Vujicic, chief economist and vice president, Health Policy Institute; James Willey, senior director, Practice Institute; and Anthony Ziebert, senior vice president, Education/Professional Affairs.

Guests in attendance for a portion or portions of the meeting included: Dr. Emily R. Ishkanian, chair, New Dentist Committee; Mr. Robert Stevenson, SpeakInc.; Dr. William Calnon, president and interim executive director, ADA Foundation; Dr. Roger Kiesling, vice president of finance, ADA Foundation Executive Committee; and Ms. Turi McKinley and Mr. Geoffrey Schwartz, Frog Design Inc.

Others in attendance for all or portions of the meeting were: Tomisena Cole, senior manager, Board and House Matters; Thomas C. Elliott, Jr., Esq., deputy general counsel; Dr. Michael Glick, editor, *The Journal of the American Dental Association*; Judith Jakush, editor, *ADA News*; Michelle Kruse, director, Administrative Services; Tom Parcella, director, Financial Planning and Analysis; Molly Potnick, coordinator, Board and House Matters; Robert Quashie, senior director, Business Analyst; Kyle Smith, manager, House of Delegates; Wendy Wils, Esq., deputy general counsel; and Mr. Robert Zinn, director, Accounting and Reporting. Other ADA staff members were in attendance for specific agenda items.

Before consideration of business, Dr. Roberts called attention to the ADA Disclosure Policy statement included on the meeting agenda and the requirement to disclose any conflicts of interest. No conflicts were disclosed at this time.



## Preliminary

### Approval of Agenda and Consent Items

*Approval of Agenda.* Before requesting approval of the agenda, Dr. Roberts asked if there were any items of new business. No items of new business were proposed. On vote, the Board adopted the agenda.

**B-62-2017. Resolved**, that the agenda be approved as the official order of business for the current meeting of the Board of Trustees except that the President may alter the order of the agenda when necessary to expedite business.

*Approval of Consent Calendar.* Dr. Roberts reviewed the list of proposed consent items; the following reports were removed from consent:

- Approval of Minutes of Previous Session (Resolution B-64)
- Update on Dental Quality Alliance Activities
- Report of ADA Business Enterprises, Inc.
- Report of the Alliance of the American Dental Association
- Council on Ethics, Bylaws and Judicial Affairs: Amendment to Section 4.A of the *ADA Principles of Ethics and Code of Professional Conduct* (Resolution 6)

Without objection, the amended consent calendar was adopted.

**B-63-2017. Resolved**, that the resolutions contained on the Consent Calendar for Board of Trustees consideration, as amended, be approved and reports be filed, and be it further

**Resolved**, that the recommendations and reports to the House of Delegates be accepted.

### Approval of Minutes of Previous Sessions

*Minutes of the May 7–9, 2017, Meeting of the Board of Trustees.* Dr. Marron-Tarrazzi identified a correction that needed to be made to the draft minutes. On vote, the Board adopted the March 7–9, 2017, meeting minutes as amended.

**B-64-2017. Resolved**, that the minutes of the May 7–9, 2017, meeting of the Board of Trustees, as amended, be approved.

*Minutes of the June 27, 2017, Confidential Session of the Board of Trustees.* The following resolution was adopted by the Board of Trustees.

**B-65-2017. Resolved**, the confidential minutes of the June 27, 2017, special telephonic meeting of the Board of Trustees be approved.

### Reports of Standing Committees of the Board of Trustees

**Report of the Audit Committee:** On behalf of the Committee, Dr. Gary Jeffers, chair, presented the report of the Audit Committee's August 12, 2017, meeting. The report identified major topics discussed, reports received and actions taken. On vote, the following resolutions were adopted by the Board of Trustees.

**B-81-2017. Resolved**, that the draft audited 2016 financial statement of the ADA Employees' Retirement Plan and supplemental schedules be approved and final copies thereof be released for posting on ADA Connect.

**B-82-2017. Resolved**, that the draft audited 2016 financial statement of the ADA Employees' Savings and Thrift Plan and supplemental schedules be approved and final copies thereof be released for posting on ADA Connect.

**B-83-2017. Resolved**, that the draft ADA Form 990 and supplemental schedules be approved, finalized and filed.

Subsequent to the adoption of B-83-2017, it was determined that the Board did not need to approve Resolutions B-83, B-84, B-85 and B-86 and that the minutes reflect that the Board was provided with and reviewed copies of the following forms:

- ADA Form 990 and supplemental schedules
- ADA Form 990-T and supplemental schedules
- ADA Form IL-990 and supplemental schedules
- ADPAC Form 990 and supplemental schedules

Consequently, no action was taken on Resolutions B-84, B-85 and B-86.

**B-84. Resolved**, that the draft ADA Form 990-T and supplemental schedules be approved, finalized and filed.

**B-85. Resolved**, that the draft ADA Form IL-990-T and supplemental schedules be approved, finalized and filed.

**B-86. Resolved**, that the draft ADPAC Form 990 and supplemental schedules be approved, finalized and filed.

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Jeffrey Cole, chair, presented the report of the Budget and Finance Committee's August 11, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

*Business Model Study (Frog).* In closed session, and following the presentation from Frog Design, Inc., Resolution 76 was adopted by the Board of Trustees.

**B-76-2017. Resolved**, that the Board support the continued development of the Bridge concept generated from the Business Model Study, and be it further

**Resolved**, that Management be directed to propose a governance and funding model for the next steps in development of the Bridge concept for consideration at the September 2017 Board meeting.

*Report of the Senior Vice President, Government and Public Affairs: Request for Additional Funding For the SPA Program for 2017.* Dr. Cole moved Resolution B-71 with the Committee's recommendation to adopt; on vote, Resolution B-71 was adopted by the Board of Trustees.

**B-71-2017. Resolved**, that \$55,000 be allocated from the Board Contingency for additional grant funding of the SPA Program.

*Quarterly Financial Statements.* Dr. Cole moved Resolution B-75 with the Committee's recommendation to adopt; on vote, Resolution B-75 was adopted by the Board of Trustees.

**B-75-2017. Resolved**, that the ADA quarterly financial statements as of June 30, 2017 be filed and posted in the appropriate delegates section.

**Report of the Business Innovation Committee:** On behalf of the Committee, Dr. Andrew Kwasny, chair, presented the report of the Business Innovation Committee's August 11 and August 13, 2017, meetings.

*Funding Request to Engage Consultant to Assist the ADA in Enhancing Non-Dues Revenue.* Dr. O'Loughlin briefly reported on the differences between the new Frog study and the continuation of what the Business Innovation Committee does for non-dues revenue. Dr. Kwasny reported on consulting services to investigate ways to maximize non dues revenue in the short and long term. It was reported management selected PA Consulting and that up to \$80,000 be drawn from the Innovation Fund. This work would take place in the third and fourth quarters of 2017.

*Report of the Division of Education and Profession Affairs: Board Innovation Request—the ADA Credentialing Service.* Dr. Kwasny moved Resolution B-70 with the Committee's recommendation to adopt. Mr. Robert Quashie, senior director, Business Analyst, presented on Credential Attestation. On vote, Resolution B-70 was adopted by the Board of Trustees.

**B-70-2017.** Resolved, the following appropriation be made from the Board Innovation Fund and be allocated to line items in stated cost center in accordance with the terms of the supplemental appropriation request to cover the costs of technical implementation and marketing of the ADA Credentialing Service joint solution with CAQH.

Division of Education and Professional Affairs  
(Cost Center: 030-0160-100)

**ADA Credentialing Service – Up to \$250,000**

Mr. Michael Springer, senior vice president, Business and Publishing, provided an update on B-56-2017, the new business opportunity presented to the Board of Trustees during the May meeting.

**Report of the Compensation Committee:** The report of the Compensation Committee, presented by Dr. Red Stevens, Committee chair, was considered during a closed session of the Board of Trustees. In open session, the following resolution was adopted without objection by the Board of Trustees.

**B-87-2017.** (Confidential Action)

**Report of the Diversity and Inclusion Committee:** On behalf of the Diversity and Inclusion Committee, Dr. Andrew Kwasny, chair, presented the report of the Committee's August 12, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

**Report of the Governance Committee:** On behalf of the Governance Committee, Dr. Red Stevens, chair, presented the report of the Committee's June 14, 2017, and August 11, 2017, meetings. The reports identified major topics discussed, reports received and actions taken.

*Maintained Policies.* Dr. Stevens moved Resolution B-60 with the Committee's recommendation to adopt. On vote, Resolution B-60 was adopted by the Board of Trustees.

**B-60-2017. Resolved,** that Board Report 1 include information regarding the Board's conclusion that the following policies should be maintained without amendment:

- Changes in ADA Strategic Plan (*Trans.*1997:714; 2012:518)
- Posting of Financial Information (*Trans.*2009:493; 2012:407)
- Review of Reports and Studies by the ADA Board of Trustees (*Trans.*1995:652)
- Joint Meeting Approval (*Trans.*1985:610)
- Annual Session Dress Code (*Trans.*1999:981)
- Availability of ADA House Materials to Members (*Trans.*1991:606)
- Availability of House of Delegates Transcripts (*Trans.*1990:570)
- Utilization of Multi-Council Task Forces (*Trans.*2001:447)
- Hyperlink Embedding in Policy Statements (*Trans.*2008:440)
- ADA Intellectual Property Licensing (*Trans.*2008:495)
- Conflict of Interest Policy (Disclosure Policy) (*Trans.*2010:624; 2011:537; 2013:341)
- Term Limits for ADA Delegates (*Trans.*2012:412)

Term Limits for Alternate Delegates (*Trans.2012:412*)  
Review of Association Policies (*Trans.2010:603; 2012:370*)

*Proposed Amendments to the Committee on Annual Meetings Charter.* The Board discussed this report in closed session. In open session, Dr. Stevens moved Resolution B-61 with the Committee's recommendation to adopt. On vote, Resolution B-61 was adopted by the Board of Trustees.

**B-61-2017. Resolved**, that the Committee on Annual Meetings (CAM) charter be amended as indicated (deletions ~~stricken through~~, additions underscored) in the attached charter, and be it further

**Resolved**, that the Governance Committee is authorized to place the revised charter in the Board Rules.

The Charter of the Committee on Annual Meetings, as amended, is appended (see page 183).

*Appointment of Committee on Annual Meetings Program Chairs.* On vote, the Board of Trustees adopted Resolution B-89.

**B-89-2017. Resolved**, Dr. Henry Evans and Dr. Nanette Tertel be elected to serve as CAM general members and Program/CE chairs for 2018 and 2019 respectively.

*Report of the Board Rules Subcommittee.* Dr. Lindsey Robinson, on behalf of the subcommittee, proposed several amendments to the *Organization and Rules of the Board of Trustees* for the Board's consideration. Resolutions B-77 and B-78 were moved with the Committee's recommendation to adopt. On vote, Resolutions B-77 and B-78 were adopted.

**B-77-2017. Resolved**, that to conform with the provisions of Chapter X, *Section 40* of the ADA *Bylaws*, the section of the *Organization and Rules of the Board of Trustees* entitled "Appointment of Council Chairs" shall be deleted and replaced as follows (additions underscored, deletions ~~stricken through~~):

**Appointment of Council Chairs:** ~~It is the duty of the Board of Trustees to appoint annually the chair of each council from the members of each council. As a means of increasing the involvement of council members in the selection of their respective chairs, the Board will annually request council members to nominate an individual to serve as chair, based on the Guidelines for the Selection of Council Chairs. Each council must submit the name of that nominee to the Board of Trustees for possible appointment, in accordance with the Bylaws, at its annual session meeting. The Board appoints the chair of the Council on Dental Education and Licensure from nominations submitted by the Council. One member of each council shall be selected annually by each council from among its members to serve as chair, with written notification to the Board of Trustees, with the exception of the Council on Dental Education and Licensure. The Chair of the Council on Dental Education and Licensure shall be selected by the Council, with written notification to the Board of Trustees, provided that every other year, the chair selected shall be a member of the Council elected by the House of Delegates in accordance with Chapter X, Section 20 of the Bylaws.~~

**B-78-2017. Resolved**, that the section of the *Organization and Rules of the Board of Trustees* entitled "Appointment of Consultants" be amended as follows (additions underscored, deletions ~~stricken through~~):

**Appointment of Consultants:** Consultants will be ~~approved~~ appointed in accordance with Chapter X, Section 50A of the *Bylaws*, when they are recommended to the Board of Trustees on the basis of technical qualifications essential to the program of the requesting agency. Councils shall make appointment of individuals who meet the following requirements:

- He or she must possess technical requirements essential to the program of the Council;
- He or she must comply with existing conflict of interest rules;
- He or she must be a member of the Association provided he or she is a dentist eligible for Association membership. Where the skills or expertise necessary to the Council cannot be found in a member dentist, however, the Council is permitted to select a non-member dentist possessing that skill or expertise as a consultant.

Each Council shall notify the Board in writing of the ~~selection of any~~ selected consultants through a written report at the first Board meeting following selection of the consultant or at the second Board meeting following selection of a consultant should that selection occur sooner than 30 days prior to the next scheduled Board meeting.

*ADA Reserve Policy.* Dr. Stevens moved Resolution B-79 with the Committee's recommendation to adopt. On vote, Resolution B-79 was adopted by the Board of Trustees.

**B-79-2017. Resolved,** Board Report 1 include information regarding the Board's conclusion that the following policy should be maintained without amendment:

**ADA Reserves (*Trans.2008:443; 2012:409*)**

**Resolved,** that the Board be urged to target the ADA's liquid reserves at a level of 50% of the Association's annual budgeted operating expenses. Liquid reserves are defined as the total net uncommitted balance of the Reserve Division Account, and be it further

**Resolved,** that upon a finding by the Board that a predicted drop in liquid reserves below 40% is unlikely to be corrected absent action by the Association, the Board be urged to reduce expenses even if such reduction results in delay in implementation of previously adopted House initiatives.

*Revised Information Technology Charter.* Dr. Stevens moved Resolution B-80 with the Committee's recommendation to adopt. On vote, Resolution B-80 was adopted by the Board of Trustees.

**B-80-2017. Resolved,** that the Information Technology Committee be eliminated effective the close sine die of the 2017 House of Delegates, and be it further

**Resolved,** that the Governance Committee is authorized to make conforming changes to the Board Rules.

*Potential Council on Dental Education and Licensure Restructuring.* Dr. Stevens reported that the Committee will not formally submit its proposal to restructure the Council on Dental Education and Licensure for consideration by the Board of Trustees.

**Report of the Information Technology Committee:** On behalf of the Information Technology Committee, Dr. Andrew Kwasny, chair, presented the report of the Committee's August 11, 2017, meeting. The report identified major topics discussed and actions taken.

**Report of the Strategic Planning Committee:** On behalf of the Committee, Dr. Jeffery Cole, chair, presented the report of the Committee's August 11, 2017, meeting. The report identified major topics discussed and actions taken.

## **Reports and Resolutions to the Board of Trustees**

### **Communications and Marketing**

**Report of the Council on Communications: Update on Resolution 67H-2016: Drive Utilization of Dental Services for ADA Members:** Ms. Stephanie Moritz, chief communications officer, presented this informational report that provided an update on the Resolution 67H-2016 Campaign to Increase Utilization of Dental Services. The ADA Find-a-Dentist tool launched in February and is surpassing expectations. In June, the ADA hired an outbound calling firm to further accelerate the population of the tool. The tool currently has more than 20,000 photo profiles, which is 52% of the year-end goal. The campaign launched on July 10. Metrics will be reported in the report for the September Board meeting.

### **Conferences and Continuing Education**

**Report of the Advisory Committee on Annual Meetings: Approval of 2018 Committee on Local Arrangements Chairs:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-69-2017. Resolved,** that the following nominations of the chairpersons to serve on the 2018 Committee on Local Arrangements made by Dr. Calbert Lum, general chair of the 2018 Committee on Local Arrangements, with concurrence of the Hawaii Dental Association, be approved.

Dr. Jaclyn Lum - Vice Chair  
Dr. Rachel Yorita - Programs Co-Chair  
Dr. Joseph Chu - Programs Co-Chair  
Dr. Derek Ichimura - Programs Co-Chair  
Dr. Darrell Teruya - Operations Co-Chair

**Non-Annual Meeting Lifelong Learning Update:** Dr. Kwasny and Mr. Goodman provided an update of what has been done related to non-Annual Meeting CE over the last few years; current plans, tactics and performance metrics being used; and future plans through the end of 2018.

### **Education/Professional Affairs**

**Report of the Workgroup on ADA/CODA Relationship:** This report provided information on the key issues considered at its May 9, 2017, meeting (consent calendar item).

**Update on the Dental Licensure Objective Structured Clinical Examination Steering Committee:** This oral report was presented in closed session.

### **Finance and Operations**

*Report on the Status of the 2017 Board Contingency.* It was reported that a Contingent Fund of \$1 million was authorized in the 2017 budget. The Board of Trustees approved total requests in the amount of \$1,366,605, leaving a deficit balance of \$(366,605).

### **Government and Public Affairs**

**Report of the Senior Vice President, Government and Public Affairs: Federal and State Legislative, Regulatory and Public Affairs Update:** Mr. Graham provided an update on developments in Washington, D.C. The following key issues were identified in this report: Affordable Care Act Reform, Regulatory Reform,

Action for Dental Health bill, Concerning State Issues -- Mid-level Legislation, CDHC Program, ER referral, and ADPAC. The report included a report of SPA program expenditures as of August 2017.

## Health Policy Institute

**Annual Report of the Health Policy Institute:** This annual report provided information on the activities of the HPI in the past year (consent calendar item).

## Legal Affairs

**Report of the Division of Legal Affairs: Summary of Litigation and Other Matters:** This confidential report was provided for the Board's information (consent calendar item).

## Member and Client Services

**Report of the Office of Student Affairs: American Student Dental Association Consultant Program—Approval of Consultants and Updated Guidelines:** The Board of Trustees adopted the following resolutions (consent calendar actions).

**B-67-2017. Resolved,** that the following nominations for the 2017-2018 ASDA Consultant Program be approved:

- Council on Access, Prevention and Interprofessional Relations – Mr. Jonathan Vogel, University of Texas at Houston, 2018
- Advisory Committee on Annual Meetings – Ms. Roopali Kulkarni, University of Pennsylvania, 2019
- Council on Communications – Mr. Ryan McCormick, Oregon Health Sciences University, 2019
- Council on Dental Benefit Programs – Mr. John Luke Andrew, University of Colorado, 2018
- Council on Dental Education and Licensure – Ms. Tanya Sue Maestas, University of Texas at Houston, 2018
- Council on Dental Practice – Ms. Sara Perrone, University at Buffalo, 2018
- Council on Ethics, Bylaws and Judicial Affairs – Mr. David Danesh, Harvard University, 2020
- Council on Government Affairs – Mr. Kyle Lantz, University of Colorado, 2018
- Council on Members Insurance and Retirement Programs – Ms. Molly Conlon, Boston University, 2019
- Council on Membership – Mr. Alex Mitchell, Temple University, 2018
- Council on Scientific Affairs – Mr. Andrew Larkin, Arizona School of Dentistry & Oral Health, 2019
- New Dentist Committee – Ms. Danielle Marciniak, Roseman University of Health Sciences, 2018
- American Dental Political Action Committee – Mr. Sean Aiken, University of Louisville, 2018
- Joint Commission on National Dental Examinations – Mr. Jeffrey Kerst, Louisiana State University, 2019

**B-68-2017. Resolved,** that the updated ASDA Consultant Guidelines, as presented in Appendix 1, be approved.

The ASDA Consultant Guidelines are appended as Appendix 2 (see page 187).

## **Practice Institute**

**Update on Dental Quality Alliance Activities:** Dr. Klemmedson provided an update on the activities of the DQA and reported on an unanticipated increase in the number of organizations seeking to become members of the DQA. In order to balance selectivity with inclusivity when considering new membership applications, it was reported that the DQA is embarking on a governance and membership study.

**Report of the Council on Dental Practice: Consultants for 2017-18:** This informational report provided a list of the 53 consultants appointed to serve on CDP until the close of the 2018 House of Delegates (consent calendar item).

**Report of the Council on Dental Practice: Unmet Needs of New Dentists:** This informational report provided an overview of strategic discussions between CDP and the New Dentist Committee on the unmet needs of new dentists to identify and evaluate resources already available, as well as to pinpoint content gaps that need to be filled in order to prepare new dentists to succeed (consent calendar item).

**Report of The Council on Dental Benefit Programs: Consultants for 2017-2018:** This informational report provided a list of the eight consultants appointed to serve on CDBP until the close of the 2018 House of Delegates (consent calendar item).

## **ADA Business Enterprises, Inc.**

**Report of ADABEI:** This informational report provided a summary of 2017 activities through May.

## **ADA Foundation**

**Report of the ADA Foundation: Response to ADA Board of Trustees Resolution B-59-2017:** This report was presented in closed session. In open session, the following resolution was considered and adopted without objection by the Board of Trustees.

**B-88-2017. Resolved,** that a grant of \$500,000 be given to the ADA Foundation in 2017 to be funded from Reserves.

## **Organizational/Other**

**Report of the Alliance of the American Dental Association:** The Alliance submitted an informational report in accord with Resolution 3H-2015, that appropriate ADA agencies are urged to periodically report on the philanthropic and advocacy activities of the Alliance of the American Dental Association. In a discussion, Dr. Marron-Tarrazzi questioned the level of ADA support of the Alliance as well as the possibility for providing additional resources for the Alliance. Dr. O'Loughlin stated that staff needed clear direction and asked the Board to clarify what level of support should be provided to the Alliance. It was determined that the Board did not have enough information to make any decisions. A motion was made to postpone discussion definitely until the September meeting. Hearing no objection, the motion to postpone definitely further discussion on the Report of the Alliance to the September meeting was adopted.

**Nominations to the Board of Directors of the American Dental Political Action Committee:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-66-2017. Resolved,** that the following nominees to the American Dental Political Action Committee Board of Directors be approved:

Dr. Giorgio T. Di Vincenzo, New Jersey (District 4)  
Dr. J. Michael Johnson, Kentucky (District 6)  
Dr. Gary R. Ackerman, California (District 13)



Dr. David A. Duncan, Texas (District 15)

**Report of the New Dentist Committee: Update:** Dr. Emily Ishkanian, chair, New Dentist Committee, presented a report on the New Dentist Committee's recent activities including potential New Dentist awards, committee liaison voting privileges, and NDC's chair nomination. The following resolutions were presented and adopted without objection by the Board of Trustees.

**B-72-2017. Resolved,** that Dr. Nipa Thakkar, Pennsylvania, be appointed to serve as chair of the New Dentist Committee for the 2017-18 term.

**B-73-2017. Resolved,** that in order to recognize the professional contributions of new dentists, the Board of Trustees authorizes the creation of a one-year pilot program for a 10 under 10 Award as part of the ADA Pride campaign, and be it further

**Resolved,** that the Board delegates the selection of the award winners to the New Dentist Committee, and be it further

**Resolved,** that the New Dentist Committee report back to the Board in 2018 with a recommendation on whether or not to continue the award.

**B-74-2017. Resolved,** that the Board of Trustees supports giving the New Dentist Committee liaison to each of the following entities a right to vote:

- Committee on Annual Meetings (CAM)
- Council on Advocacy for Access and Prevention (CAAP)
- Council on Communications (CC)
- Council on Dental Benefit Programs (CDBP)
- Council on Dental Education and Licensure (CDEL)
- Council on Dental Practice (CDP)
- Council on Ethics, Bylaws and Judicial Affairs (CEBJA)
- Council on Government Affairs (CGA)
- Council on Membership (CM)
- Council on Members Insurance and Retirement Programs (CMIRP)
- Council on Scientific Affairs (CSA)
- ~~American Dental Politician Action Committee (ADPAC)~~

and be it further

**Resolved,** that the Board of Trustees directs the New Dentist Committee to confer with the Council on Ethics, Bylaws and Judicial Affairs to prepare a report and resolution to the House of Delegates that outlines necessary *Bylaws* amendments for consideration by the Board at its September 2017 meeting.

**Report of the Board of Trustees: Authority to Approve the Budget:** A motion was made to postpone definitely discussion on the Board Report to the September Board meeting. The motion to postpone definitely was adopted by the Board of Trustees.

**Report of the President:** Dr. Gary Roberts presented an oral report that summarized his activities since the May Board meeting.

**Report of the President-elect:** Dr. Joseph Crowley gave an oral report of meetings attended and trips taken since the May Board meeting.

**Report of the Executive Director:** Dr. Kathleen O'Loughlin gave an oral report of meetings attended and trips taken since the May Board meeting as well as updates about of PE conference. Dr. O'Loughlin also reported that there has been an increase of requests from states for governance training.

*Update on Membership Numbers and Dentists Moving Across State Lines:* Mr. Bill Robinson presented a mid-year update on membership numbers and reported an increase in market share compared to June 2016.

## **Liaison Reports**

**Report of Dr. Daniel J. Klemmedson, Liaison to the Council on Scientific Affairs (CSA):** This report summarized the July 10–11, 2017, CSA meeting. Dr. Klemmedson reported that the areas of expertise desired for 2018 incoming members, in order of priority, are: 1) dental pharmacology, 2) oral medicine, 3) cariology, and 4) evidence-based dentistry.

**Report of Dr. Chad P. Gehani, Liaison to the Joint Commission on National Dental Examinations:** This report was presented in a closed session.

**Report of Dr. Raymond A. Cohlma, Liaison to the American Student Dental Association (ASDA):** This informational report summarized the July 23, 2017, ASDA meeting (consent calendar item).

**Report of Dr. Raymond A. Cohlma, Liaison to the Commission on Dental Accreditation (CODA):** This informational report summarized the August 3–4, 2017, CODA meeting.

## **Special Orders of Business/Special Appearances**

**Presentation—Mr. Robert Stevenson, SpeakInc.:** Mr. Robert Stevenson, an expert at building a high performance culture, improving efficiency and accelerating growth, presented on the importance of embracing change.

**Presentation—Frog Design Inc.:** Ms. Turi McKinley, executive director, and Mr. Geoffrey Schwartz, strategy director, Frog Design, presented findings based on Frog Design's study of possible new business models that would achieve two important objectives: financial sustainability and member engagement. This presentation took place in closed session on Sunday, August 15, 2017.

**Board Strategic Discussion: Managing Risk in a Multi-Media World:** Ms. Stephanie Moritz, chief communications officer, and Ms. Leslee Williams, senior director, Communications, led a presentation on ADA's 2016 media coverage. It was reported only 5% of coverage relating to the ADA was negative. It was also reported how the ADA deals with media inquiries. Some work is proactive, where ADA pushes out the story, and some is reactive, where ADA responds to developments being covered by the media. Sometimes a response to negative coverage is essential. At other times, a response will simply prolong negative coverage. ADA looks at specific case studies to better understand how this sort of coverage develops. Other media strategies were presented, such as the utilization of paid search, ads and other paid content promotion. Additionally the importance of the "White Hat" approach, or telling positive stories, was reported.

**Presentation—Digital Member Experience:** Ms. Jenn Sutherland, director, Digital Marketing, and Mr. Ken Zenger, project manager, Information Technology, presented an overview on the Digital Member Experience, a three-year strategic initiative that will evolve the ADA to become the in-demand online resource for today's dentists. The initiative will enhance content discovery and search, making it easier for members to find what they need quickly. The Digital Strategy will deliver continual experience enhancements over time, integrating member feedback throughout, ensuring alignment with member needs. The ADA has partnered with Digital Agency Wire Stone to support strategy development and site design. Upcoming product releases include the virtual study club, geo-targeted content module for ADA.org and Credentialing.

## Reports and Resolutions to the House of Delegates

### Reports and Resolutions Relating to Reference Committee A (Budget, Business, Membership and Administrative Matters)

**Board of Trustees Resolution 18: Revision of the Policy, Funding of Visits by ADA Officers** (*Worksheet:2002*). The Board of Trustees voted to transmit Resolution 18 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Board of Trustees Resolution 19: Amendment of the Policy, Transparency** (*Worksheet:2004*). The Board of Trustees voted to transmit Resolution 19 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Council on Membership Resolution 28: Implementation of a Uniform Dues Transaction** (*Worksheet:2006*). The Board of Trustees voted to transmit Resolution 28 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Report 6 of the Board of Trustees to the House of Delegates: Program Assessment Criteria** (*Worksheet:2008*). The Board of Trustees transmitted the following resolution to the House of Delegates.

*Resolution 29—Program Assessment Criteria (Worksheet:2008)*. The Board of Trustees voted to transmit Resolution 29 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Report 9 of the Board of Trustees to the House of Delegates: Amendment of ADA Bylaws with Respect to the Executive Director** (*Worksheet:2011*). The Board of Trustees transmitted the following resolution to the House of Delegates.

*Resolution 31—Amendment of ADA Bylaws with Respect to the Executive Director (Worksheet:2012)*. The Board of Trustees voted to transmit Resolution 31 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Board of Trustees Resolution 32: Special Assessment** (*Worksheet:2013*). The Board of Trustees voted to transmit Resolution 32 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Report 5 of the Board of Trustees to the House of Delegates: Compensation and Contract Relating to the Executive Director** (*Worksheet:2016*). The Board of Trustees voted to transmit Report 5 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

**Report 8 of the Board of Trustees to the House of Delegates: Members First 2020 Strategic Plan Change** (*Worksheet:2018*). The Board of Trustees voted to transmit Report 8 to the House of Delegates. (Vote: Unanimous)

**Report 2 of the Board of Trustees to the House of Delegates: 2018 Budget** (*Worksheet:2020*). Following discussion of the proposed 2018 budget, the Board of Trustees transmitted the following resolutions to the House of Delegates.

*Resolution 22—Approval of 2018 Budget (Worksheet:2060)*. The Board of Trustees voted to transmit Resolution 22 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

*Resolution 23—Establishment of Dues Effective January 1, 2018 (Worksheet:2061)*. The Board of Trustees voted to transmit Resolution 23 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

### Reports and Resolutions Relating to Reference Committee B (Dental Benefits, Practice and Related Matters)

**Council on Dental Benefit Programs Resolution 12: Rescission of Policy, Coordination of Benefits Reform** (*Worksheet:3000*). The Board of Trustees voted to transmit Resolution 12 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Benefit Programs Resolution 13: Rescission of Policy, Patient's Right to Assign Payment** (*Worksheet:3002*). The Board of Trustees voted to transmit Resolution 13 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Benefit Programs Resolution 14: Rescission of Policy, Dentist's Right to Participate in Dental Prepayment Plan** (*Worksheet:3004*). The Board of Trustees voted to transmit Resolution 14 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Benefit Programs Resolution 15: Revision of Policy, Authorization of Benefits** (*Worksheet:3006*). The Board of Trustees voted to transmit Resolution 15 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Benefit Programs Resolution 16: Amendment of Policy, Statement on Dentist Health and Wellness** (*Worksheet:3007*). The Board of Trustees voted to transmit Resolution 16 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Benefit Programs Resolution 17: Response to Resolution 96H-2015: Development of ADA Policy on Dentistry's Role in Sleep-Related Breathing Disorders** (*Worksheet:3009*). The Board of Trustees voted to transmit Resolution 17 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

#### **Reports and Resolutions Relating to Reference Committee C (Dental Education, Science and Related Matters)**

**Council on Dental Education and Licensure Resolution 8: Rescission of the Policy, Cardiopulmonary Resuscitation Instruction** (*Worksheet:4000*). The Board of Trustees voted to transmit Resolution 8 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Education and Licensure Resolution 9: Response to Resolution 19H-2016: Recognition of Operative Dentistry as an Interest Area in General Dentistry** (*Worksheet:4002*). The Board of Trustees voted to transmit Resolution 9 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Education and Licensure Resolution 10: Amendment of the Policy Statement on Continuing Dental Education** (*Worksheet:4003*). The Board of Trustees voted to transmit Resolution 10 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Education and Licensure Resolution 11: Policy on State Dental Board Recognition of the Commission for Continuing Education Provider Recognition** (*Worksheet:4005*). The Board of Trustees voted to transmit Resolution 11 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Joint Commission on National Dental Examinations Resolution 20: Amendment of the Joint Commission on National Dental Examinations Bylaws** (*Worksheet:4008*). The Board of Trustees voted to transmit Resolution 20 to the House of Delegates with the following comment and recommendation to vote no. (Vote: Unanimous)

While the ADA Board of Trustees appreciates the Joint Commission's desire to be more flexible in its ability to offer licensure exams for oral health professionals other than dentists and dental hygienists, the Board is not aware of any organizations or state dental boards that are requesting the Joint Commission to develop and administer licensure exams in other oral health disciplines. In addition, if the Joint Commission's intent is to begin the process of developing licensure exams in an oral health care discipline that is not national in scope, the Board has significant concerns about the long-term negative impact on the Joint Commission's budget in developing exams that no, or very few, candidates for licensure will take.

**Joint Commission on National Dental Examinations Resolution 21: Amendment of the Joint Commission on National Dental Examinations Standing Rules** (*Worksheet:4017*). The Board of Trustees voted to transmit Resolution 21 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Report 7 of the Board of Trustees to the House of Delegates: Proposed National Commission on Recognition of Dental Specialties and Certifying Boards** (*Worksheet:4027*). The Board of Trustees transmitted the following resolution to the House of Delegates.

*Resolution 30—Proposed National Commission on Recognition of Dental Specialties and Certifying Boards* (*Worksheet:4027*). The Board of Trustees voted to transmit Resolution 30 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

#### **Reports and Resolutions Relating to Reference Committee D (Legislative, Health, Governance and Related Matters)**

**Council on Ethics, Bylaws and Judicial Affairs Resolution 3: Amendment to Chapter I, Section 20.A. of the ADA Bylaws: The Meaning of Equivalent Degree** (*Worksheet:5003*). The Board of Trustees voted to transmit Resolution 3 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Ethics, Bylaws and Judicial Affairs Resolution 4: Amendment to Chapter I, Section 20.A. of the ADA Bylaws: Licensure Requirement by Statute for Constituent Membership** (*Worksheet:5005*). The Board of Trustees voted to transmit Resolution 4 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Ethics, Bylaws and Judicial Affairs Resolution 5: Amendment to Chapter I of the ADA Bylaws: Addition of Section 30. Review of Licensure Status** (*Worksheet:5007*). The Board of Trustees voted to transmit Resolution 5 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Ethics, Bylaws and Judicial Affairs Resolution 6: Amendment to Section 4.A. of the ADA Principles of Ethics and Code of Professional Conduct** (*Worksheet: 5013*). The Board of Trustees voted to transmit Resolution 6 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Council on Ethics, Bylaws and Judicial Affairs Resolution 7: Amendment to ADA Bylaws Pursuant to 118-2014** (*Worksheet:5018*). The Board of Trustees voted to transmit Resolution 7 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Council on Ethics, Bylaws and Judicial Affairs Resolution 61-2016: ADA Constitution and Bylaws Review Pursuant to Resolution 118H-2014** (*Worksheet:5023*). Because Resolution 61-2016 proposed amendments to the *ADA Constitution*, in accordance with the *ADA Constitution*, Article VIII. AMENDMENTS, this resolution was laid over to the 2017 House of Delegates. The Board of Trustees voted to transmit Resolution 61-2016 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

### **Miscellaneous House Matters**

**Report 1 of the Board of Trustees to the House of Delegates: Association Affairs and Resolutions** (*Worksheet:1000*). The Board of Trustees voted to transmit Report 1 to the House of Delegates. (Vote: Unanimous)

**Board of Trustees Resolution 27: Nominations to Councils, Commissions and the New Dentist Committee** (*Worksheet:1020*). The Board of Trustees voted to transmit Resolution 27 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

### **Closed Session**

Closed sessions of the Board of Trustees were held at various times during the August 13–15, 2017, meeting of the Board of Trustees. The minutes of the closed sessions are separately recorded; however, non-confidential actions taken by the Board are reflected in the minutes of the open session. The following reports were considered during the closed sessions:

- Frog Design Presentation and Discussion
- Report of Dr. Chad Gehani, Liaison to the Joint Commission on National Dental Examinations
- Update on the Dental Licensure Objective Structured Clinical Examination Steering Committee
- Report of the ADA Foundation: Response to ADA Board of Trustees Resolution B-59-2017
- Report of the Compensation Committee
- CAM Nomination Discussion
- Council on Ethics, Bylaws and Judicial Affairs Resolution 6: Amendment to Section 4.A. of the *ADA Principles of Ethics and Code of Professional Conduct*

### **Adjournment**

Without objection, the fifth regular meeting of the Board of Trustees adjourned *sine die* on August 15, 2017 at 12:01 p.m.

## APPENDIX 1

### ADVISORY COMMITTEE ON ANNUAL MEETINGS CHARTER

*Purpose.* The primary purpose of the Committee on Annual Meetings (CAM) is to provide oversight in a manner that provides an exceptional member experience at the annual meeting, to provide meeting oversight in a manner that generates non-dues revenue, and to advise the Board on matters relating to the Committee's duties.

*Composition and Selection.* The Committee on Annual Meetings shall consist of thirteen (13) members: nine (9) general members, two (2) Local Arrangements members, and two (2) trustees or vice presidents.

*General member selection:* The Board shall select the members to fill open positions on the committee based on nominations from any Board member. The nine (9) general members shall be selected based on specific skill sets. All nominees to the Committee shall meet the one or more criteria listed below:

General Committee members must have experience with one or more of the following areas:

- Continuing Education
  - content curation and/or speaker selection,
  - continuing education planning or dental education experience at local, state, regional or national dental meetings
  - university or corporate professional continuing education planning
  - knowledge of the current speaking circuit.
- Exhibitor Relations
- Meeting logistics

General Committee members must also meet the following requirements:

- No general committee members shall serve simultaneously in leadership on any constituent, component or significant private meetings.
- ~~General Committee members shall not participate in leadership of the Hinman, Greater New York, Yankee Dental, Chicago Midwinter or California Dental Association meetings during any part of the three years immediately preceding assuming a position on CAM.~~
- Prior to assuming a position on CAM, a General Committee member must agree, in a form approved by the ADA Legal Division, not to serve on the board of any constituent, component or significant private meetings the Hinman, Greater New York, Yankee Dental, Chicago Midwinter or California Dental Association meeting for two years after leaving CAM.
- Each general member shall sign a conflict of interest and non-disclosure form.

*Local Arrangements Member Selection:* The Board shall approve one (1) member from the state hosting the current year's meeting and one (1) member from the following year's meeting location. A letter will be sent from the Committee to the state dental organization in which the annual meeting will take place two and a half years prior to the scheduled meeting, requesting a nomination from that state to serve on the Committee. The nominee shall be submitted to the President for approval by the Board prior to becoming a member of the Committee.

*Two Trustees or Vice Presidents:* Two (2) Board of Trustee members (trustees or vice presidents), appointed by the President, shall be members of CAM without the right to vote.

*Liaisons:* The Committee shall have two (2) liaisons, one (1) from the New Dentist Committee (NDC) and one (1) from the American Student Dental Association (ASDA), both non-voting and selected by their representative committee and organization and confirmed by the President. The Committee may have

liaisons from other councils, committees or commissions or other outside entities with the approval of the President.

*Term.* The nine (9) general members are to each serve a single staggered ~~four (4)~~ five (5) year term; the two (2) Local Arrangements members are to each serve a single two (2) year term; the two (2) trustees or vice presidents shall each serve a single two (2) year term; the New Dentist Committee liaison and ASDA liaison are to each serve a one (1) year term.<sup>1</sup>

*Vacancies:* The President shall appoint a general committee member subject to Board approval if a vacancy occurs. If the term of the vacated general member position has less than fifty percent (50%) of a full four-year term remaining at the time the successor general member is appointed or elected, the successor general member shall be eligible for election to a new four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment, the successor general member shall not be eligible for another term.

*Chair, Vice Chair, General Chairs:* The Committee shall have a Chair, Vice Chair, General Chair of the [current year] Meeting, General Chair of the [following year] Meeting and General Chair of the [second following year] Meeting.

*Duties of Committee Chair:* In ~~collaboration~~ consultation with the General Chair and committee staff, the Committee Chair shall be responsible for the governance of the Committee and shall preside over all Committee meetings, develop meeting agenda and, in general, assure appropriate functioning of the Committee.

*Duties of Committee Vice Chair:* The Committee Vice Chair shall assist the Committee Chair in his or her duties, shall fulfill the duties of the Committee Chair in his or her absence, and shall succeed to the position of Committee Chair at the end of the Committee Chair's term or when that position is vacated.

*Duties of General Chair of the [year] Meeting:* The General Chair of the [year] Meeting shall collaborate with the Committee Chair on operations of the Committee. The General Chair shall oversee the carrying out of the Committee's duties with respect to the meeting for which he or she serves as General Chair. The General Chair shall provide reports to the Committee Chair in the usual course of his or her duty and shall provide reports to the Committee at the request of the Committee Chair. The General Chair may make appointments from among CAM members to carry out these duties.

*Selection of Committee Vice Chair and Committee Chair:* The Committee Vice Chair shall be named by the President, with Board approval, from among Board trustees and vice presidents, for a total term of two years. Following one year as Committee Vice Chair, he or she shall automatically succeed to the position of Committee Chair for one year.<sup>2</sup>

*Selection of General Chairs of the Meetings:* The Committee shall elect the General Chair of the [year] Meeting three years prior to the year meeting for which he or she will serve as General Chair. Members of the Committee interested in that position will submit their curriculum vitae and statements of interest two months prior to the nominee selection process.

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<sup>1</sup> To take effect at the close of the 2017 House meeting, the Board shall select two members for one year terms; two members for two year terms; two members for three year terms; ~~and, three two~~ two members for four year terms, and one member for a five year term. This footnote shall expire after the close of the 2021 House of Delegates.

<sup>2</sup> Initially, the President shall appoint, with Board approval, two trustees or vice presidents to CAM, to take a seat after the close of the 2017 House. One trustee shall be the Committee Chair, with a term of one year. The other trustee shall serve a two year term and shall be Committee Vice Chair in his or her first year on the committee. This footnote shall expire at the end of the 2018 House of Delegates.



Each nominee will be given equal time to present a nominating speech to the Committee. The Committee shall select the nominee by majority vote.<sup>3</sup>

*Program Chair.* The General Chair of each Meeting may select the Program (or CE) chair for that meeting.

*Ad Hoc Committees and Subcommittees.* The Committee shall have an Ad Hoc Committee on Local Arrangements for the current year's annual meeting and a Second Ad Hoc Committee on Local Arrangements for the following year's annual meeting.

The First Ad Hoc Committee shall be made up of the designated Local Arrangements member that sits on the Committee on Annual Meetings. This person shall serve as the chair of this committee. He or she shall choose up to five (5) other committee members from the district in which the meeting is being held. The committee is to function on a local basis in the recruitment of volunteers for the annual meeting and to help onsite during the annual meeting. Only the chair of the committee is a member of the Committee on Annual Meetings.

The Second Ad Hoc Committee shall be made up of the designated Local Arrangements member that sits on the Committee on Annual Meetings. This person shall serve as the chair of this committee. He or she shall choose up to five (5) other committee members from the district in which the meeting is being held. The committee is to function on a local basis in the recruitment of volunteers for the annual meeting and to help onsite during the annual meeting. Only the chair of the committee is a member of the Committee on Annual Meetings.

The Committee on Annual Meetings may have other ad hoc committees or subcommittees as it deems appropriate.

*Budget.* Funding for the work of the Committee shall come from the budget of the Division of Conferences and Continuing Education.

*Meetings.* The Committee on Annual Meetings will meet at a minimum one time per year in person. The Committee may meet in person additionally as needed to fulfill its work and subject to funding. The Committee may meet by conference call to adequately fulfill all the obligations and duties outlined in the charter. All Committee members are expected to attend each meeting, in person or electronically. In addition, subcommittees may meet in person, subject to funding, or by conference call. The Committee shall utilize ADA Connect to the extent practical to carry out its work.

*Meetings of the Exhibitor Advisory Committee<sup>4</sup>:* The General Chair of the current Meeting shall nominate to the President for the President's approval one or two committee members to attend meetings of the Exhibitor Advisory Committee.

*Confidentiality.* All information regarding future ADA meetings shall be considered confidential unless otherwise noted.

*Duties.* The Committee shall provide oversight and advice on:

- Strategic planning – based on organizational strategic plan and goals; advise the Board on how annual meetings align and assist in the delivery of the plan goals.
- Continuing Education Program – Oversee the development the CE program.

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<sup>3</sup> The current chair for the 2018 Meeting shall be the General Chair of the 2018 Meeting. The Board shall select the General Chair of the 2019 Meeting. The Committee shall elect the General Chair of the 2020 Meeting in accordance with this charter. This footnote shall expire at the end of the 2020 House of Delegates.

<sup>4</sup> A committee of vendors; not an ADA committee.

- Exhibitor Relations.
- Special Events.
- Networking for members and attendees outside of scheduled social / special events.
- Site Selection –Recommend to the Board for its approval site selection criteria for future meeting locations and, after consultation with the Speaker and Secretary of the House of Delegates, recommend to the Board for its approval locations that meet this criteria.
- Onsite Meeting Management – Assist staff and local volunteers with the onsite management and execution of the annual meeting.
- Scouting—Propose to the Board for its approval a specific scouting plan necessary to carry out these duties.

## APPENDIX 2

### ASDA Consultant Guidelines

#### Proposed changes (new language underscored; deletions stricken through)

#### Purpose

Through the ASDA Consultant Program, one student participates as a consultant to all American Dental Association (ADA) Councils and select Committees and Commissions for a one-year term, expiring annually at the adjournment of the ADA House of Delegates, unless otherwise noted. Through collaboration with the American Student Dental Association (ASDA), the ADA Office of Student Affairs (OSA) supports and coordinates the program.

The ASDA Consultant Program offers the opportunity to accomplish three important goals:

- To facilitate the development of future leadership in organized dentistry
- To provide the student perspective in agency discussions
- To enhance the relationship between the ADA and ASDA.

#### Participating ~~Councils~~ Agencies

Every ADA Council and ~~the ADA New Dentist Committee~~ select Committees of the Board of Trustees shall receive one ASDA consultant:

- New Dentist Committee
- ~~Council on ADA Sessions~~ Advisory Committee on Annual Meetings
- Council on Advocacy for Access and Prevention, ~~and Interprofessional Relations~~
- Council on Communications
- Council on Dental Benefit Programs
- Council on Dental Education and Licensure
- Council on Dental Practice
- Council on Ethics, Bylaws, and Judicial Affairs
- Council on Government Affairs
- Council on Members Insurance and Retirement Programs
- Council on Membership
- Council on Scientific Affairs

#### Consultant Selection

The ASDA shall nominate the consultants by forwarding a list of the students, and their associated agencies, to the ADA Office of Student Affairs by June 1 annually. The OSA will submit the nominations to the ADA Board of Trustees for consideration by the established deadline. ASDA Consultant terms begin following the close of the ADA House of Delegates and extend through the following ADA House of Delegates.

Students nominated to these consultant positions should have experience or interest in the topical area addressed by the ~~Council~~ agency and should be available to attend meetings as scheduled. It is recommended that students not be nominated to serve on more than one agency per year.

#### Meeting Attendance

The ASDA consultant shall attend all days of all meetings of the ~~Council~~ agency to which s/he is appointed, except portions of meetings held in confidential, executive or attorney-client sessions. In addition, the ASDA consultant will also participate in any orientation program for new ~~Council~~ agency members. The exception is the Council on Members Insurance and Retirement Programs (CMIRP), where the ASDA consultant will attend only one Council meeting, and not orientation.

## Consultant Substitution

As noted above, all ADA consultants, including the ASDA consultants, are appointed by the ADA Board of Trustees. Therefore, it is not appropriate to simply substitute an alternate ASDA volunteer leader. Upon the request of ~~the American Student Dental Association-ASDA~~ and the Council agency, a new ASDA consultant may be approved by the ADA president to attend the meeting and fulfill the requirements of the consultant position. In the rare case that this occurs, the consultant is requested to contact the ADA Office of Student Affairs as soon as possible prior to the Council agency meeting.

## Council Participation

Except with respect to confidential, executive or attorney-client matters, the ASDA consultant will receive the Agenda Book and all meeting materials, and will participate on the Council agency listserv or any other Council agency-wide communication. While not allowed to vote, ASDA consultants may participate in Council agency discussions. Exceptions include ~~the Council on Members Insurance and Retirement Programs- (CMIRP)~~ and the Council on Scientific Affairs (CSA). In CMIRP, the ASDA consultant will be provided with an Agenda Book to use at the meeting only, and may not be included in Council electronic communications. In CSA, the ASDA consultant will not receive Agenda Book material or other communications marked "confidential" because of the proprietary content. Similar limitations may be imposed by other Councils agencies as appropriate.

## Confidentiality

The purpose of council agency reports and communications are to facilitate the work of the Council agency. They may not be disseminated outside the Council agency, nor is it appropriate to recount agency discussions or disseminate Council agency minutes. Every Council agency prepares a Summary of Major Actions shortly after the close of each Council meeting. The ASDA consultant may distribute the Summary of Major Actions.

## Required Reports

In collaboration with the ASDA consultant, the ASDA executive director or other assigned individual shall forward a written report to the Councils agencies in advance of the meeting date. The ASDA consultant report will provide an overall summary of ASDA activities and positions, as well as any information from the student perspective that bears upon the Council's agency's purview and agenda. Within this report, the ASDA consultant shall address any topic that ASDA wishes the Council agency to consider. To facilitate this, Council agency chairs are encouraged to share meeting agendas with ASDA, as appropriate. The Council agency chair or director may include oral remarks from the ASDA consultant in the agenda, as well. Within two weeks following each Council agency meeting, the ASDA consultant shall provide a summary to the ASDA executive director for distribution to the ADA Board of Trustees. The summary outlines the ASDA consultant's role in the meeting and highlights any topics that may impact students and if further discussion is requested with the ASDA Executive Committee.

## Expense Reimbursement

The ADA Office of Student Affairs will budget funds to reimburse ASDA consultants to ADA ~~Councils and the ADA New Dentist Committee~~ agencies for expenses in accordance with the ADA Volunteer Travel and Expense Policy. ASDA consultants will make their air travel arrangements through ~~Gant Fox World Travel~~ (the ADA travel service) unless instructed otherwise by the Council agency director; these charges will be billed to the ADA. ASDA consultants shall pay all other expenses and submit an expense report to the ADA Office of Student Affairs for repayment. Lodging (room and tax only) and necessary ground transportation will be reimbursed, and a stipend for each meeting day will be provided to cover meals and any incidental expenses consistent with ADA's reimbursement policies. Students also have the option to bill their lodging expenses directly to the ADA rather than be reimbursed, and they may work with ~~Council or Commission~~ agency staff to do so. If the ASDA consultant participates in any Council agency dinner or social activity, the cost of this function will be ~~deducted from their stipend~~ covered by the agency's budget.

### **Student Representation on Other Agencies**

In addition, there are three other agencies that include and budget for a student representative:

- Board of the American Dental Political Action Committee (ADPAC),
- Commission on Dental Accreditation (CODA)
- Joint Commission on National Dental Examinations (JCNDE)

The provisions of the ASDA Consultant Program apply to these agencies as allowable within agency rules. A few exceptions apply:

- ADPAC – the student representative is a full, voting member of the ADPAC Board.
- CODA – the student commissioner is jointly appointed by ASDA and the American Dental Education Association (ADEA) to represent all students including those studying dentistry, hygiene, and dental laboratory technology, and is considered a full, voting member of the Commission. The CODA representative serves a two-year term.
- JCNDE – there is one student commissioner and one student observer. The current student commissioner serves one year and is a voting member. The student observer is not a voting member and will serve as commissioner the following year.

ASDA representatives to these ~~councils~~ agencies should submit expense reports as instructed by the agencies.

The ADA Office of Student Affairs coordinates the ASDA Consultant Program and can be reached at 800.621.8099, ext. 7470 or [studentaffairs@ada.org](mailto:studentaffairs@ada.org).

## Minutes of the Board of Trustees

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September 16–18, 2017

Headquarters Building, Chicago

**Call to Order:** The sixth regular meeting of the Board of Trustees of the American Dental Association was called to order by Dr. Gary L. Roberts, president, on Saturday, September 16, 2017, at 8:30 a.m. in the Board Room of the ADA Headquarters Building, Chicago.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Gary L. Roberts, Joseph P. Crowley, Irene Marron-Tarrazzi, G. Lewis Mitchell, Glen D. Hall, Ronald P. Lemmo, Kathleen T. O'Loughlin, Rickland G. Asai, Robert N. Bitter, Richard C. Black, Raymond A. Cohlmia, Jeffrey M. Cole, Judith M. Fisch, Chad P. Gehani, Gary E. Jeffers, Daniel J. Klemmedson, Andrew J. Kwasny, Billie Sue Kyger, Kenneth McDougall, Kirk M. Norbo, Lindsey A. Robinson, Cesar R. Sabates, Alvin W. Stevens, Jr., and W. Roy Thompson.

Following the roll call, Dr. Hall announced that a quorum was present.

The following ADA staff were in attendance for all or portions of the meeting at the invitation of the president: Marcelo Araujo, vice president, Science Institute; Jerome K. Bowman, chief, Governance and Strategy Management; J. Craig Busey, Esq., general counsel; Judith Fleeks, vice president, Human Resources; James Goodman, vice president, Conferences and Continuing Education; Michael A. Graham, senior vice president, Government and Public Affairs; Toni Mark, chief technology officer; Stephanie Moritz, chief communications officer; David Preble, vice president, Practice Institute; Bill Robinson, vice president, Member and Client Services; Paul Sholty, chief financial officer; Michael D. Springer, senior vice president, Business and Publishing; Marko Vujicic, chief economist and vice president, Health Policy Institute; James Willey, senior director, Practice Institute; and Anthony Ziebert, senior vice president, Education/Professional Affairs.

Guests in attendance for a portion or portions of the meeting included: Dr. Emily R. Ishkanian, chair, New Dentist Committee; Dr. Mark Livingston, chair, Commission on Dental Accreditation; and Dr. William Calnon, president and interim executive director, ADA Foundation.

Others in attendance for all or portions of the meeting were: Tomisena Cole, senior manager, Board and House Matters; Thomas C. Elliott, Jr., Esq., deputy general counsel; Judith Jakush, editor, *ADA News*; Michelle Kruse, director, Administrative Services; Molly Potnick, coordinator, Board and House Matters; Robert Quashie, senior director, Business Performance and Transformation; Kyle Smith, manager, House of Delegates; and Wendy Wils, Esq., deputy general counsel. Other ADA staff members were in attendance for specific agenda items.

Before consideration of business, Dr. Roberts called attention to the ADA Disclosure Policy statement included on the meeting agenda and the requirement to disclose any conflicts of interest. No conflicts were disclosed at this time.

## Preliminary

### Approval of Agenda and Consent Items

*Approval of Agenda.* Before requesting approval of the agenda, Dr. Roberts asked if there were any items of new business; the following item was added to the agenda:

- Consideration of ADA contribution to the ADA Foundation for Disaster Relief Efforts

On vote, the Board adopted the agenda.

**B-96-2017. Resolved**, that the agenda be approved as the official order of business for the current meeting of the Board of Trustees except that the President may alter the order of the agenda when necessary to expedite business.

*Approval of Consent Calendar.* Dr. Roberts reviewed the list of proposed consent items; the following items were removed from consent:

- Report of the Vice President, Member and Client Services: Revised Dental School Strategy
- Fourteenth Trustee District: CE Credit for Delegates and Alternates of the ADA House of Delegates (Resolution 37)

Without objection, the amended consent calendar was adopted.

**B-97-2017. Resolved**, that the resolutions contained on the Consent Calendar for Board of Trustees consideration, as amended, be approved and reports be filed, and be it further

**Resolved**, that the recommendations and reports to the House of Delegates be accepted.

### Approval of Minutes of Previous Sessions

*Minutes of the August 13–15, 2017, Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar item).

**B-98-2017. Resolved**, that the minutes of August 13-15, 2017, meeting of the Board of Trustees be approved.

### Reports of Standing Committees of the Board of Trustees

**Report of the Audit Committee:** On behalf of the Committee, Dr. Gary Jeffers, chair, presented the report of the Audit Committee's September 14, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

Dr. Jeffers moved Resolution B-109 with the Committee's recommendation to adopt. On vote, Resolution B-109 was adopted by the Board of Trustees.

**B-109-2017. Resolved**, that the Governance Committee examine the term and tenure of House of Delegates members on the Board's committees and propose an amendment to the *Organization and Rules of the Board of Trustees* that would provide a mechanism for resetting the terms of the House members of Board committees when circumstances result in the terms of the House of Delegates members serving on any committee being the same.

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Jeffrey Cole, chair, presented the report of the Budget and Finance Committee's September 14–15, 2017, meeting. The report identified major topics discussed, reports received and actions taken. Dr. Thomas Paumier, member of the Budget and Finance Committee, participated via conference call.

Dr. Cole moved Resolution B-104 with the Committee's recommendation to adopt. On vote, Resolution B-104 was adopted by the Board of Trustees.

**B-104-2017. Resolved,** that following each meeting of the Board of Trustees, HOD members serving on Board Standing Committees be given access to the Board's unofficial actions as well as the Board recap.

Without objection, the Board approved a request to send Board Recaps to the New Dentist Committee.

Dr. Cole moved Resolution B-105 with the Committee's recommendation to adopt. Without objection, the Bridge Governance Charter was amended to add a second volunteer member and to strike 2018 from the document. On vote, Resolution B-105 was adopted by the Board of Trustees.

**B-105-2017. Resolved,** that the following governing documents as presented to the Board relating to the "Bridge" project are approved:

- Charter: Bridge Management
- Charter: Bridge Governance
- Expenditure Authorization Process for the Bridge Project

The Bridge Management Charter, Bridge Governance Charter and Expenditure Authorization Process for the Bridge Project are appended on pages 206–210.

Dr. Cole moved Resolution B-106 with the Committee's recommendation to adopt. On vote, Resolution B-106 was adopted as amended by the Board of Trustees.

**B-106-2017. Resolved,** that the following appropriation be made from Reserves and be allocated to line items in separately stated cost center in accordance with the terms of the appropriation request for work on the Bridge Project.

*Bridge Project*

(Cost Center: XXX-XXXX-XXX)

**Up to \$3.5 million total, with up to \$3 million for the Definition Phase and up to \$500,000 for the Design & Build Phase**

**Report of the Compensation Committee:** On behalf of the Compensation Committee, Dr. Red Stevens, chair, reported on non-confidential actions taken at the Committee's September 15, 2017, meeting. The remainder of this report was considered during a closed session.

**B-107-2017.** (Confidential Action Temporarily Embargoed)

**Report of the Diversity and Inclusion Committee:** On behalf of the Diversity and Inclusion Committee, Dr. Andrew Kwasny, chair, presented the report of the Committee's September 15, 2017, meeting. The report identified major topics discussed, reports received and actions taken.

**Report of the Governance Committee:** On behalf of the Governance Committee, Dr. Red Stevens, chair, presented the report of the Committee's September 14, 2017, meeting. The reports identified major topics discussed, reports received and actions taken.

*Report of the Board Rules Subcommittee.* Dr. Lindsey Robinson, on behalf of the subcommittee, reported the subcommittee undertook a thorough examination of the *Standing Rules for Councils and Commissions*, and proposed amendments to this document. Due to the size of the document, the



Governance Committee agreed to forward the document to the Board as a draft. The Governance Committee will take up these revisions at its February 2018 meeting and welcomes comments from individual Board members.

Dr. Stevens moved Resolution B-100 with the Committee's recommendation to adopt. A motion was made to refer the resolution back to the Governance Committee. Several Board members spoke in opposition of the motion to refer; on vote, the motion to refer to the Governance Committee was not adopted. On vote, Resolution B-100 was adopted by the Board of Trustees.

**B-100-2017. Resolved**, that the Strategic Planning Committee (SPC) be dissolved and eliminated as a standing committee of the Board, and be it further

**Resolved**, that the President may appoint a work group when needed to draft a new strategic plan, and be it further

**Resolved**, that the Governance Committee is authorized to make confirming changes to the *Organization and Rules of the Board of Trustees*.

Dr. Stevens moved Resolution B-101 with the Committee's recommendation to adopt. On vote, Resolution B-101 was adopted by the Board of Trustees.

**B-101-2017. Resolved**, that the FDI Advisory Committee be eliminated and its duties assigned to the ADA FDI Delegation, and be it further

**Resolved**, that the President or the President's designee shall be the spokesperson for the ADA FDI delegation, and be it further

**Resolved**, that the Governance Committee consider other aspects of the structure and operation of the ADA FDI delegation, and be it further

**Resolved**, that the Governance Committee propose changes to the *Organization and Rules of the Board of Trustees* to implement this resolution and containing any additional recommendations relating to the ADA FDI delegation.

**Report of the Pension Committee:** On behalf of the Pension Committee, Dr. Ronald Lemmo, chair, presented the report of the Committee's September 14, 2017, meeting. The reports identified major topics discussed, reports received and actions taken.

**Report of the Strategic Planning Committee:** On behalf of the Committee, Dr. Jeffery Cole, chair, presented the report of the Committee's September 15, 2017, meeting. The report identified major topics discussed and actions taken. Dr. Cole moved the following resolutions with the Committee's recommendation to adopt. On vote, the following resolutions were adopted by the Board of Trustees.

**B-102-2017. Resolved**, that the Board urges the Council on Scientific Affairs and Council on Dental Practice to coordinate work on the impact of science and technology on dental practices, and to report to the Board prior to the 2018 House of Delegates meeting.

**B-103-2017. Resolved**, that the Board urges the incoming President to consider the following potential topics in scheduling strategic discussions for future Board meetings:

- Opportunities for the ADA to take a leading role, instead of a reactive one, in emerging areas impacting dentistry.
- The impact of technology on practice management, diagnostics and treatment
- Outcome measures and quality assurance programs
- Utilization of dental services – demand & supply
- How do we unite the profession and the many dental organizations

## Reports and Resolutions to the Board of Trustees

### Communications and Marketing

**Report of the Chief Communications Officer: Integrated Marketing and Communications: Annual Review of ADA Spokespersons:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-90-2017. Resolved,** that the following individuals be approved as national ADA spokespersons through the conclusion of the 2018 annual meeting.

#### *Consumer Advisors*

*ADA spokespersons that can address a broad-range of topics with top-tier media*

Alice G. Boghosian, D.D.S., Niles, IL  
Ada S. Cooper, D.D.S., New York, NY  
Sally Cram, D.D.S., Washington, DC (Action for Dental Health)  
Ana Ferraz-Dougherty, D.M.D., San Antonio, TX (Bilingual)  
Kimberly A. Harms, D.D.S., Bloomington, MN  
Edmond R. Hewlett, D.D.S., Los Angeles, CA (Action for Dental Health)  
Maria Lopez Howell, D.D.S., New Braunfels, TX  
Matthew Messina, D.D.S., Fairview Park, OH  
Richard Price, D.M.D., Waban, MA  
Tyrone Rodriguez, D.D.S., Yakima, WA (Bilingual)  
Genaro Romo, D.D.S., Oak Lawn, IL (Bilingual)  
Ruchi (Deepinder) K. Sahota, D.D.S., Fremont, CA (Action for Dental Health)  
Brittany Seymour, D.D.S., M.P.H., Boston, MA

#### *Technical Experts*

*ADA spokespersons with expertise in a particular area of dentistry*

Alan A. Boghosian, D.D.S., Chicago, IL (Dental Materials)  
Jessica Bremerman, D.D.S., Yakima, WA (Native American Oral Health)  
Sharon Brooks, D.D.S., Chelsea, MI (Oral and Maxillofacial Radiography)  
Gregory N. Connolly, D.M.D., Boston, MA (Tobacco)  
Terry Dickinson, D.D.S., Richmond, VA (Access, Missions of Mercy, Action for Dental Health)  
Terence E. Donovan, D.D.S., Chapel Hill, NC (Dental Materials)  
E. Jane Gillette, D.D.S., Bozeman, MT (Science/Evidence-based Dentistry)  
Mary J. Hayes, D.D.S., Chicago, IL (Pediatric Dentistry)  
Monica Hebl, D.D.S., Milwaukee, WI (Action for Dental Health)  
Anthony Iacopino, D.M.D., Winnipeg, Manitoba Canada, (Geriatric Oral Health; Fluoridation)  
Marjorie K. Jeffcoat, D.M.D., Philadelphia, PA (Periodontics)  
Judith Ann Jones, D.D.S., Billerica, MA (Elder Care, Action for Dental Health)  
J. Robert Kelly, D.D.S., M.S., DMedSc, Farmington, CT (Dental Materials)  
J. Rodway Mackert, D.M.D., Ph.D., Augusta, GA (Dental Amalgam)  
John A. Molinari, Ph.D., Northville, MI (Infection Control/Dental Unit Water Lines)  
Robert M. Pick, D.D.S., Chicago, IL (Lasers/Dental Implants)  
Howard F. Pollick, D.D.S., M.P.H., San Francisco, CA (Fluoridation)  
Lindsey A. Robinson, D.D.S., Grass Valley, CA (Access, Action for Dental Health)  
Brian Schmidt, D.D.S., New York, NY (Oral cancer)  
Jonathan D. Shenkin, D.D.S., Augusta, ME, (Pediatric Dentistry, Prevention, Action for Dental Health)  
Rico Short, D.M.D., Powder Springs, GA (Endodontics)

Heber Simmons, Jr., D.D.S., Jackson, MS (Pediatric Dentistry)  
 Thomas Sollecito, D.M.D., West Chester, PA (Oral Medicine)  
 Susan Tiede, D.D.S., Missoula, MT (Fluoridation)  
 Joel Weaver, D.D.S., Ph.D, Columbus, OH (Anesthesia)

## Conferences and Continuing Education

### Report of the Advisory Committee on Annual Meetings: 2019 Committee on Local Arrangements

**Chair:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-93-2017. Resolved,** that the nomination of Dennis D. Shinbori, D.D.S. to serve as general chair for the 2019 Committee on Local Arrangements made by the California Dental Association in collaboration with the San Francisco Dental Society be approved.

**Confidential Report of the Advisory Committee on Annual Meetings: ADA 2022 – America’s Dental Meeting® - Revised Dates and Locations:** Consideration of this report took place during a closed session. During open session, the following resolution was adopted by the Board of Trustees.

**B-94-2017.** (Confidential Action Temporarily Embargoed)

**Report of Nominations of Advisory Committee on Annual Meetings General Members:** Consideration of this report took place during a closed session. During open session, Resolution B-99 was adopted by the Board of Trustees.

Without objection, the Board suspended the *Rules* to authorize the President and President-elect to set the staggered term limits for the general members.

**B-99-2017. Resolved,** that the following individuals be nominated to the Board of Trustees’ Advisory Committee on Annual Meetings

Blackwell, Robert L., Illinois (4-year term)  
 Kirkegaard, Paul F., Minnesota (3-year term)  
 McKelvey, H. Charles, California (5-year term)  
 Radack, Stephen T., III, Pennsylvania (2-year term)  
 Weisfuse, P. Deborah, New York (4-year term)

## Education/Professional Affairs

**Report of the Council on Dental Education and Licensure: Appointment of Consultants:** This report listed the individuals to serve as consultants until the close of the 2018 House of Delegates (consent calendar item).

**Report of the Commission on Dental Accreditation: Request to Establish a Shared Services Formula and Reserve Fund:** At its August 3, 2017 meeting, the Commission on Dental Accreditation (CODA) considered a report of its Standing Committee on Finance. The Commission considered two items related to the American Dental Association (ADA) and CODA fiscal relationship: 1) establishment of an indirect expenses allocation formula with the ADA, and 2) the development of a mechanism by which the Commission can establish a dedicated reserve fund as part of its strategic plan to become fiscally sustainable. The Commission presented Resolutions B-91 and B-92 for the Board’s consideration.

**B-91. Resolved,** that the ADA Board of Trustees initiate a dialogue with the Commission on Dental Accreditation, to establish an agreed upon indirect expenses allocation formula, along with, expectations, roles and responsibilities of the respective parties, to be included in the ADA-CODA Memorandum of Understanding by amendment.

A substitute resolution was proposed for B-91. On vote, the Board adopted the motion to substitute Resolution B-108 for Resolution B-91; on vote, the Board of Trustees adopted Resolution B-108.

**B-108-2017. Resolved**, that staff is directed to negotiate a comprehensive shared services agreement, to include processes for proposing annual budgets, between the ADA and the Commission on Dental Accreditation and to report back to the Board on progress at its February 2018 meeting, and be it further

**Resolved**, that using the CODA shared services agreement as a guide, staff is directed to develop similar agreements between the ADA and each commission.

The following resolution was presented for the Board's consideration. A motion was made to refer Resolution B-92 to the Budget and Finance Committee for study with a report to the February 2018 Board. On vote, the motion to refer Resolution B-92 to the Budget and Finance Committee with a report to the February 2018 Board was adopted.

**B-92. Resolved**, that the ADA Board of Trustees develop a mechanism to allow the Commission on Dental Accreditation to establish and access a separate reserve fund to retain its annual revenue after total (direct and indirect) expenses are paid.

## Finance and Operations

**Report of the Chief Financial Officer: Status of the 2017 Operating Contingent Fund and Approval of Supplemental Appropriation Requests:** A Board Contingency of \$1,000,000 was authorized in the 2017 budget. The Board of Trustees approved total requests in the amount of \$1,421,605, leaving a deficit balance of \$(421,605) (consent calendar item).

## Government and Public Affairs

**Report of the Senior Vice President, Government and Public Affairs: Federal and State Legislative, Regulatory and Public Affairs Update:** Mr. Graham provided an update on developments in Washington, D.C. The following key issues were identified in this report: Health Care Reform, Congressional Priorities, Medicare Regulations, Community Water Fluoridation, CDHC, ER Referral, ADPAC, Concerning State Issues—Opioids/Prescription Monitoring Databases, Dental Hygienists and Dental Assistants, and Medicaid. The report included a report of SPA program expenditures as of August 2017.

**Report of the Council on Advocacy for Access and Prevention: Choosing Wisely Initiative:** The Board of Trustees adopted the following resolution.

**B-95-2017. Resolved**, that the ADA's Choosing Wisely Statements be amended as follows (new language= underscored; deletions= ~~stricken~~):

1. Don't recommend non-fluoride toothpaste for infants and children.
2. Avoid restorative treatment as a first line of treatment in incipient (non-cavitated) occlusal caries without first considering sealant use.
3. Avoid protective stabilization, sedation or general anesthesia in pediatric patients without consideration of all options with the legal guardian.
4. ~~Avoid routinely using irreversible surgical procedures such as braces, occlusal equilibration and restorations as the first treatment of choice in the management of temporomandibular joint disorders.~~  
Don't routinely prescribe antibiotics for irreversible pulpitis (toothache) in the absence of cellulitis (swelling).

5. ~~Don't replace restorations just because they are old.~~  
Don't routinely prescribe narcotics/opioids to manage pain associated with dental pathologies and/or procedures.

## Legal Affairs

### **Report of the Council on Ethics, Bylaws and Judicial Affairs: Notice of Appointment of Consultant:**

This informational report noted the appointment of Dr. Ethan A. Pansick as a consultant for the Council's upcoming 2017-2018 term in the areas of the preparation and presentation of ethics continuing education topics (consent calendar item).

## Member and Client Services

**Report of the Vice President, Member and Client Services: Revised Dental School Strategy:** Mr. Bill Robinson reported that the ADA dental school strategy has been revised and a new plan has been developed. The goals of the revised dental school strategy are to: foster member growth, deliver relevant services, and build community.

**Report of the Vice President, Member and Client Services: Next Steps on Business Model Transformation Project:** Mr. Bill Robinson, vice president, Member and Client Services, provided a brief update on the business model project.

## Practice Institute

**Report of the Council on Dental Practice: Dissolution of the Interagency Work Group on Dental Group Practice:** It was reported that the Council approved disbandment of the Interagency Work Group on Dental Group Practice at its May 2017 meeting (consent calendar item).

**Report of the Busyness Workgroup:** Dr. Jim Willey reported that the Workgroup originally recommended three strategic initiatives worthy of consideration as possible solutions to the busyness problem. These three initiatives included: developing a better dental benefit plan, incorporating a dental benefit into Medicare, and conducting a national integrated marketing campaign. The Workgroup understood each of the three strategic initiatives represented substantial long-term commitments that would involve considerable cost and effort for the ADA to accomplish. In 2017, the Workgroup received reports on the progress made to date on each of its long-term strategic recommendations.

Dr. Crowley stated the Busyness Workgroup has accomplished the work it was asked to do. He thanked the Workgroup for all its work.

## Science Institute

**Science Institute and Interprofessional Activities:** Dr. Marcelo Araujo, vice president, Science Institute, presented a summary of 2016–2017 Science Institute priorities as well as 2017 Interprofessional Relations projects and cross-divisional activities.

## ADA Foundation

**Report of the ADA Foundation:** The informational report provided a summary undertakings and activities of the ADA Foundation since the August 2017 report (consent calendar item).

## **Organizational/Other**

**Report of the President:** Dr. Gary Roberts presented an oral report that summarized his activities since the August Board meeting.

**Report of the President-elect:** Dr. Joseph Crowley gave an oral report of meetings attended and trips taken since the August Board meeting.

## **Liaison Reports**

**Report of Dr. Lindsey Robinson, Liaison to the Council on Dental Benefit Programs: Medicare:** Dr. Robinson reported on the possible addition of a dental benefit to Medicare. This is not imminent but discussions among policy makers are taking place. Such a benefit will only be effective in enhancing care if it makes sense from the provider perspective. Preliminary research indicates that a majority of dentists would participate in a Medicare dental benefit, if it is fair. At the Board's direction, CDBP and HPI are working diligently to identify what would be a workable Medicare dental benefit and advocating for a benefit design that makes sense for dentists and older adults. In this way, the ADA is effectively influencing the multi-stakeholder advocacy efforts that are already well underway. Advocacy efforts by CGA are pending until results of the work by CDBP and HPI become clear.

**Oral Report of Dr. Richard Black, Liaison to the Council on Communications:** Dr. Black reported that the Council is engaging House members who will be in Atlanta by reporting on metrics of Resolution 67H-2016, the campaign to increase dental visits for ADA members. Council members will get the latest week-by-week metrics and will be given a slide deck with this information. Dr. Black encouraged the Board to reach out to Council members and have them share the updated success metrics of the campaign during caucus meetings.

## **New Business**

**Leadership Development Program.** The Board discussed the creation of a leadership development program to assist in serving the needs of component and constituent societies and non-dental association in governance training. Dr. O'Loughlin advised that this topic is currently being discussed and that a report will be submitted to the February 2018 Board.

**Consideration of ADA contribution to the ADA Foundation for Disaster Relief Efforts:** Dr. William Calnon, president and interim executive director, ADA Foundation was present during discussion on this topic. The Board of Trustees adopted the following resolution.

**B-110-2017. Resolved,** that in order to help with 2017 disaster relief, up to \$250,000 be allocated for the ADAF emergency disaster grant fund from ADA Reserves, upon request from the ADA Foundation

## Special Orders of Business/Special Appearances

**Joint Meeting with the American Student Dental Association:** A joint meeting of the American Board of Trustees and the members of the American Student Dental Association was held on Sunday, September 17, 2017, from 8:00 to 10:00 a.m.

**Appearance of Dr. Mark Livingston, chair, Commission on Dental Accreditation:** Dr. Mark Livingston reported on an expectation to receive full re-recognition by the Secretary of the Department of Education in the coming weeks. It was reported that CODA will hold an open meeting on standards, which are up for revision, on Friday, October 20, in Atlanta. Much of the discussion was focused on the need for clarity in the ADA-CODA relationship. Dr. Livingston asked the Board to work on an accepted formula for calculating indirect costs, which will form part of a joint-services agreement. It was also reported that CODA is seeking additional support with technology, specifically Aptify, and asked the Board to study the issue of a possible establishment of a CODA reserve fund.

**Board Diversity Program:** Michael Baran, Ph.D, Interactive Diversity Solutions, led the program with a presentation on diversity and unconscious biases. The Board reviewed the existing diversity plan and participated in an exercise to learn about unconscious biases and how to become more self-aware and mitigate consequences. Guests in attendance included members of the Institute for Diversity in Leadership: Dr. Prabha Krishnan, class of 2010; Dr. Shailee Gupta, class of 2012; and Dr. Maurice Edwards, class of 2014.

## Reports and Resolutions to the House of Delegates

### Reports and Resolutions Relating to Reference Committee A (Budget, Business, Membership and Administrative Matters)

**Fourteenth Trustee District Resolution 32S-1: Substitute for Resolution 32: Special Assessment** (*Worksheet:2014a*). The Board of Trustees voted to transmit Resolution 32S-1 to the House of Delegates with the following comment and the recommendation to vote no. (Board of Trustees consent calendar action—no Board discussion)

The House of Delegates passed resolution 67H-2016, a Three-Year Initiative to Drive Utilization of Dental Services for ADA Members, with the first year, 2017, funded from reserves and the second and third years, 2018 and 2019, funded at the discretion of the Board of Trustees. As a result, the Board reviewed the ADA's projected reserves and several different scenarios as a source of funding the initiative which are discussed in Board Report 2 beginning on page 2054. While the Board appreciates the concerns expressed, the Board considered potential impacts of these different scenarios in the bigger picture context of financial stability given the long term needs of the Association.

In recent years, reserve spending which is reported in quarterly financial statements and anticipated future spending has addressed important needs and, long term, can help grow non-dues revenue and build member value. Because the Members First 2020 Strategic Plan financial goal includes an objective that unrestricted liquid reserves will be targeted at no less than 50% of annual operating expenses, the Board sought to find a funding solution for this initiative that would balance the need to meet this target with the need to limit impact on member dues. After careful consideration of all the options, the Board agreed that it would be best to fund the Busyness Initiative in 2018 from several sources as follows:

- \$30 Special Assessment (which represents a temporary 5.6 % increase in National dues).
- General Reserves until they reach the target floor of 50 % of the annual operating budget.

- If General Reserves reach the 50 % target floor, then the remainder of the Busyness Initiative would be funded from the Royalty Reserve.

**Fourteenth Trustee District Resolution 37: Continuing Education Credit for Delegates and Alternates of the ADA House of Delegates** (*Worksheet:2062*). The Board of Trustees voted to transmit Resolution 37 to the House of Delegates with the following comment and recommendation to vote no. (Vote: Unanimous)

The Board recognizes and appreciates the time delegates devote to preparing for and attending the House of Delegates meetings. However, awarding CE credits for this commitment does not meet the spirit and obligation of continuing dental education, particularly for state licensure renewal purposes. According to ADA policy, continuing dental education “consists of educational activities designed to review existing concepts and techniques, to convey information beyond the basic dental education and to update knowledge on advances in scientific, clinical, and non-clinical related subject matter, including evidence-based dentistry and ethics. The objective is to improve the knowledge, skills and ability of the individual to provide the highest quality of service to the public and the profession.” It should also be noted that ADA is a continuing education provider recognized by the Commission for Continuing Education Provider Recognition. To maintain this recognition, ADA-sponsored CE activities must include course objectives and evaluation mechanisms to assess participant mastery of the content. Finally, after receiving this resolution, several individual state boards of dentistry were polled to determine if continuing education requirements would be satisfied through attending the ADA House of Delegates meetings. There were no responses that indicated state requirements would be met in order to provide continuing education credits in response to the resolution.

In summary, attendance at the House of Delegates meetings does not meet the ADA's own definition of continuing education, nor would it be possible to meet CCEPR's CERP standards and guidelines regarding continuing education.

**Council on Members Insurance and Retirement Programs Resolution 49: Proposed Council Restructure** (*Worksheet:2064*). The Board of Trustees voted to transmit Resolution 49 to the House of Delegates with a recommendation to vote yes. (Vote: 19 Yes—Asai, Bitter, Black, Cohlma, Cole, Crowley, Fisch, Gehani, Jeffers, Klemmedson, Kwasny, Kyger, Marron-Tarrazzi, McDougall, Mitchell, Norbo, Robinson, Sabates, Stevens, and Thompson; 1 No—Dr. Bitter)

**Report 11 of the Board of Trustees to the House of Delegates: Information Technology Initiatives, Expenditures and Estimated Costs, and Anticipated Future Projects** (*Worksheet:2078*). The Board of Trustees voted to transmit Report 11 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

**Report 13 of the Board of Trustees to the House of Delegates: ADA Pension Plans** (*Worksheet:2086*). The Board of Trustees voted to transmit Report 13 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

**Report 14 of the Board of Trustees to the House of Delegates: Authority to Approve the Budget** (*Worksheet:2068*). The Board of Trustees transmitted the following resolution to the House of Delegates.

*Resolution 52— Authority to Approve the Budget (Worksheet:2075).* The Board of Trustees voted to transmit Resolution 52 to the House of Delegates with a recommendation to vote yes. (Vote: 14 Yes—Drs. Asai, Bitter, Black, Cohlma, Fisch, Gehani, Jeffers, Klemmedson, Kwasny, McDougall, Norbo, Robinson, Stevens, and Thompson; 5 No: Drs. Cole, Kyger, Marron-Tarrazzi, Mitchell, and Sabates; 1 Abstain: Dr. Crowley)

**Reports and Resolutions Relating to Reference Committee B  
(Dental Benefits, Practice and Related Matters)**



**Council on Dental Benefit Programs Resolution 34: Response to Resolution 85H-2016 Third Party Payment Choices** (*Worksheet:3060*). The Board of Trustees voted to transmit Resolution 34 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Fourteenth Trustee District Resolution 35: Third Party Payer Patient Treatment History** (*Worksheet:3061*). The Board of Trustees voted to transmit Resolution 35 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Fourteenth Trustee District Resolution 36: Study on How Dental Benefit Companies Affect the Doctor-Patient Relationship** (*Worksheet:3062*). The Board of Trustees voted to transmit Resolution 36 to the House of Delegates with the following comment and recommendation to vote no. (Board of Trustees consent calendar action—no Board discussion)

The Council on Dental Benefit Programs (CDBP) has pursued similar efforts in the past; however, feasibility, expense and data limitations have been recurrent concerns. In 2010 CDBP compiled a comprehensive list of metrics to rate payers. The project was not feasible due to lack of data to rate payers objectively. In 2014, the Council put together a satisfaction survey seeking data from dentists to develop ratings for different payers. After significant exploration of survey methodology, required sample sizes and survey burden on dentists to gather meaningful data at the payer level, this effort was not pursued. In 2016, the Council investigated the feasibility of acquiring data on write-offs for various plans as a means to rate plans. Meaningful data collection continues to be a barrier.

Qualitative review of processing policies (i.e. provider handbook) from various carriers to determine which payers may have the most appropriate policies could form the basis for payer rating. However these processing policies are sometimes plan specific (a carrier/payer supports numerous plans/group policies) and change annually making the information gathered meaningless quickly.

With regards to contracts, in some cases, the contract stipulates confidentiality posing a risk to dentists disclosing this information.

The decision to contract with a payer is largely driven by the market-share of beneficiaries in the locality of the dental office. The ADA has provided several resources to assist members in making an informed decision about participation in dental plans available at <http://ada.org/dentalplans>. In addition, the ADA legal department provides a contract analysis service to further assist individual dentists who seek to better understand their contracts before signing.

**Council on Dental Practice Resolution 44: Response to Resolution 91-2016: Development of Sample Clinical Chart Entries to Increase Quality in Documentation** (*Worksheet:3065*). The Board of Trustees voted to transmit Resolution 44 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Ninth Trustee District Resolution 50: Do-It-Yourself Teeth Straightening** (*Worksheet:3066*). The Board of Trustees voted to transmit Resolution 50 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Council on Dental Practice Report 1 to the House of Delegates: Response to Resolution 87H-2016: Review of Recommendations for Cone Beam Computed Tomography Inspections** (*Worksheet:3068*). The Board of Trustees voted to transmit the Council's Report to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

## **Reports and Resolutions Relating to Reference Committee C (Dental Education, Science and Related Matters)**

**Council on Scientific Affairs Resolution 39: Amendment of the ADA Policy on Evidence-Based Dentistry** (*Worksheet:4036*). The Board of Trustees voted to transmit Resolution 39 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Scientific Affairs Resolution 40: Rescission of the ADA Policy on Acupuncture** (*Worksheet:4039*). The Board of Trustees voted to transmit Resolution 40 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Scientific Affairs Resolution 41: Amendment of the ADA Policy on Unconventional Dentistry** (*Worksheet:4042*). The Board of Trustees voted to transmit Resolution 41 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Scientific Affairs Resolution 42: Amendment of the ADA Policy on use of Laboratory Animals in Research** (*Worksheet:4044*). The Board of Trustees voted to transmit Resolution 42 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Scientific Affairs Resolution 43: Rescission of the ADA Policy on Standardized Numbering System for Diamond Burs** (*Worksheet:4045*). The Board of Trustees voted to transmit Resolution 43 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Ninth Trustee District Resolution 45: OTC Product Labeling of pH** (*Worksheet:4048*). The Board of Trustees voted to transmit Resolution 45 to the House of Delegates with the following comment and recommendation to vote no. (Vote: 4 Yes—Drs. Asai, Jeffers, Kwasny, and Thompson; 16 No: Drs. Bitter, Black, Cohlmia, Cole, Crowley, Fisch, Gehani, Klemmedson, Kyger, Marron-Tarrazzi, McDougall, Mitchell, Norbo, Robinson, Sabates, and Stevens)

The ADA filed a Citizen's petition in July with the FDA urging the agency to expedite the OTC monograph process and specifically highlighted the need for revision and completion of those monographs that directly affect Dentistry. The ADA also sent letters to the Majority and Minority leaders in the US Senate requesting that the Congress approve the bill supporting the changes to the OTC Monograph process. The most effective way to take action, related to regulatory matters, is via a direct letter from the ADA to the FDA, which can be done when the agency puts out a call for data and comments. At that point, the ADA can add the any pH related question to the list of comments provided to the FDA.

From a more scientific basis, it is important to note that the current ADA/ANSI standard for mouthrinses states that products will meet the standard if they have pH between 3-10. This is based on the need for an environment to allow the fluoride atoms to bind to hydroxyapatite, making pH one of the important factors when manufacturers develop such products under the standards. The current labeling guidance from the DMEPA reflects the standard.

**Report 10 of the Board of Trustees to the House of Delegates: ADA Library and Archives Advisory Board Annual Report** (*Worksheet:4052*). The Board of Trustees voted to transmit Report 10 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

## **Reports and Resolutions Relating to Reference Committee D (Legislative, Health, Governance and Related Matters)**

**Council on Advocacy for Access and Prevention Resolution 33: Peer to Peer State Dental Medicaid Audits** (*Worksheet:5026*). The Board of Trustees voted to transmit Resolution 33 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Fourteenth Trustee District Resolution 38: Improper Use of the DEA Registration Number** (*Worksheet:5028*). The Board of Trustees voted to transmit Resolution 38 to the House of Delegates with the following comment and recommendation to vote yes to refer. (Board of Trustees consent calendar action—no Board discussion)

The Board recommends that this resolution be referred to the appropriate ADA agency for review to determine how to effectively and efficiently address the inappropriate use of DEA registration numbers, especially within the context of credentialing health care professionals, and to report back to the 2018 House of Delegates. Currently, the ADA is working with CAQH ProView® to develop a centralized credentialing system for dentists. Offered by the Council for Affordable Quality Healthcare, Inc., CAQH ProView® is a web-based solution used by providers to self-report and share a wide range of demographic and professional information with more than 900 participating health plans, hospitals, health systems and provider groups. This data is then used for credentialing, network directories, claims administration and more.

It is known that at times dental benefit plans require DEA numbers when dentists prescribe controlled substances for their insureds, even in cases where the dental benefit plan does not pay for the prescription. The ADA will be able to streamline the information required for dentists in the CAQH system, but that is not until next year. In 2018, the ADA intends to work with CAQH to make required fields optional fields if they are not required for a particular provider use case.

**Report 12 of the Board of Trustees to the House of Delegates: New Dentist Committee Liaison Voting Privileges on Councils** (*Worksheet:5029*). The Board of Trustees transmitted the following resolutions to the House of Delegates.

*Resolution 47— New Dentist Committee Liaison Voting Privileges on Councils (Worksheet:5040).*  
The Board of Trustees voted to transmit Resolution 47 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

*Resolution 48— New Dentist Committee Liaison Assignments on Councils (Worksheet:5045).* The Board of Trustees voted to transmit Resolution 47 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Ninth Trustee District Resolution 51: ADA Marketing Campaign** (*Worksheet:5047*). The Board of Trustees voted to transmit Resolution 51 to the House of Delegates with the following comment and recommendation to vote no. (Vote: 2 Yes—Drs. Marron-Tarrazzi and Robinson; 18 No: Drs. Asai, Bitter, Black, Cohlma, Cole, Crowley, Fisch, Gehani, Jeffers, Klemmedson, Kwasny, Kyger, McDougall, Mitchell, Norbo, Sabates, Stevens, and Thompson)

The Board recommends voting no on this resolution. The majority of items are already being shared with the states in monthly reports, and the remaining requests are at a level of detail that would be prohibitively expensive. State executive directors already receive monthly reports that include completed searches in their states. Additional reports will be posted on the campaign page on ADA.org and is available to all state and local dental societies. It will include media platforms used (item 3), cost per click and click thru rates (item 4), agency fees (item 7), and analytics (item 8).

States are able to pull their own reports of members who have incomplete profiles (item 9). In addition, Find-A-Dentist metrics are included in the Quarterly Management Report.

The remaining elements would require additional expense and staff time to accommodate. Keywords for paid search (item 1) have been shared with the states and are now built into the platforms and would need to be manually exported for each state. Geographic breakdown within each state (item 2) is not feasible under the current campaign structure because it is a national campaign targeting specific consumer demographics versus a budget broken down by metropolitan markets. To instate this would require considerable effort. Levels of reach and frequency (item 3) are common measures for broadcast campaigns (television and radio) – the ADA campaign is digital and is measured by visits to the ADA Find-a-Dentist tool and conversions, defined as completed searches on the tool. To add these elements would add an expense of \$300,000, or 5% to the campaign.

**Council on Communications Report 1 to the House of Delegates: Update on Resolution 67H-2016: A Three-Year Initiative to Drive Utilization of Dental Services for ADA Members** (*Worksheet: 5049*). The Board of Trustees voted to transmit Report 1 to the House of Delegates. (Vote: Unanimous)

**Council on Advocacy for Access and Prevention Report 1 to the House of Delegates: Response to Resolution 84-2016: Creating a Native American PreDental Curriculum** (*Worksheet: 5058*). The Board of Trustees voted to transmit the Council's Report to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

## Annual Reports

The following annual reports were provided to the Board of Trustees for review.

ADA Business Enterprises, Inc.  
 ADA Foundation  
 Commission for Continuing Education Provider Recognition  
 Commission on Dental Accreditation  
 Council on Advocacy for Access and Prevention  
 Council on Communications  
 Council on Dental Benefit Programs  
 Council on Dental Education and Licensure  
 Council on Dental Practice  
 Council on Ethics, Bylaws and Judicial Affairs  
 Council on Government Affairs  
 Council on Members Insurance and Retirement Programs  
 Council on Membership  
 Council on Scientific Affairs  
 Joint Commission on National Dental Examinations

## Closed Session

Closed sessions of the Board of Trustees were held at various times during the September 16–18, 2017, meeting of the Board of Trustees. The minutes of the closed sessions are separately recorded; however, non-confidential actions taken by the Board are reflected in the minutes of the open session. The following reports were considered during the closed sessions:

- Report of the Advisory Committee on Annual Meetings
- Report of General Member CAM Nominations
- Report of the Compensation Committee

**Attorney-Client Session**

An attorney-client session of the Board of Trustees was held on Monday, September 18, 2017, in the Board Room of the ADA Headquarters Building, Chicago. Those in attendance included the officers and members of the Board of Trustees, the Speaker of the House of Delegates, the Executive Director, the General Counsel, and the Deputies General Counsel.

**Adjournment**

Without objection, the sixth regular meeting of the Board of Trustees adjourned *sine die* on September 18, 2017 at 11:20 a.m.

## Appendix 1

### Charter: Bridge Governance

**B-76-2017. Resolved**, that the Board support the continued development of the Bridge concept generated from the Business Model Study, and be it further

**Resolved**, that Management be directed to propose a governance and funding model for the next steps in development of the Bridge concept for consideration at the September 2017 Board meeting.

**High Level Project Approach:** The existing ADA governance structure will not work for Bridge. A new approach to oversight and accountability is required for this innovation to be successful.

- Existing ADA governance is organized around meetings (both in-person and on the phone), Bridge governance will be organized around milestones defined by the project. Status updates, balance sheets, and project documentation will be posted for review and discussion on an ongoing basis, with meetings scheduled only as-needed. The focus will be on achieving results with less time and energy dedicated to reporting on activity.
- Existing ADA governance is based on committees making proposals to a parent body which then has the ability to engage in de novo review before a final decision. Bridge governance will be based on an efficient model of up-front approval of funding based on milestones reached, with the identified Bridge Governance team.
- Existing ADA governance is organized around the model of *approve then execute*. Bridge governance will be premised on a venture capital structure. General approval is given to pursue results, but execution rests with the management team. It is a model of *inform then experiment then adjust then report*. Bridge will be developed in several phases (please see *BRIDGE Project Charter Management*) each of which is composed of smaller milestones where tasks are completed and deliverables reviewed.
- Existing ADA governance seeks maximum data before finalizing decisions. With Bridge, the ADA understands that all decisions are provisional and subject to change upon contact with real-life users. Decisions may be based on less than optimal data (ambiguity). Bridge governance will seek the minimum confidence necessary to test hypotheses. The simple goal is to have a prototype to test in the marketplace.
- Existing ADA governance commits significant resources before projects begin; project and budget alignment is reviewed annually. Bridge governance will earmark dedicated funds that may be utilized upon successful completion of project milestones. This “stage gate” approach will provide balance sheet and deliverable accountability on an ongoing basis

**Funding:** Funds anticipated for each phase of the project will be determined and made available to the Bridge management team through a process outlined in a separate document (see “Expenditure Authorization for the Bridge Project”).

**Meeting Frequency:** This group would meet in person when those meetings fall during regular meeting times (Board, Annual Session). When decisions are required between those meetings, the group will be available for phone calls on short notice in order to provide guidance to the Bridge Management Team as required.

**Governance Team:** The members of this team will be selected based on either their role in the organization or based on functional skills. The ADA President will select the Volunteer Leader. The rest of the team will be determined by the other ADA staff and ADA leaders on the Governance Team.

**Roles:**

- **ADA Executive Director**
- **ADA Chief Financial Officer**

- **ADA President** (includes a trailing year after their service has ended so that the Association Leader would have two or three consecutive years of involvement with the project)
- **ADA President-Elect** (either the President or President-Elect would attend based on schedules; both are not required)
- **Volunteer Leader 1** (appointed by the President)
- **Volunteer Leader 2** (appointed by President)
- **Non-Dentist Business Expert—Venture Capitalist**
- **Non-Dentist Business Expert—Start-Up Veteran** These two non-dentistry experts will bring a business development perspective, ensuring that proposals pass the “smell test” and are reflective of what their experience suggests will be successful in a new business venture.

## **Appendix 2**

### **Expenditure Authorization Process for the Bridge Project**

Bridge Project Reserve Spending Authorizations are established by separate board resolutions for each phase of the project. Each board spending authorization represents a commitment to spend from reserves. Best practices for financial planning and control of completely new lines of business and startups are different from that for existing businesses. Typically the start-up begins as a high level concept with only enough committed funding to reach its next milestone. The new business idea then moves through sequential “stage gates” at which the project is either terminated or given a green light for its next round of funding.

For each Bridge Project Reserve Spending Authorization, the Bridge Governance Team (as defined by the Charter: Bridge Governance document) will approve major contracts with spending greater than \$100,000 and/or long term implications including hiring staff and consultants, employment contracts, and lease or revenue sharing agreements. Reserve spending for ongoing costs below this level without long term impacts will be made by the Bridge management team consistent with existing ADA approval policies and processed with ADA operating transactions subject to ADA internal controls.

As such, funds may be expended from each Bridge Project Reserve Authorization for:

- Ongoing operating expenses of the Bridge Special Project Group
- Payments to vendors of the Bridge Special Project Group
- Payments to contractors hired for their functional expertise
- Purchase of subscriptions, memberships, products that may be required for successful completion of the project

Expenditures for major contracts from each board-approved Bridge Project Reserve Spending Authorization may be made, upon recommendation of staff who will prepare a full and complete report to the Bridge Governance Team to document the request and support its review and approval.

Following each such major contract spending approval by the Bridge Governance Team, a brief report will be prepared by Bridge Project staff within fourteen (14) days and sent to the Budget and Finance Committee and then presented at the next regular meeting of the Board of Trustees. On an annual basis, the Bridge Project Team shall report to the Board of Trustees a summary of all expenditures against each Bridge Project Reserve Spending Authorization.

The expenditure of all Bridge Project funds will be tracked in a separate cost center as part of the ADA Reserve Account with separate appropriate monthly reporting of activity and remaining Account balance for each project.

In addition, the Bridge Management Team will prepare quarterly reports of Bridge Project progress and include forecasts of expected spending to the end of the current project phase. These quarterly reports will also be submitted to the ADA Finance Committee and Board at their next scheduled meeting.

As the Bridge Project progresses to the end of each phase, if the completed work continues to indicate positive outlook for completion of the Minimum Financially Sustainable Product (“MFSP”), then the Bridge Project Team will submit another request to the Board to fund the next phase.



## Appendix 3

### Charter: Bridge Management

**Objective:** The Bridge management team is tasked with bringing a prototype to market within 24 months to allow renter dentists and owner dentists to share dental facilities to mutual benefit of themselves and their patients.

#### Project Assumptions:

- While Bridge will be fully accountable (please see *BRIDGE Project Charter Governance*) to volunteer leaders, the pace of governance mandates that governance bodies are informed, not consulted, on an ongoing basis. This process will require trust of those who are managing the process without an expectation of participation in each decision.
- The on-call consultants not employed by the ADA may require compensation.
- Pilot testing requires willing and enthusiastic cooperation from the relevant state and local dental societies

**High Level Project Approach:** Bridge will be divided into four phases, each of which will inform the budget and timeline for the subsequent phase:

1. *Definition* This phase of the project involves defining all of the potential features of the new service and determining which are critical to adoption while balancing cost to build and maintain. frog has identified this as the Minimum Financially Sustainable Product while other firms more commonly call this the Minimum Viable Product. This phase is the requirements gathering phase (e.g. Bridge must be able to process payments, Bridge must integrate with mapping software to show locations, etc.) This phase also identifies the recommended path forward for each component—is this something the ADA will build, buy or partner with another firm? The decisions here will impact not only the next phase but the entire success of Bridge. For example, does Bridge require a patient-facing scheduling tool? If so, the time and money required to make Bridge successful will be much higher.
2. *Design & Build* This is architecture and construction of the service—the ideal design is developed and it comes face-to-face with the reality on the ground. User experience (UX) is especially critical in this phase as any elements that introduce confusion or frustration into the process will significantly hamper the adoption of Bridge in the marketplace.
3. *Test & Iterate* While input and small tests will have taken place in phases one and two, *Test & Iterate* is where the assumptions get tested and the problems get fixed. Having a big list of items that need attention means the process is working correctly, not that something went wrong. This is one of the key distinctions of innovation vs. operations—if something keeps going wrong in an established operation, there is a serious management problem. It is important to note that phases one through three are not necessarily sequential; while they definitely happen in this order, there can be significant overlap. *Design & Build* can start before *Definition* is complete. *Test & Iterate* often begins in the midst of *Design & Build*.
4. *Incorporate into Operations* When the process of creating Bridge is complete, it will become yet another part of the ADA operations plan. Like all operations, it will be monitored and adjusted, but will have moved from being something that is being created to something that is being managed.

**Team Roles:** Bridge will require two internal ADA teams—one that is devoted full-time to Bridge, while the other is on-call as needed. This is distinct from the volunteer oversight team, which is described in a separate document. For the full-time team, the roles are:

- **Executive Lead** The buck stops with the Executive Lead who not only serves as the outward-facing accountability representative of Bridge, but also as the inward-focused executive with oversight over several diverse phases of work that must combine into a coherent whole. This includes selecting the other members of the management team. The Executive Lead is also tasked with identifying,

developing and formalizing ancillary business relationships with organizations that can add value to Bridge.

- **Phase Project Manager** Manages the day-to-day tasks of working with vendors, tracking deliverables, accounting for funds and reporting on progress. This role serves as the ScrumMaster in an Agile framework, facilitating the effective collaboration of the entire team and with the selected vendor partners. It is possible that the ADA will utilize staff familiar with the project initially and shift to a project manager with knowledge of specific technology or processes once the platform has been more fully defined.
- **Technology Lead and Solutions Architect** Takes on the “general contractor” role of coordinating the integration of the platform into existing applications where necessary while managing the development of new capability. This person integrates the customer-facing front end with the behind-the-scenes back end processes that make the application successful. The Technology Lead demonstrates understanding of each component of the technology solution, and has significant mastery in several of them. The Technology Lead has a track record of delivering User Experience excellence.
- **Digital Marketer and Community Strategist** As the project progresses, it will be important to engage a storyteller who can craft the appropriate messaging to all of the critical stakeholders. While there will be a well-defined brand for Bridge that is integrated with the ADA Masterbrand, the emphasis in the story will vary for owners and renters and suppliers and insurers, etc.
- **Dentist** It will be important to have a dentist on the team to translate and explain elements of running a dental practice that will not be easily understood by non-dentists and selected vendors. This position will be a paid consulting role for an ADA member dentist who has experience running a practice (5 years minimum) but circumstances allow them to focus on this project full-time for up to nine months.

On an as-needed basis, the Bridge management team will rely on other ADA employees, dentists, and other subject matter experts regardless of industry affiliation to evaluate options and gather information for the service. These functional areas include, but are not limited to:

- **Legal**
- **Accounting**
- **ADA Governance**
- **Software & Development** (especially in regard to Aptify, Find-a-Dentist, Credentialing, etc.)
- **User Experience & Design**
- **Marketing & Digital Media**
- **Dental Practice Ownership** (Someone who might rent out their operatory)
- **Alternative Dental Practice** (Itinerant dentists - someone who might rent space from another practice)
- **Venture Capital**
- **Start-Up Firms**
- **Consulting Firms** (frog design is a consulting firm; they and/or others will be partners through different phases of the project)

#### **Project Timeline:**

1. Phase One: potential vendors anticipate that phase one will take at least 3 months; it is not expected to take more than 6 months.
2. Phase Two: defined by the work completed in phase one. It is reasonable to expect a minimum of 9 months; more than 18 months would be unusual.
3. Phase Three: defined by the work completed in phase two. It is reasonable to expect a minimum of four months.
4. Phase Four: ongoing operations

## Minutes of the Board of Trustees

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October 24, 2017

Atlanta, Georgia

**Call to Order:** The first session of the new Board of Trustees was called to order by President Joseph P. Crowley on Tuesday, October 24, at 8:24 a.m., at the Marriott Marquis, Atrium Level A601, in Atlanta, Georgia.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Joseph P. Crowley, Jeffrey M. Cole, G. Lewis Mitchell, Richard A. Huot, Glen D. Hall, Ronald P. Lemmo, Kathleen T. O'Loughlin, Rickland G. Asai, Robert N. Bitter, Richard C. Black, Raymond A. Cohlma, Judith M. Fisch, Chad P. Gehani, John F. Harrington, Jr., Linda K. Himmelberger, Daniel J. Klemmedson, Billie Sue Kyger, Kenneth McDougall, Kirk M. Norbo, Lindsey A. Robinson, Julio H. Rodriguez, Cesar R. Sabates, George R. Shepley, and Roy Thompson.

Following the roll call, Dr. Hall announced that a quorum was present.

The following ADA staff were in attendance for all or portions of the meeting at the invitation of the president: Marcelo Araujo, vice president, Science Institute; Jerome K. Bowman, chief, Governance and Strategy Management; J. Craig Busey, Esq., general counsel; Michael A. Graham, senior vice president, Government and Public Affairs; Toni Mark, chief technology officer; Stephanie Moritz, chief communications officer; David Preble, vice president, Practice Institute; Bill Robinson, vice president, Member and Client Services; Paul Sholty, chief financial officer; Michael D. Springer, senior vice president, Business and Publishing; Marko Vujicic, chief economist and vice president, Health Policy Institute; James Willey, senior director, Practice Institute; and Anthony Ziebert, senior vice president, Education/Professional Affairs.

Others in attendance for all or portions of the meeting were: Tomisena Cole, senior manager, Board and House Matters; Thomas C. Elliott, Jr., Esq., deputy general counsel; Alyna Johnson, coordinator, Board and House Matters; Michelle Kruse, director, Administrative Services; Sharon Myaard, senior manager, Office of the Executive Director/Officer Services; Molly Potnick, coordinator, Board and House Matters; Kyle Smith, manager, House of Delegates; and Wendy Wils, Esq., deputy general counsel.

Before consideration of business, Dr. Crowley called attention to the ADA Disclosure Policy statement included on the meeting agenda and the requirement to disclose any conflicts of interest. No conflicts were disclosed at this time.

**Approval of Agenda:** Prior to approving the agenda, the following items were accepted as new business and added to the agenda: Mid-level Provider Conference Discussion and Strategy for Moving Investment Income Needed to Fund Projects in 2018. On vote, the Board of Trustees adopted the following resolution.

**B-113-2017. Resolved,** that the agenda on page 1 of the Board Agenda Book be approved, as amended, as the official order of business for the current meeting.

**Approval of Minutes of Previous Sessions:** The following resolution was adopted by the Board of Trustees.

**B-114-2017. Resolved,** that the minutes of the September 16-18, 2017, meeting of the Board of Trustees be approved.

## Structure and Operation of the 2016–17 Board of Trustees

**Organization and Rules of the Board of Trustees:** The Board was provided a copy of the *Organization and Rules of the Board of Trustees* that reflected amendments made through September 2017. If other amendments to the Board's Rules are required based on House of Delegates actions, they will be forwarded to the Governance Committee for consideration.

**Council/Commission Liaison Assignments:** In accordance with a long standing provision of the *Organization and Rules of the Board of Trustees*, the President assigns members of the Board to serve as council liaisons, with the responsibility of reviewing the programs and activities of a specified Association council/commission. Without objection, the Board suspended the Rule that officers or trustees shall not be appointed to succeed themselves on the same council to allow Dr. Chad Gehani to serve as Board Liaison to the Joint Commission on National Dental Examinations. Accordingly, President Crowley reported the following liaison assignments to ADA councils and commissions:

Advocacy for Access and Prevention	Dr. Daniel Klemmedson
Communications	Dr. Judith Fisch
Continuing Education Provider Recognition	Dr. Linda Himmelberger
Dental Accreditation	Dr. Robert Bitter
Dental Benefit Programs	Dr. Roy Thompson
Dental Education and Licensure	Dr. Kirk Norbo
Dental Practice	Dr. Richard Black
Ethics, Bylaws and Judicial Affairs	Dr. Billie Sue Kyger
Government Affairs	Dr. Rick Asai
Membership	Dr. Cesar Sabates
Members Insurance and Retirement Programs	Dr. George Shepley
National Dental Examinations	Dr. Chad Gehani
Scientific Affairs	Dr. Raymond Cohlmlia
New Dentist Committee	Dr. Julio Rodriguez
*National Commission on Recognition of Dental Specialties and Certifying Boards	Dr. Billie Sue Kyger

\*By adoption of Resolution 30H-2017, the House of Delegates approved establishing the ADA National Commission on Recognition of Dental Specialties and Certifying Boards. Subsequent to the October meeting, Dr. Billie Sue Kyger was assigned to serve as the trustee liaison to the National Commission by President Crowley.

**Report on Appointment of ADA Council Chairs, 2017-18:** The Board received an informational report identifying council, commission and committee chairs for the 2017-18 term.

**Appointment of Delegation to the FDI World Dental Federation Delegation:** Dr. Crowley reported that the following individuals were appointed to serve as the delegation to the 2018 World Dental Congress to be held in Buenos Aires, Argentina. It was noted the position of Previous Past President is vacant due to Dr. Summerhays' election as the National Liaison Officer. In accordance with the Board *Rules*, in the event a delegate position becomes vacant, the President shall appoint an ADA trustee for the unexpired portion of the term.

**Delegates**

Dr. Carol Gomez Summerhays, chair  
 Dr. Joseph Crowley, president  
 Dr. Jeffrey Cole, president-elect  
 Dr. Gary Roberts, immediate past president  
 TBD, presidential appointee  
 Dr. Chad Gehani, fourth-year trustee  
 Dr. Judith Fisch, third-year trustee  
 Dr. Kenneth McDougall, second-year trustee  
 Dr. Julio Rodriguez, first-year trustee  
 Dr. Kathleen O'Loughlin, presidential appointee

**Appointment of Standing Committees:** The Board of Trustees has the following standing committees: Audit, Budget and Finance, Business Innovation, Compensation, Diversity and Inclusion, Governance, and Pension. New Dentist members are selected by the Board of Trustees.

Accordingly, President Crowley reported that he made the following appointments to the standing committees of the Board of Trustees for 2017–18.

Audit Committee

Dr. Rickland Asai, chair  
 Dr. Jeffrey Cole, non-voting member  
 Dr. Joseph Crowley, non-voting member  
 Dr. Daniel Klemmedson  
 Dr. Billie Sue Kyger  
 Dr. John Harrington  
 Dr. Mark Chaney, member, House of Delegates  
 Dr. Matthew Roberts, member, House of Delegates  
 Independent Financial Consultant

Budget and Finance

Dr. Lindsey Robinson, chair  
 Dr. Ronald Lemmo,  
 Dr. Jeffrey Cole  
 Dr. Lew Mitchell  
 Dr. Richard Black  
 Dr. Cesar Sabates  
 Dr. George Shepley  
 Dr. Tom Paumier, member, House of Delegates  
 Dr. Wendy Brown, member, House of Delegates

Business Innovation

Dr. Lindsey Robinson, chair  
 Dr. Richard Black  
 Dr. Kirk Norbo  
 Dr. John Harrington  
 Dr. Nipa Thakkar, New Dentist Committee  
 Dr. Joseph Crowley, non-voting member  
 Dr. Jeffrey Cole, non-voting member  
 Dr. Kathleen O'Loughlin, non-voting member  
 Dr. Ronald Lemmo, consultant

Compensation

Dr. Robert Bitter, chair  
 Dr. Joseph Crowley  
 Dr. Jeffrey Cole  
 Dr. Raymond Cohlma  
 Dr. Kirk Norbo  
 Dr. Linda Himmelberger  
 Dr. Ronald Lemmo, non-voting member

**Appointment of Standing Committees  
(continued):**

Diversity and Inclusion

Dr. Chad Gehani, chair  
Dr. Judith Fisch  
Dr. Roy Thompson  
Dr. Julio Rodriguez  
Dr. Lew Mitchell  
Dr. Maurice Edwards, alumni member  
Dr. Shailee Gupta, alumni member  
Dr. Prabha Krishnan, alumni member  
Dr. Maritza Morell, alumni member

Governance

Dr. Lindsey Robinson, chair  
Dr. Daniel Klemmedson  
Dr. Kenneth McDougall  
Dr. Linda Himmelberger  
Dr. Richard Huot  
Dr. Joseph Crowley, non-voting member  
Dr. Jeffrey Cole, non-voting member  
Dr. Kathleen O'Loughlin, non-voting member  
Dr. Glen Hall, consultant

Pension

Dr. Ronald Lemmo, chair  
Dr. Joseph Crowley  
Dr. Jeffrey Cole  
Dr. Kathleen O'Loughlin  
Mr. Paul Sholty  
Ms. Judi Fleeks  
Dr. Cindi Sherwood, member, House of Delegates  
Dr. Chad Leighty, member, House of Delegates  
Dr. Cesar Sabates  
Dr. Raymond Cohlma  
Mr. J. Craig Busey

Without objection, the following resolution was adopted.

**B-115-2017. Resolved**, that the appointments to the standing committees of the Board of Trustees as made by the President be approved.

**Appointment of the Advisory Committee on Annual Meetings:** The Advisory Committee on Annual Meetings (CAM) consists of 13 members: nine general members, two Local Arrangements members, and two trustees or vice presidents, without the power to vote, appointed by the President. Without objection, the following resolutions were adopted.

**B-116-2017. Resolved**, that the appointments of chair and vice chair to the Committee on Annual Meetings as made by the President be approved.

**B-117-2017. Resolved**, that the appointments to the Advisory Committee on Annual Meetings be approved.

Dr. Chad Gehani, chair, non-voting member  
Dr. Kenneth McDougall, vice chair, non-voting member  
Dr. Howard Lieb, New York, general member and chair of the 2018 meeting  
Dr. Henry Evans, Washington, general member and 2018 program chair  
Dr. Roger Macias, Texas, general member and chair of the 2019 meeting  
Dr. Nanette Tertel, Ohio, general member and 2019 program chair  
Dr. Robert Blackwell, Illinois, general member (four-year term)  
Dr. Paul Kirkegaard, Minnesota, general member (three-year term)  
Dr. Charles McKelvey, California, general member (five-year term)  
Dr. Steven Radack, III, Pennsylvania, general member (two year term)

Dr. Debra Weisfuse, New York, general member (four year term)  
 Dr. Calbert Lum, Hawaii, 2018 local arrangements member  
 Dr. Denis Shinbori, California, 2019 local arrangements member

**Appointment of Representatives to Other Organizations and Activities:** The following appointments of representatives and members of other committees were also made by President Crowley.

Liaison to the American Student Dental Association	Dr. John Harrington
Liaison to the Alliance of the American Dental Association	Dr. Richard Huot
Dental Lifeline Network Board of Directors	Dr. Judith Fisch Dr. Kirk Norbo
ADEA Commission on Change and Innovation on Dental Education	Dr. Raymond Cohlma

**Other Committees, Task Forces, and Activities:**

American Dental Political Action Committee Board of Directors	Dr. Lindsey Robinson
Presenter of Board Reports to the House of Delegates	Dr. Robert Bitter
Liaison to Standards Committee on Dental Informatics	Dr. Rickland Asai
Publishing Liaison	Dr. Lew Mitchell
Norton Ross Selection Committee	Dr. Judith Fisch
Gold Medal Award for Excellence in Dental Research Selection Committee	Dr. Raymond Cohlma
D.C. Townhouse Oversight Group	Dr. Lindsey Robinson Dr. Richard Black Dr. Jeffrey Cole Dr. Frank Graham, chair, CGA Dr. Jerry Bird, chair, ADPAC
IOM Health Literacy Roundtable	Dr. Lindsey Robinson
CODA Standing Committee on International Accreditation (formerly JACIA)	Dr. George Shepley, chair Dr. Gary Herman, at-large member Dr. Steven Tonelli, at-large member Dr. Lawrence Wolinski, CODA representative Dr. Tariq Javed, CODA representative Dr. Joseph Crowley, president, non-voting member Dr. William Leffler, CODA chair, non-voting member

**Other Committees, Task Forces, and Activities (continued):**

SPA Oversight Committee

Dr. Richard Black  
Dr. John Harrington  
Dr. Frank Graham, CGA Rep  
Dr. Craig Armstrong, CGA Rep  
Dr. Kurt Lindemann, CC Rep

Dental Quality Alliance Committee

Dr. Daniel Klemmedson (continuing member)  
Dr. Matthew Vaillant, CDBP (continuing member)  
Dr. Michael Wojcik CDP (continuing member)  
Dr. Frank Graham, CGA (continuing member)  
Dr. Mark Koday, CAAP (continuing member)

Dental Content Committee

Dr. Billie Sue Kyger, chair  
Dr. Linda Himmelberger, vice chair  
Dr. James Hollingsworth, CDBP  
Dr. Cynthia Olenwine, CDBP  
Dr. Dave Larson, CDBP  
Dr. Jonathan Knapp, CDP  
Dr. Linda Edgar, CDP

Alternates:  
Dr. Douglas Gordon, CDBP  
Dr. Craig Ratner, CDP

ADA Library and Archives Advisory Board

Dr. Rickland Asai, chair  
Dr. Judith Fisch  
Dr. Jennifer Korzeb, CDEL  
Dr. Ronald Moser, CDEL  
Dr. Martha Keels, CSA  
Dr. William Parker, CSA  
Dr. Christine Hammer, at-large member  
Dr. Mary Hayes, at-large member  
TBD, special librarian



**Other Committees, Task Forces, and Activities (continued):**

Workgroup on ADA/CODA Relationship

Dr. Robert Bitter, co-chair  
 Dr. William Leffler, co-chair  
 Dr. Raymond Cohlma, BOT  
 Dr. Chad Gehani, BOT  
 Dr. Roy Thompson, BOT  
 Dr. Billie Sue Kyger, BOT  
 Dr. Steven Friedrichsen, CODA  
 Dr. Joseph Hagenbruch, CODA  
 Dr. Jeffrey Hicks, CODA  
 Dr. Loren Feldner, CODA

**Boards of ADA For-Profit and Not-For-Profit Subsidiaries**

ADA Foundation

Dr. Rickland Asai  
 Dr. Daniel Klemmedson  
 Dr. Roy Thompson  
 Dr. Linda Himmelberger

ADA Business Enterprises, Inc.

Dr. Kenneth McDougall

**Sessions of the Board of Trustees, 2017–18:** The *Bylaws* (Chapter V, Section 90.A.) requires that “The Board of Trustees shall hold a minimum of three regular meetings each year. The number of actual meetings to be held in excess of the three for the ensuing year shall be determined in advance by the Board of Trustees.” Without objection, Resolution B-118 was adopted.

**B-118-2017. Resolved,** that the meetings of the 2017-18 Board of Trustees be as follows:

December 2-4, 2017 (Board Retreat and Meeting, California) (Saturday – Monday)  
 February 11-13, 2018 (Sunday – Tuesday)  
 April 22-24, 2018 (Sunday – Tuesday)  
 August 12-14, 2018 (Sunday – Tuesday)  
 September 23-25, 2018 (Sunday – Tuesday)  
 October 23, 2018 (New Board Meeting, Hawaii)  
 December 13-16 (Board Retreat and Meeting—Location TBD)

**2018 Task Force on Assessment of Readiness for Practice:** The Board was requested to approve continued participation in licensure reform efforts in collaboration with ADEA and ASDA. Without objection, Resolution B-119 was adopted.

**B-119-2017. Resolved,** that the Board continue ADA participation in licensure reform efforts in collaboration with the American Dental Education Association (ADEA) and The American Student Dental Association (ASDA), and be it further

**Resolved,** that the following ADA appointments to the Joint Task Force as made by the President, be approved.

Dr. Robert Bitter, chair  
 Dr. Kirk Norbo, trustee  
 Dr. Jill Price, ADA Representative  
 Dr. Steven Holm, ADA Representative  
 Dr. Lindsey Yates, NDC Representative  
 Dr. Jerry Glickman, 2018 CDEL chair, non-voting member  
 Dr. Joseph Crowley, president, non-voting member  
 Dr. Jeffrey Cole, president-elect, non-voting member

**Contracts with the President and President-elect:** The ADA's *Organization and Rules of the Board of Trustees* require that the President and President-elect execute agreements as officers of the ADA, and that these agreements be approved by the Board of Trustees at its first meeting following the annual session. Without objection, Resolutions B-120 and B-121 were adopted.

**B-120-2017. Resolved,** that the 2017-18 President Corporate Officer Agreement be approved and adopted.

**B-121-2017. Resolved,** that the 2017-18 President-elect Corporate Officer Agreement be approved and adopted.

**Update on Annual Session:** Dr. Kathleen O'Loughlin provided an update on events of ADA2017.

**Audit Committee Charge:** The President informed the Board that he had asked the Audit Committee to look at the risk certain actions pose to the Association's brand and to consider that topic over the coming year.

## New Business

**Mid-level Provider Conference Discussion:** The Board participated in a discussion on House Resolution 54, which proposed convening a one-day meeting at ADA Headquarters for the constituents facing mid-level legislative challenges and those who have had mid-levels approved. Dr. Crowley reported that discussion would continue as a later agenda item.

**Strategy for Moving Investment Income Needed to Fund Projects for 2018:** Dr. Lemmo moved the following resolution.

**Resolved,** that the Board delegates authority to the budget and finance committee to implement a strategy recommended by our outside investment advisors to adjust and rebalance the ADA long term investment portfolio to ensure cash is available for specifically identified reserve spending projects in 2018.

A motion was made to refer the resolution to the Budget and Finance Committee to develop a report and resolution for consideration by the Board by conference call or mail ballot. On vote, the motion to refer the resolution to the Budget and Finance Committee was adopted.

**Adjournment:** Without objection, the meeting of the Board of Trustees was adjourned *sine die* at 10:44 a.m. on Tuesday, October 24, 2017.

## Minutes of the Board of Trustees

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November 21, 2017

### Special Telephonic Meeting of the Board of Trustees

**Call to Order:** A special telephonic meeting of the ADA Board of Trustees was called to order on Tuesday, November 21, 5:01 p.m., Central Time. The meeting was called in accordance with the provisions of the *Organization and Rules of the Board of Trustees*.

**Roll Call:** Officers and members of the Board of Trustees participating: Joseph P. Crowley, G. Lewis Mitchell, Jr., Richard A. Huot, Glen D. Hall, Ronald P. Lemmo, Kathleen T. O'Loughlin, Rickland G. Asai, Robert N. Bitter, Richard C. Black, Raymond A. Cohlmi, Judith M. Fisch, Chad P. Gehani, John F. Harrington, Jr., Linda K. Himmelberger, Daniel J. Klemmedson, Billie Sue Kyger, Kenneth McDougall, Kirk M. Norbo, Lindsey A. Robinson, Julio H. Rodriguez, Cesar R. Sabates, George R. Shepley, W. Roy Thompson

Dr. Jeffrey Cole was not in attendance.

Following the roll call, Dr. Hall announced that a quorum was present.

Before consideration of business Dr. Crowley called attention to the ADA Disclosure Policy included on the meeting agenda and the requirement to disclose any conflicts of interest; no conflicts of interest were disclosed.

**Staff:** Jerry Bowman, chief of Governance and Strategy Management; Wendy Wils, deputy general counsel, Thomas Elliott, deputy general counsel, Paul Sholty, chief financial officer, Robert Zinn, director, Accounting and Reporting, Thomas Parcella, director, Finance and Planning; Tomisena Cole, senior manager, Board and House Matters

**Guests:** Scott Meggenberg, Ellwood Associates.

**Investment Rebalancing Recommendation:** Dr. Crowley indicated that the limited purpose of the special meeting was to consider the Budget and Finance Committee's report on a referred resolution regarding investment rebalancing and specifically identified reserve spending projects for 2018.

Dr. Lindsey Robinson presented Resolution B-124 on behalf of the Budget and Finance Committee. The Board was asked to consider a strategy to adjust and rebalance the ADA's long-term investment portfolio. Mr. Meggenberg addressed a rebalancing plan developed by Ellwood Associates. After discussion, the Board adopted the following resolution by general consent.

#### Resolution

**B-124-2017. Resolved,** that the Board approves the implementation of a strategy recommended by the ADA's outside investment advisors to raise cash sufficient for the Q4 2017 and Q1 2018 reserve spending needs and then rebalance the ADA long term investment portfolio consistent with the ADA's existing investment portfolio targets and identified in the ADA's long term investment policy, and be it further

**Resolved,** that the Committee review the strategy in the first quarter 2018.

**Adjournment:** The special telephonic meeting of the Board of Trustees adjourned at 5:12 p.m.

## Minutes of the Board of Trustees

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December 4, 2017

St. Helena, California

**Call to Order:** The second meeting of the Board of Trustees of the American Dental Association was called to order by Dr. Joseph P. Crowley, president, on Monday, December 4, 2017, in the Vintners Room at the Meadowood Resort, St. Helena, California.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Joseph P. Crowley, Jeffrey M. Cole, G. Lewis Mitchell, Jr., Richard A. Huot, Glen D. Hall, Ronald P. Lemmo, Kathleen T. O'Loughlin, Rickland G. Asai, Robert N. Bitter, Richard C. Black, Raymond A. Cohlma, Judith M. Fisch, Chad P. Gehani, John F. Harrington, Jr., Linda K. Himmelberger, Daniel J. Klemmedson, Billie Sue Kyger, Kenneth McDougall, Kirk M. Norbo, Lindsey A. Robinson, Julio H. Rodriguez, Cesar R. Sabates, George R. Shepley and W. Roy Thompson.

Following the roll call, Dr. Hall announced a quorum was present.

The following ADA staff were in attendance for all or portions of the meeting at the invitation of the President: Jerome K. Bowman, chief of governance and strategy management; J. Craig Busey, Esq., general counsel; James S. Goodman, vice president, Conferences and Continuing Education; Bill Robinson, vice president, Member and Client Services and Paul Sholty, chief financial officer.

Others in attendance for all or portions of the meeting were: Tomisena Cole, senior manager, Board and House Matters; and Michelle Kruse, director, Administrative Services.

Before consideration of business, Dr. Crowley called attention to the ADA Disclosure Policy statement included on the meeting agenda and the requirement to disclose any conflicts of interest. No conflicts were disclosed at this time.

### Preliminary

**Approval of Agenda.** On vote, the Board adopted the agenda.

**B-123-2017. Resolved,** that the agenda be approved as the official order of business for the current meeting of the Board of Trustees except that the President may alter the order of the agenda when necessary to expedite business.

### Reports and Resolutions to the Board of Trustees

#### Education/Professional Affairs

**Reappointment of Dental Licensure Objective Structured Clinical Examination (DLOSCE) Steering Committee:** The Board was requested to reappoint the members of the DLOSCE Steering Committee for 2018. A motion was made to amend Resolution B-122 by striking the words "that can replace current clinical licensure examinations," from the first resolving clause. On vote, the amendment was adopted. Discussion ensued on the resolution. A motion was made to further amend B-122 by deletion of the third resolved clause. On vote, the motion to amend by deletion of the third resolved clause was adopted. On vote, Resolution B-122, as amended, was adopted by the Board of Trustees.

**B-122-2017. Resolved**, that a special committee be established for the 2017-2018 term to oversee the development and validation of the ADA Dental Licensure Objective Structured Clinical Examination (DLOSCE), ~~that can replace current clinical licensure examinations~~, and be it further

**Resolved**, that the DLOSCE Committee be constituted as follows:

- two Board members, one of whom shall serve as chair;
- two CDEL members, both of whom shall be general practitioners;
- two dentist educators with experience teaching comprehensive clinical dentistry;
- two current dentist state dental board members, and be it further

**Resolved**, ~~that committee expenses of up \$20,000 be covered by the funding allocated in the Division of Education's 2018 budget for DLOSCE development, and be it further~~

**Resolved**, that the following appointments to the DLOSCE Steering Committee, as made by the President, be approved:

Dr. Richard Black (chair), Board of Trustees  
 Dr. Roy Thompson, Board of Trustees  
 Dr. Eddie Hebert, CDEL representative  
 Dr. Prabu Raman, CDEL representative  
 Dr. Frank Licari, Educator, Roseman School of Dental Medicine  
 Dr. Michael Kanellis, Educator, University of Iowa School of Dentistry  
 Dr. David Carsten, Dental Quality Assurance Commission (State of Washington)  
 Dr. Mark Stetzel, Indiana State Board of Dentistry

**Organizational/Other Report of Nominations to the National Commission on Recognition of Dental Specialties and Certifying Boards:** The Board of Trustees considered multiple nominations for the nine general dentist positions on the National Commission on Recognition of Dental Specialties and Certifying Boards. On motion, a closed session of the Board was held to discuss the nominations. Subsequent to closed session, the Board selected by ballot nine nominees.

**B-127-2017. Resolved**, that the following nine individuals be appointed to serve on the National Commission on Recognition on Dental Specialties and Certifying Boards.\*

Dr. Joseph A. Battaglia, New Jersey  
 Dr. James D. Benz, Illinois  
 Dr. Ralph A. Cooley, Texas  
 Dr. Alan E. Friedel, Florida  
 Dr. Keven A. Henner, New York  
 Dr. Denise L. Hering, Ohio  
 Dr. Roger L. Kiesling, Montana  
 Dr. Charles H. Norman, North Carolina  
 Dr. Mark R. Zust, Missouri

\*To achieve the desired staggering of member terms for continuity, the initial terms of the members of the National Commission on Recognition of Dental Specialties and Certifying Boards shall be staggered, based on a lottery conducted by the Commission as set forth in Appendix 2 that accompanied Resolution 30H-2017 that established the Commission.

**Role of the Board Liaison.** Dr. Hall provided an overview of the role of Board liaisons.

**Report of the President:** Dr. Joseph Crowley gave an oral report that summarized his activities since the October 2017 Board meeting.

**Report of the President-elect:** Dr. Jeffrey Cole gave an oral report that summarized his activities since the October 2017 Board meeting.

### **Special Order of Business**

**Vision Priorities.** Dr. O'Loughlin facilitated discussion on the development of an ADA Vision Statement. Ideas generated from this initial discussion will be shared with other stakeholders for consideration and suggestions gathered will be brought back to the Board at a future meeting.

### **New Business**

**Report of Dr. Richard Huot, Second Vice President: ADA President's Reading List.** Without objection, discussion on this report was postponed to the February Board.

**Streamlining the Number of Dues Categories.** Without objection, the Board suspended the *Rule* that new business be presented to the Executive director at least ten days in advance of a meeting and that items of new business be accompanied by a written background statement. Dr. Robinson presented the following resolution for consideration. On vote, Resolution B-128-2017 was adopted by the Board of Trustees.

**B-128-2017. Resolved,** that the Board urges the Council on Membership to consider proposals to streamline the number of dues categories, and be it further

**Resolved,** that the Council is asked to report back to the Board with its proposal to the House of Delegates or with a report to the Board on its thoughts at the August 2018 Board meeting.

### **Adjournment**

Without objection, the second regular meeting of the Board of Trustees adjourned *sine die* on Monday, December 4, 2017 at 11:51 a.m.

# Minutes of the House of Delegates

October 20–23

## Minutes of the 158th Annual Session of the American Dental Association House of Delegates

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October 20–23, 2017  
Atlanta, Georgia

Friday, October 20, 2017

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### First Meeting of the House of Delegates

**Call to Order:** The First Meeting of the 158th Annual Session of the American Dental Association House of Delegates was called to order by the Speaker of the House of Delegates, Dr. Glen D. Hall, Texas, at 1:00 p.m., Friday, October 20, 2017, in the Georgia World Congress Center, Thomas Murphy Ballroom.

**Invocation:** An invocation was offered by U.S. Army Chaplain Brian Hall, and was followed by a moment of silence.

**Pledge of Allegiance:** Dr. Nicholas S. Makrides, Chief Dental Officer for the U.S. Public Health Service, led the members of the House in reciting the Pledge of Allegiance.

**Announcements:** For the benefit of the delegates and alternate delegates, the Speaker reviewed announcements regarding technology support, microphones, availability of district representatives, and a planned update from the general counsel at the conclusion of the first meeting of the House.

**Introductions:** The Speaker introduced the officers of the Association who were seated on the dais, and the former ADA presidents who were seated in the House.

**Ethics Statement:** The Speaker called attention to the Ethics Statement which appears in the *Manual of the House of Delegates and Supplemental Information* and asked that members read the Statement prior to the start of deliberations of the House of Delegates.

**Report of the Standing Committee on Credentials, Rules and Order:** Dr. David M. Ku, Texas, Committee chair, presented the Committee's report. The other members of the Committee were: Dr. Ansley Depp, Kentucky; Dr. Robert J. Hanlon, Jr., California; Dr. Lindsey D. Jackson, New Hampshire; Dr. James E. Jacobs, New York; Dr. Brent A. Larson, Utah; Dr. Richard A. Stevenson, Florida; Dr. Richard L. Taliaferro, Virginia; and Dr. Cheryl D. Watson-Lowry, Illinois.

The following requests relating to the credentialing of new alternate delegates, acting secretaries, and acting executive director were presented:

#### *Alternate Delegates*

Dr. Gregory S. Allen, Maryland  
Dr. Prabha Krishnan, New York  
Dr. W. Brian Powley, Arizona

#### *Secretaries*

Dr. Robert Barsley, Louisiana  
Dr. Lynn J. Clifford, Wyoming

#### *Executive Director*

Lauren Malone, Oregon



Dr. Ku reported that the Committee considered the requests to be the result of extenuating circumstances and recommended the individuals be credentialed. Hearing no objections, the Speaker declared the credentials granted.

Dr. Ku reported the presence of a quorum and reminded everyone of the provisions of the ADA Disclosure Policy in effect during the meetings of the House and during the reference committee hearings. The Speaker asked that such disclosures be made prior to speaking to any resolution where such relationship would be applicable.

*Minutes of the 2016 Session of the House of Delegates.* On behalf of the Committee, Dr. Ku moved Resolution 24 (*Supplement:1029*). The Speaker asked if there were any corrections to the minutes; hearing none, the Speaker declared the minutes adopted.

**24H-2017. Resolved**, that the minutes of the 2016 session of the House of Delegates, as published in Transactions, 2016 (pages 267-359), be approved.

*Adoption of Agenda and Order of Agenda Items.* On behalf of the Committee, Dr. Ku moved Resolution 25 (*Supplement:1030*). The Speaker asked if there was any discussion regarding the resolution; hearing none, the Speaker declared the agenda adopted.

**25H-2017. Resolved**, that the agenda as presented in the *2017 Manual of the House of Delegates and Supplemental Information* be adopted as the official order of business for this session, and be it further **Resolved**, the Speaker is authorized to alter the order of the agenda as deemed necessary in order to expedite the business of the House.

*Referrals of Reports and Resolutions.* On behalf of the Committee, Dr. Ku moved Resolution 26 (*Supplement:1031*).

The Speaker announced the following newly received resolutions and their reference committee referrals.

Committee D—Legislative, Health, Governance and Related Matters  
Eleventh Trustee District Resolution 61—Strengthening the State Public Affairs (SPA) Program

Committee B—Dental Benefits, Practice and Related Matters  
Eleventh Trustee District Resolution 58S-1—Strategies for Elder Care

The Speaker announced that the Joint Commission on National Dental Examinations withdrew Resolution 20.

The Speaker announced that Resolution 46—Genetic Testing for Risk Assessment was withdrawn by the Ninth Trustee District.

Dr. George R. Shepley, Maryland, requested that Resolution 60—Credit Card Processing (*Supplement:2095*) be withdrawn.

The Speaker asked if there was any objection to withdrawal of any of these resolutions; hearing none, the Speaker declared the resolutions withdrawn.

Hearing no objection, Resolution 26 was adopted.

**26H-2017. Resolved**, that the list of referrals recommended by the Speaker of the House of Delegates be approved.

Dr. Ku noted that the balance of the Committee's report was informational, but highlighted information regarding the process of substituting delegates and alternates during meetings of the House; the schedule of reference committee hearings and the posting and paper distribution of reference committee reports; the

introduction of new business; the prohibition against proxy voting in the House of Delegates; and the time for voting for elective offices on the House floor.

**Report of the President:** Dr. Gary L. Roberts addressed the House of Delegates. Speaking on dentistry's focus on research and preventive dentistry to address the dental health crisis following World War II, he stated, "Our colleagues 70 years ago won the debate and the country invested in education and research. That was a big risk and it was unpopular. But in hindsight, it clearly was the right path." He added, "...let's look at the past as a guide that we not put Band-Aids on problems but address root causes, that we act on plans that promise long-term viability." He commented on accomplishments made during the year, including the launch of the ADA credentialing service; launch of a new Find-a-Dentist search tool; continued efforts to increase licensure portability; revising the specialty recognition process; and strengthening relationships with tribal nations to improve oral health. The Report of the President was referred to Reference Committee A (Budget, Business, Membership and Administrative Matters) and was posted on ADA Connect. (A video recording of Dr. Roberts' address to the House will be available on ADA.org until October 2018.)

**Report of the Executive Director:** Dr. Kathleen T. O'Loughlin presented her annual report to the House of Delegates.

**Report of the Treasurer:** Dr. Ronald P. Lemmo presented to the House of Delegates his report on the status of the Association's finances.

**Presentation of Reports of the Board of Trustees:** On behalf of the Board of Trustees, Dr. Alvin W. Stevens, Jr., Fifth District Trustee, presented the reports of the Board of Trustees to the House of Delegates. The Board expressed its appreciation to the members of Committee on Local Arrangements and its volunteers for their dedicated work.

*Nominations to ADA Councils, Commissions and the New Dentist Committee.* Dr. Stevens moved Resolution 27 (*Supplement:1020*) on behalf of the Board of Trustees. The Speaker asked if there were any additional nominations; hearing none, the Speaker declared the nominees elected.

**27H-2017. Resolved,** that the nominees for membership on ADA councils, commissions and the New Dentist Committee submitted by the Board of Trustees in accordance with Chapter VII, Section 100(H) of the *Bylaws* be elected.

The Speaker noted that it is the custom that the newly elected members of councils and commissions assume office after the close of the last meeting of the House of Delegates.

Dr. Stevens reported that the names of members retiring from ADA councils and commissions are identified in Board Report 1 and asked the House to recognize the retiring members for their invaluable service to the profession.

Dr. Stevens noted that Reports 1 through 14 of the Board of Trustees to the House of Delegates were referred to the appropriate reference committees.

Dr. Stevens asked the House to observe a moment of silence in memory of the former leaders who passed away since the last session of the House of Delegates.

## **Nominations of Officers and Trustees**

**President-elect:** The Speaker called for nominations for the office of president-elect. Dr. Wendy A. Brown, Maryland, nominated Dr. Jeffrey M. Cole, Delaware, for the office of president-elect; Dr. Joelle Abed-Elahad, Michigan, nominated Dr. Gary E. Jeffers, Michigan, for the office of president-elect; and Dr. Nipa R. Thakkar, Pennsylvania, nominated Dr. Andrew J. Kwasny, Pennsylvania, for the office of president-elect. The Speaker asked if there were any additional nominations; there were none. Acceptance speeches were given by each

president-elect candidate. The Speaker announced that the names of the candidates would be placed on the ballot for election on Monday, October 23.

**Second Vice President:** The Speaker called for nominations for the office of second vice president. Dr. Alonzo M. Bell, Virginia, nominated Dr. Richard A. Huot, Florida; and Dr. Mark B. Desrosiers, Connecticut, nominated Dr. Carolyn J. Malon, Connecticut, for the office of second vice president. The Speaker asked if there were any additional nominations; there were none. Acceptance speeches were given by both second vice president candidates. The Speaker announced that the names of the candidates would be placed on the ballot for election on Monday, October 23.

**District Trustees:** The Speaker called for nominations from District Three, Four, Five, and Nine, as follows:

Dr. Bruce R. Terry, Pennsylvania, nominated Dr. Linda K. Himmelberger, Pennsylvania, as Third District Trustee  
 Dr. Edwin A. Del Valle Sepúlveda, Puerto Rico, nominated Dr. George R. Shepley, Maryland, as Fourth District Trustee  
 Dr. Louvenia A. Rainge, Georgia, nominated Dr. John F. Harrington, Jr., Georgia, as Fifth District Trustee  
 Dr. Ned J. Murphy, Wisconsin, nominated Dr. Julio H. Rodriguez, Wisconsin, as Ninth District Trustee.

In accordance with the *ADA Bylaws*, the Speaker declared Dr. Linda K. Himmelberger, Dr. George R. Shepley, Dr. John F. Harrington, Jr., and Dr. Julio H. Rodriguez duly elected as trustees of their respective districts.

**New Business:** The Speaker announced that items of new business be submitted to the headquarters office for processing.

**Remarks by the President of the American Dental Association Foundation (ADAF):** Dr. William R. Calnon, President of the American Dental Association Foundation, addressed the House of Delegates reporting on recent activities of the Foundation and thanking members for their continued support.

**Remarks by the Chair of the American Dental Political Action Committee (ADPAC):** Dr. Richard F. Andolina, ADPAC chair, addressed the House of Delegates thanking members for their continued support of ADPAC.

**Withdrawn Resolution:** Dr. Mark V. Cowley, Utah, requested that Resolution 37—Continuing Education Credit for Delegates and Alternates of the ADA House of Delegates (*Supplement:2062*) be withdrawn.

The Speaker asked if there was any objection to the withdrawal of Resolution 37; hearing none, the Speaker declared Resolution 37 withdrawn.

**Report of the General Counsel:** Mr. J. Craig Busey, general counsel, addressed the House of Delegates providing an overview of legal issues relating to the dental profession.

## Adjournment

A motion was made to adjourn the First Meeting of the ADA House of Delegates by Dr. David Schimmel, Pennsylvania. With no other business before the House, the Speaker declared the First Meeting of the ADA House of Delegates adjourned at 3:19 p.m., Friday, October 20, 2017.

## Monday, October 23, 2017

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### Second Meeting of the ADA House of Delegates

**Call to Order:** The Second Meeting of the 158th Annual Session of the ADA House of Delegates was called to order at 7:30 a.m., Monday, October 23, 2017, by the Speaker of the House of Delegates, Dr. Glen D. Hall.

**Introduction of Trustee Members of the Board of Trustees:** The Speaker introduced the 17 trustees of the American Dental Association who were seated with their delegations.

**Recognition of New Delegates and Alternate Delegates:** The Speaker asked new or first time delegates and alternates to stand and be recognized.

**Report of the Standing Committee on Credentials, Rules and Order:** Dr. David M. Ku, Committee chair, announced that the Committee had received a request relating to the credentialing of a new alternate delegate. The Committee considered this requests to be the result of extenuating circumstances and recommended that the following individual be credentialed:

*Alternate Delegate*  
Dr. Mark R. Zust, Missouri

Hearing no objection, the Speaker announced that the credential was granted.

Dr. Ku announced the presence of quorum and reminded the House of the provisions of the ADA Disclosure Policy.

**Voting for Elective Officers:** Voting for officer elections took place in the House of Delegates through electronic voting on the House floor.

The Speaker opened the vote for the office of president-elect. The candidates on the ballot, listed in alphabetical order, were as follows: Dr. Jeffrey M. Cole, Delaware; Dr. Gary E. Jeffers, Michigan; and Dr. Andrew J. Kwasny, Pennsylvania. Hearing no objection, the Speaker closed the vote. The Speaker called for the House to stand at ease while the voting results were tallied. Hearing no objection, the House stood at ease at 7:49 a.m. and reconvened at 7:50 a.m.

The Speaker announced that Dr. Jeffrey M. Cole, Delaware, had been elected to the office of president-elect. Dr. Jeffrey M. Cole, Dr. Gary E. Jeffers, and Dr. Andrew J. Kwasny briefly addressed the House of Delegates.

The Speaker opened the vote for the office of second vice president. The candidates on the ballot, listed in alphabetical order, were as follows: Dr. Richard A. Huot, Florida; and Dr. Carolyn J. Malon, Connecticut. Hearing no objection, the Speaker closed the vote. The Speaker called for House to stand at ease while the voting results were tallied. Hearing no objection, the House stood at ease at 7:58 a.m. and reconvened at 8 a.m.

The Speaker announced that Dr. Richard A. Huot, Florida, had been elected to the office of second vice president. Dr. Richard A. Huot and Dr. Carolyn J. Malon briefly addressed the House of Delegates.

**Withdrawn Resolutions:** The Speaker announced that the following resolutions had been requested to be withdrawn by their sponsor:

Committee B—Dental Benefits, Practice and Related Matters

Eleventh Trustee District Resolution 58S-1—Strategies for Elder Care (*Supplement:3089a*)

Dr. Prabu Raman, Missouri, requested that Resolution 55—Credible On-Line Rating System of Dental Benefit Plans from the American Dental Association to Help Consumers and Purchasers (*Supplement:3081*) be withdrawn.

Hearing no objection, Resolutions 55 and 58S-1 were withdrawn.

**Priority Agenda Items:** Dr. Michael H. Halasz, Ohio, chair of the Council on Ethics, Bylaws and Judicial Affairs, moved that Resolution 64 (Consent Calendar—Reference Committee D) be added to the Priority Agenda and considered as the first item of business.

In speaking to the motion, Dr. Halasz stated, “There are several resolutions proposing bylaws changes and bylaws amendments, and each of those has to have two sets of verbiage and language and amendments because we have the pending Resolution 7. If we deal with Resolution 7 first, then we only need to deal with one version of bylaws in each of those other resolutions.”

The Speaker asked if there was any discussion on the motion to add Resolution 64 to the Priority Agenda and consider Resolution 64 as the first item of business; there was none. On vote, the motion was adopted.

Priority agenda items were considered in the following order:

- Consent Calendar—Reference Committee D Resolution 64 (Reference Committee D)
- Authority to Approve the Budget—Board of Trustees Resolution 52 (Reference Committee A)
- Approval of 2018 Budget—Board of Trustees Resolution 22 (Reference Committee A)
- Special Assessment—Board of Trustees Resolution 32, Fourteenth Trustee District Substitute Resolution 32S-1, Sixteenth Trustee District Substitute Resolution 32S-2 and Reference Committee Substitute Resolution 32RC (Reference Committee A)
- Proposed National Commission on Recognition of Dental Specialties and Certifying Boards—Board of Trustees Resolution 30 and Reference Committee Substitute Resolution 30RC (Reference Committee C)

The first priority agenda item was presented by Dr. Bradley W. Barnes, Illinois, chair, Reference Committee D.

**Consent Calendar** (Reference Committee D Resolution 64): The Reference Committee reported as follows:

The appended Resolution 64 lists resolutions referred and considered by this Reference Committee that received no or limited testimony, all positive testimony, all negative testimony, or the Reference Committee feels these resolutions were fully debated, with all issues considered. The Reference Committee’s recommended action (adopt, adopt in lieu of, not adopt or refer) is identified on each resolution presented on the consent calendar. By adopting Resolution 64, the recommendations of the Reference Committee on the consent calendar resolutions will become the actions of the House of Delegates. It should be noted that if a resolution on the consent calendar is to “adopt in lieu of” with a Committee Recommendation to Vote No and the resolution remains on the approved consent calendar, the resolution is defeated and the underlying resolutions are automatically moot.

As customary, before voting on the consent calendar, any delegate wishing to discuss an item on the consent calendar has the right to request that resolution be removed and considered separately.

**64. Resolved**, that the recommendations of Reference Committee D on the following resolutions be accepted by the House of Delegates.

**Resolution 4—(Adopt)—Amendment to Chapter I, Section 20.A. of the ADA Bylaws: Licensure Requirement by Statute for Constituent Membership** (*Supplement:5005*) \$: None; FTE: 0  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 62**—(Adopt)—Study of the Effects of States Requiring Licensure as a Prerequisite for Active Membership \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 5**—(Adopt)—Amendment to Chapter I of the ADA *Bylaws*: Addition of Section 30. Review of Licensure Status (*Supplement:5007*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 6**—(Adopt)—Amendment to Section 4.A. of the ADA *Principles of Ethics and Code of Professional Conduct* (*Supplement:5013*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 7**—(Adopt)—Amendment of the ADA *Bylaws* Pursuant to 118H-2014 (*Supplement:5018*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 61-2016**—(Adopt)—ADA *Constitution and Bylaws* Review Pursuant to Resolution 118H-2014 (*Supplement:5023*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 33**—(Adopt)—Peer to Peer State Dental Medicaid Audits (*Supplement:5026*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 38**—(Refer)—Improper Use of the DEA Registration Number (*Supplement:5028*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes on Referral**

**Resolution 51**—(Not Adopt)—ADA Marketing Campaign (*Supplement:5047*) \$600,000 over 2 years; Amount On-going \$300,000/year; Net Dues Impact \$2.90/year; FTE: 1

**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 61**—(Not Adopt)—Strengthening the State Public Affairs (SPA) Program (*Supplement:5062*) \$400,000; Amount One-time \$400,000; Net Dues Impact \$3.86; FTE: 0

**COMMITTEE RECOMMENDATION: Vote No**

Dr. Barnes moved Resolution 64 with the Committee Recommendation to Vote Yes.

A request was made to remove the following resolution from the Consent Calendar:

Resolution 61 was removed by Dr. Cynthia E. Sherwood, Kansas.

In response to a question, the Speaker responded that with the permission of the House, any item removed from the consent calendar will be moved to the non-consent agenda as a non-priority item with the exception of Resolution 7.

In response to a question, the Speaker clarified that Resolution 61, has been pulled from the Consent Calendar and not Resolution 61-2016.

Hearing no objection, the amended Resolution 64 was adopted by general consent.

**64H-2017. Resolved**, that the recommendations of Reference Committee D on the following resolutions be accepted by the House of Delegates.

**Resolution 4**—(Adopt)—Amendment to Chapter I, Section 20.A. of the ADA *Bylaws*: Licensure Requirement by Statute for Constituent Membership (*Supplement:5005*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 62**—(Adopt)—Study of the Effects of States Requiring Licensure as a Prerequisite for Active Membership \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 5**—(Adopt)—Amendment to Chapter I of the ADA *Bylaws*: Addition of Section 30. Review of Licensure Status (*Supplement:5007*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 6**—(Adopt)—Amendment to Section 4.A. of the ADA *Principles of Ethics and Code of Professional Conduct* (*Supplement:5013*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 7**—(Adopt)—Amendment of the ADA *Bylaws* Pursuant to 118H-2014 (*Supplement:5018*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 61-2016**—(Adopt)—ADA *Constitution and Bylaws* Review Pursuant to Resolution 118H-2014 (*Supplement:5023*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 33**—(Adopt)—Peer to Peer State Dental Medicaid Audits (*Supplement:5026*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 38**—(Refer)—Improper Use of the DEA Registration Number (*Supplement:5028*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes on Referral**

**Resolution 51**—(Not Adopt)—ADA Marketing Campaign (*Supplement:5047*) \$600,000 over 2 years; Amount On-going \$300,000/year; Net Dues Impact \$2.90/year; FTE: 1

**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 61**—(Not Adopt)—Strengthening the State Public Affairs (SPA) Program (*Supplement:5062*) \$400,000; Amount One-time \$400,000; Net Dues Impact \$3.86; FTE: 0

**COMMITTEE RECOMMENDATION: Vote No**

*Note. For the purpose of a fully documented record, the text of the resolutions presented in Resolution 64H follows.*

**Consent Calendar Resolutions—Adopted**

*Amendment to Chapter I, Section 20.A. of the ADA Bylaws: Licensure Requirement by Statute for Constituent Membership.*

**4H-2017. Resolved**, that Section 20.A. of Chapter I of the ADA Bylaws, scheduled to go into effect at the close of the 2017 House of Delegates, be amended as follows (additions underscored, deletions ~~stricken through~~):

## Section 20. MEMBERSHIP ELIGIBILITY

A. ACTIVE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree shall be eligible to be an active member of this Association if he or she meets the following qualifications:

a. Is a member in good standing of this Association as that term is defined in these *Bylaws*:  
and

b. Is licensed and/or registered to practice dentistry where the laws and regulations of a constituent's jurisdiction require licensure and/or registration in order to be a member of the constituent; and

~~b.c.~~ Is a member in good standing of the constituent and component\* where the member either resides, is employed or practices, unless:

1. the individual is employed by or is serving on active duty in one of the federal dental services\*\* on a full-time basis and is not otherwise employed or practicing dentistry within the jurisdiction of a constituent or component;
2. the individual is employed or practicing dentistry in a country other than the United States and is a graduate of a dental school accredited by the Commission on Dental Accreditation; or
3. the individual is otherwise ineligible for active membership in a constituent or component where the individual resides, is employed or practices.

\* As used herein, the term "constituent" means a dental association organized in a state or territory of the United States or in Washington, D.C. that is chartered by the ADA House of Delegates. The term "component" means a local dental association that may be created within the boundaries of a constituent by the constituent.

\*\* The term "federal dental services" as used herein shall mean the dental departments of the Air Force, the Army, the Navy, the Public Health Service, the department of Veterans Affairs and other federal agencies.

*Study of the Effects of States Requiring Licensure as a Prerequisite for Active Membership*

**62H-2017. Resolved**, that the Council on Ethics, Bylaws and Judicial Affairs is directed to study the proposal for allowing a constituent's bylaws to require licensure as one prerequisite for active membership and the effects, if any, that such an amendment would have on other portions of the ADA *Bylaws*, and to report back to the 2018 House of Delegates with proposed amendments to the ADA *Bylaws* that would allow states to require licensure as a condition of membership in the constituent.

*Amendment to Chapter I of the ADA Bylaws: Addition of Section 30. Review of Licensure Status*

**5H-2017. Resolved**, that Chapter I of the ADA *Bylaws*, scheduled to go into effect at the close of the 2017 House of Delegates, be amended by the addition of a new Section 30 as follows (additions underscored):

Section 30. REVIEW OF LICENSURE STATUS. A constituent may conduct a review of the licensure status of an applicant for membership to determine if the applicant's license to practice dentistry (if any) has been suspended or revoked for any of the reasons listed in Chapter XII, Section 20. of these ADA Bylaws and, if so, the constituent has the discretion to deny membership to the applicant.

and be it further

**Resolved**, that current Sections 30. through 50. of Chapter I of the ADA *Bylaws* be renumbered accordingly.

**Note:** To be consistent with the numbering scheme of the proposed ADA *Bylaws* that are before the 2017 House of Delegates for adoption, the citation to Chapter XII., Section 20. will become Chapter X, Section 20. If the resolution proposing adoption of the amended ADA *Bylaws* is passed by the House.

*Amendment to Section 4.A. of the ADA Principles of Ethics and Code of Professional Conduct*



**6H-2017. Resolved**, , that Section 4.A. of the ADA *Principles of Ethics and Code of Professional Conduct* be amended as follows (additions underscored, deletions ~~stricken through~~):

#### **4.A. PATIENT SELECTION**

While dentists, in serving the public, may exercise reasonable discretion in selecting patients for their practices, dentists shall not refuse to accept patients into their practice or deny dental service to patients because of the patient's race, creed, color, ~~sex~~ gender, sexual orientation, gender identity or national origin.

#### *Amendment of the ADA Bylaws Pursuant to 118H-2014*

**7H-2017. Resolved**, that Chapters II through XX of the current ADA *Bylaws* be deleted in their entirety and that Chapters II through XVI of the version of the ADA *Bylaws* set forth in Appendix I be adopted, to take effect at the adjournment *sine die* of the 2017 House of Delegates, and be it further **Resolved**, that the Appendices I, II and III of the current ADA *Bylaws* be deleted in their entirety, and be it further

**Resolved**, that Chapters II through XIX of the *Governance and Organizational Manual of the American Dental Association* as set forth in Appendix 2 be adopted, to take effect at the adjournment *sine die* of the 2017 House of Delegates, and be it further

**Resolved**, that the amendments indicated to the *Operation of the House of Delegates, Rules of the House of Delegates, Representation of Constituents and Periodic Reapportionment of Delegates and Alternate Delegates* and *Standing Committees of the House of Delegates*, contained the *Manual of the House of Delegates* (Appendix 3), be adopted, to take effect at the adjournment *sine die* of the 2017 House of Delegates, and be it further

**Resolved**, that the Board of Trustees is urged to adopt a New Dentist Committee charter to be placed in the *Organization and Rules of the Board of Trustees*, with such charter containing the same set of eligibility, selection and appointment criteria, operational procedures and duties as presently set forth in Chapter VII, *Section 140* of the current ADA *Bylaws*.

**Note:** Appendices 1, 2 and 3 are located in *2017 Supplement to Annual Reports and Resolutions, Volume 2*, and follow page 5018.

#### *ADA Constitution and Bylaws Review Pursuant to Resolution 118H-2014*

**61-2016H. Resolved**, that the ADA *Constitution* be amended as follows (additions underscored, deletions ~~stricken through~~):

#### **Constitution**

#### **ARTICLE I • NAME**

The name of this organization shall be the American Dental Association, ~~hereinafter referred to as "the Association" or ("this Association-")~~

\* \* \*

#### **ARTICLE III • ORGANIZATION**

Section 10. INCORPORATION: This Association is a non-profit corporation organized under the laws of the State of Illinois. If this corporation shall be dissolved at any time, no part of its funds or property shall be distributed to, or among, its members but, after payment of all indebtedness of the corporation, its surplus funds and properties shall be used for dental education and dental research in such manner as the then governing body of ~~the~~ this Association may determine.

Section 40. MEMBERSHIP: The membership of this Association shall consist of dentists and other persons whose qualifications and classifications shall be as established in ~~Chapter I of the Bylaws.~~

Section 50. ~~CONSTITUENTS SOCIETIES AND COMPONENTS~~: ~~Constituent societies~~ ~~Constituents~~ of this Association shall be those dental societies or dental associations chartered in conformity with ~~Chapter II~~ of the Bylaws.

~~Section 60. COMPONENT SOCIETIES~~: Component societies of this Association shall be those dental societies or dental associations organized in conformity with ~~Chapter III~~ of the Bylaws of this Association and in conformity with the bylaws of their respective ~~constituent societies~~ constituents.

~~Section 70 60. TRUSTEE DISTRICTS~~: The constituent societies of ~~the this~~ Association and the federal dental services shall be grouped into ~~seventeen (17)~~ trustee districts.

#### ARTICLE IV • GOVERNMENT

Section 10. LEGISLATIVE BODY: The legislative and governing body of this Association shall be a House of Delegates, ~~which may be referred to as "the House" or "this House."~~

Section 20. ADMINISTRATIVE BODY: The administrative body of this Association shall be a Board of Trustees, ~~which may be referred to as "the Board" or "this Board."~~

\* \* \*

#### ARTICLE VI • ANNUAL SESSION

The annual session of this Association shall be conducted in accordance with ~~Chapters V and XV~~ of the Bylaws.

#### ARTICLE VII • PRINCIPLES OF ETHICS AND CODE OF PROFESSIONAL CONDUCT

The *Principles of Ethics and Code of Professional Conduct* of this Association and the codes of ethics of the ~~constituents~~ and components ~~societies~~ which are not in conflict with the *Principles of Ethics and Code of Professional Conduct* of this Association, shall govern the professional conduct of all members.

#### *Peer to Peer State Dental Medicaid Audits*

**33H-2017. Resolved**, that the American Dental Association encourages all state dental associations to work with their respective state Medicaid agency to ensure that Medicaid dental audits be conducted by dentists who have similar educational backgrounds and credentials as the dentists being audited, as well as being licensed within the state in which the audit is being conducted.

#### **Consent Calendar Resolutions—Resolution Referred**

##### *Improper Use of the DEA Registration Number*

**38. Resolved**, that the appropriate ADA agency seek Federal legislative remedies to stop the inappropriate use of the DEA Registration number.

#### **Consent Calendar Resolutions—Not Adopted**

##### *ADA Marketing Campaign*

**51. Resolved**, that the ADA will provide the following information to constituent societies and the ADA House of Delegates regarding Resolution 67H-2016: A Three-Year Initiative to Drive Utilization of Dental Services for ADA Members, beginning December 31, 2017:

1. Keywords/phrases being used for paid search advertising
2. Geographic breakdown of the campaign budget within the state
3. Levels of reach and frequency within each state
4. Other platforms being used within the state other than keyword/search engine platform
5. Actual cost per clicks (CPCs), click thru rates (CTRs) and cost per impression (CPI)
6. Percentage of the campaign media budget being spent in each state
7. Percentage of the annual campaign budget being spent on the following areas
  - a. Agency fees
  - b. Production
  - c. Media Placement
8. Find a Dentist Google analytics main view (unique pageviews, city, device bounce rate, etc.) by state
9. Member dentists who have incomplete Find a Dentist profiles by state

Dr. Michael H. Halasz, Ohio, chair, Council on Ethics, Bylaws and Judicial Affairs, thanked the members of the *Bylaws* Rewrite Task Force and staff for their efforts in completing the ADA *Bylaws* revision.

The second priority agenda item was presented by Dr. Chad R. Leighty, Indiana, chair, Reference Committee A.

**Authority to Approve the Budget** (Board of Trustees Resolution 52): The Reference Committee reported as follows:

The Reference Committee heard extensive testimony on Resolution 52, with a majority of the testimony being in opposition to shifting budget authority.

Testimony in opposition to shifting budget authority of the House of Delegates centered on multiple issues such as the loss of oversight, checks and balances, and engagement in the budgetary process.

The Reference Committee thanks the Board of Trustees for its attention to the budget process and appreciates its input. However, the Reference Committee feels strongly that the budget authority should remain with the House of Delegates. Accordingly, the Reference Committee recommends that the budget authority not be shifted to the Board of Trustees.

The Standing Committee on Constitution and Bylaws approves the wording of Resolution 52 as submitted, except that, because of the pendency of Resolution 7 to delete Chapters II through XX of the current *Bylaws* and adopt Chapters II through XVI of the proposed *Bylaws* and revisions to the *Manual of the House of Delegates*, the Standing Committee proposes an additional resolving clause to make changes to the proposed *Bylaws* and *Manual of the House of Delegates* conforming to the amendments proposed in this resolution should this resolution and Resolution 7 be adopted by the House of Delegates. The amended resolution is as follows.

**52. Resolved**, that CHAPTER V. HOUSE OF DELEGATES, *Section 50. DUTIES* of the ADA *Bylaws* be amended as follows (additions underscored, deletions ~~stricken through~~):

*Section 50. DUTIES*: It shall be the duty of the House of Delegates to:

- A. Elect the elective officers.
- B. Elect the members of the Board of Trustees.
- C. Elect the members of the councils and commissions except as otherwise provided by these *Bylaws*.
- D. Receive and act upon reports of the committees of the House of Delegates.
- E. ~~Adopt an annual budget and~~ Establish the dues of active members for the following year.

F. Serve as the court of appeal from decisions of the Council on Ethics, Bylaws and Judicial Affairs involving disputes arising between constituent societies or between constituent and component societies, and as provided in Chapter XII of these *Bylaws*.

and be it further

**Resolved**, that CHAPTER V. HOUSE OF DELEGATES, *Section 130. RULES OF ORDER*, Subsection A. STANDING RULES AND REPORTS, paragraph b. APPROPRIATION OF FUNDS and paragraph c. APPROVAL OF THE ANNUAL BUDGET of the ADA *Bylaws* be deleted in their entirety as follows (deletions ~~stricken through~~):

A. STANDING RULES AND REPORTS.

a. REPORTS. All reports of elective officers, councils and committees, except supplemental reports, shall be sent to each delegate and alternate delegate at least fourteen (14) days in advance of the opening of the annual session. All supplemental reports shall be distributed to each delegate before such report is considered by the House of Delegates.

~~b. APPROPRIATION OF FUNDS. Any resolution proposing an appropriation of funds, except those relating to the annual budget, shall be referred to the Board of Trustees for a report at the same session on the availability of funds for the purpose specified.~~

~~c. APPROVAL OF ANNUAL BUDGET. The proposed annual budget shall be submitted by the Board of Trustees to the members of the House of Delegates at least thirty (30) days prior to the opening meeting of the annual session, shall be referred to a special reference committee on budget for hearings at the annual session and then shall be considered for approval as a special order of business at the second meeting of the House of Delegates. In the event the budget as submitted is not approved, all recommendations for changes shall be referred to the Board of Trustees to prepare and present a revised budget. This procedure shall be repeated until a budget for the ensuing fiscal year shall be adopted.~~

and be it further

**Resolved**, that the remaining paragraphs d. through f. of CHAPTER V. HOUSE OF DELEGATES, *Section 130. RULES OF ORDER*, Subsection A. STANDING RULES AND REPORTS, be re-lettered as paragraphs b. through d., respectively, and be it further

**Resolved**, that CHAPTER VII. BOARD OF TRUSTEES, *Section 100. DUTIES*, Subsection F. of the ADA *Bylaws* be amended as shown below (additions underscored):

F. Develop, prepare and adopt a budget for carrying on the activities of the Association for each ensuing fiscal year, and present for action by each House of Delegates a resolution setting forth the proposed dues of active members for the following year. Notice of such a resolution shall be sent electronically to each constituent society and posted ADA Connect or its equivalent for the House of Delegates not less than thirty (30) days before such session to permit prompt, adequate notice by each constituent society to its delegates and alternate delegates to the House of Delegates of this Association, and shall be announced to the general membership in an official publication of the Association at least fifteen (15) days in advance of the annual session.

and be it further

**Resolved**, that the section entitled "Consideration of Budget" contained in the *Rules of the House of Delegates* be deleted in its entirety (deletions ~~stricken through~~):

**~~Consideration of Budget~~**

~~The proposed annual budget shall be submitted to the members of the House of Delegates at least 30 days prior to the opening meeting of the annual session. In the event the proposed budget as submitted is not approved, all recommendations for changes adopted by the House of Delegates shall be referred to the Board of Trustees to prepare and present a revised, proposed budget.~~

~~Recommendations for changes shall be made in the form of fully debatable motions which shall be individually considered and acted upon by the House of Delegates. To be in order, the proper wording for such a motion must be:~~

~~"I move that the proposed budget be returned to the Board of Trustees for revision with the recommendation that..."~~

~~If any recommendations for changes in the proposed budget receive House approval, they shall be identified as House Budget Recommendation 1, House Budget Recommendation 2, etc.~~

~~House approval of any recommendations for changes automatically returns the proposed budget to the Board of Trustees for revision and subsequent resubmission to the House of Delegates for approval or further recommendations for modification. This procedure will be repeated until a preliminary budget for the ensuing fiscal year is adopted.~~

~~This preliminary budget includes all items that the Board of Trustees and House of Delegates have approved, but it remains a preliminary budget since it does not incorporate any programs that may subsequently be adopted by the House at this session which require additional funding. The final budget is established and adopted by the House of Delegates through its approval of the preliminary budget plus the changes made as a result of actions by the House of Delegates. The Board of Trustees will present this final budget, which will include the preliminary budget plus any additions made as a result of action by the House of Delegates, to the House at the last meeting of the annual session.~~

and be it further

**Resolved**, if Resolution 7, *Amendment of the ADA Bylaws pursuant to 118H-2014* is adopted, that the following conforming changes to the *ADA Bylaws* amendments shown in this resolution be approved for placement into the newly revised *ADA Bylaws* (additions underscored, deletions ~~stricken~~):

### CHAPTER III • HOUSE OF DELEGATES

\* \* \*

*Section 50. DUTIES:* It shall be the duty of the House of Delegates to:

\* \* \*

~~E. Adopt an annual budget and establish~~ Establish the dues of active members for the following year.

\* \* \*

~~G. Provide sufficient support to the ADA Foundation in addition to non-Association funding to assure the continued viability of the Foundation's research activities.~~

### CHAPTER V • BOARD OF TRUSTEES

\* \* \*

*Section 80. DUTIES:* It shall be the duty of the Board of Trustees to:

\* \* \*

F. Prepare, ~~and propose and adopt~~ a budget ~~to the House of Delegates~~ for each ensuing fiscal year, including a recommendation to be forwarded to the House of Delegates for the dues of active members.

G. Provide sufficient support to the ADA Foundation in addition to non-Association funding to assure the continued viability of the Foundation's research activities.

and reletter remaining subsections G. through P. of *Section 80.* as subsections H. through Q.

## CHAPTER XII • FINANCES

\* \* \*

*Section 40.* APPROVAL OF ANNUAL BUDGET. ~~The proposed~~ An initial annual budget shall be submitted by the Board of Trustees to the members of the House of Delegates for review and comment at least thirty (30) days prior to the opening meeting of the annual session. The initial budget, shall be referred to a reference committee on budget for hearings at the annual session and all comments and recommendations adopted by the House of Delegates, together with any proposals for new spending initiatives and funding mechanisms approved by the House of Delegates and the dues for active members established by the House of Delegates for the ensuing year shall be referred to the Board of Trustees for its consideration in arriving at a final budget for the following year then shall be considered for approval as a special order of business. ~~In the event the budget as submitted is not approved, all recommendations for changes shall be referred to the Board of Trustees to prepare and present a revised budget. This procedure shall be repeated until a budget for the ensuing fiscal year shall be adopted.~~

Dr. Leighty moved Resolution 52 (*Supplement:2075*) with a Committee Recommendation to Vote No.

The Speaker asked if there was any discussion regarding Resolution 52; there was none. The Speaker noted that adoption of Resolution 52 requires a two-thirds affirmative vote. On vote, Resolution 52 was not adopted.

The third priority agenda item was presented by Dr. Chad R. Leighty, Indiana, chair, Reference Committee A.

**Approval of 2018 Budget** (Board of Trustees Resolution 22): The Reference Committee reported as follows:

The Reference Committee heard no testimony regarding the 2018 budget. The Reference Committee concurs with the Board of Trustees and supports adoption of Resolution 22.

**22. Resolved,** that the 2018 Annual Budget of revenues and expenses, including net capital requirements be approved.

Dr. Leighty moved Resolution 22 (*Supplement:2060*) with the Committee Recommendation to Vote Yes.

As a point of information, Dr. H. Joe Burns, Mississippi, requested information from the Treasurer related to the funding of the OSCE exam included in the budget. He stated, "...I would like information from the Treasurer related to the funding of the OSCE exam in the budget and whether or not the House of Delegates was given the opportunity to debate, approve or disapprove what appears to me to be a new program."

In response, the Treasurer, stated, "I don't remember the House debating specifically the OSCE exam at any time."

The Speaker informed the House that it will be approving the preliminary budget at this time.

On vote, the preliminary budget was adopted. See page 303 for the adoption of the final budget (Resolution 22).

The fourth priority agenda item was presented by Dr. Chad R. Leighty, Indiana, chair, Reference Committee A.

**Special Assessment:** (Board of Trustees Resolution 32, Fourteenth Trustee District Resolution 32S-1, Sixteenth Trustee District Resolution 32S-2, and Reference Committee A Resolution 32RC): The Reference Committee reported as follows:

The Reference Committee heard moderate testimony both in support of and in opposition to Resolutions 32, 32S-1, and 32S-2.

In light of the current value of the ADA reserves, the Reference Committee feels it is appropriate to fund the initiative from reserves and re-evaluate funding for 2019 when increased data and metrics will be available. The Reference Committee also feels the initiative is an investment in the success of current and future ADA member dentists.

Therefore, the Reference Committee recommends the following resolution:

**32RC. Resolved,** that the Board of Trustees be urged to utilize funds from reserves for 2018 in order to fund the House Initiative Resolution 67H-2016, Utilization of Dental Services for ADA Members.

Dr. Leighty moved Resolution 32RC in lieu of Resolution 32 (*Supplement:2014*), Resolution 32S-1 (*Supplement:2014a*) and Resolution 32S-2 (*Supplement:2014b*) with the Committee Recommendation to Vote Yes.

The Speaker asked if there was any discussion regarding Resolution 32RC; there was none. On vote, Resolution 32RC was adopted in lieu of Resolution 32, Resolution 32S-1 and Resolution 32S-2.

**32H-2017. Resolved,** that the Board of Trustees be urged to utilize funds from reserves for 2018 in order to fund the House Initiative Resolution 67H-2016, Utilization of Dental Services for ADA Members.

The fifth priority agenda item was presented by Dr. Linda C. Niessen, Florida, chair, Reference Committee C.

**Proposed National Commission on Recognition of Dental Specialties and Certifying Boards:** (Board of Trustees Resolution 30 and Reference Committee C Resolution 30RC): The Reference Committee reported as follows:

The Reference Committee heard considerable testimony regarding Resolution 30. The majority of the testimony was in support of the resolution. Other testimony suggested referral, and there was limited testimony against the resolution.

Testimony in support stated that a new Commission would assist state boards in addressing challenges related to dental specialty issues. Others testified that maintaining the status quo and relying on the ADA House of Delegates to determine the recognition of dental specialties, organizations and certifying boards may place the Association at financial and reputational risk for perceived bias and conflict of interest.

Almost all of the recognized dental specialty organizations testified in support of Resolution 30. Members of the Council on Dental Education and Licensure were supportive of the Commission and that the process remain grounded in the existing *ADA Requirements for the Recognition of Dental Specialties and National Certifying Boards for Dental Specialists* as approved by the ADA House of Delegates.

Some members testified in support of the Resolution, but urged that it be referred to the appropriate agency for further study. Those recommending referral had concerns relative to the composition and qualifications of Commission members. There was also concern about the appeals process as outlined in the proposed rules for the Commission (Appendix 3). It was noted during the Reference Committee that the proposed rules were examples only. The Reference Committee understands that referral would not result in creating rules since the development of the rules would fall within the purview of the Commission. The Reference Committee is not supportive of referral.

Those in opposition to the proposed resolution testified that the current process for specialty recognition is appropriate and should not be altered as a result of perceived risks.

In addition to the changes noted in Resolution 30, and additional conforming changes needed should Resolution 7 be adopted the Reference Committee identified that the ADA *Bylaws* should be amended to clarify the language associated with new organizations seeking specialty status and appealing an adverse recognition decision as follows:

Chapter XV-Commissions, Section 130-Duties, D. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING BOARDS

\* \* \*

c. Provide a means for ~~specialty~~ sponsoring organizations and ~~specialty~~ certifying boards to appeal an adverse recognition decision.

Accordingly the Reference Committee is proposing to the House Resolution 30RC, which includes all of the changes contained in Resolution 30 as well as the additional changes noted above.

The Standing Committee on Constitution and Bylaws approved the wording of Resolution 30 as submitted, except that, because of the pendency of Resolution 7 to delete Chapters II through XX of the current *Bylaws* and adopt Chapters II through XVI of the proposed *Bylaws*, the Standing Committee proposed an additional resolving clause to make changes to the proposed *Bylaws* and the *Governance and Organizational Manual of the American Dental Association* conforming to the amendments proposed in this resolution should this resolution and Resolution 7 be adopted by the House of Delegates. The Speaker and the chair of the Council on Ethics, Bylaws and Judicial Affairs subsequently reviewed and approved the additional change proposed in Resolution 30RC as follows (deletions ~~double-stricken~~ and additions are double underscored):

**30RC. Resolved**, that ADA Bylaws be amended as shown below, establishing the ADA National Commission on Recognition of Dental Specialties and Certifying Boards.

PROPOSED AMENDMENT TO BYLAWS

Proposed additions are underlined and proposed deletions are ~~stricken~~

CHAPTER XV • COMMISSIONS

*Section 10.* NAME: The commissions of this Association shall be:

Commission on Dental Accreditation

Joint Commission on National Dental Examinations

Commission for Continuing Education Provider Recognition

National Commission on Recognition of Dental Specialties and Certifying Boards

*Section 20.* MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS:

A. COMMISSION ON DENTAL ACCREDITATION. The number of members and the method of selection of the members of the Commission on Dental Accreditation shall be governed by the *Rules of the Commission on Dental Accreditation* and these *Bylaws*. Twelve (12) of the members of the Commission on Dental Accreditation shall be selected as follows:

- (1) Four (4) members shall be selected from nominations open to all trustee districts from the active, life or retired members of this Association, no one of whom shall be a faculty member working for a school of dentistry more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency. These members shall be nominated by the Board of Trustees and elected by the House of Delegates.
- (2) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.



- (3) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be members of any state board of dental examiners or jurisdictional dental licensing agency.

**B. JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS.** The Joint Commission on National Dental Examinations shall be composed of fifteen (15) members selected as follows:

- a. Three (3) members shall be nominated by the Board of Trustees from the active, life or retired members of this Association and additional nominations may be made by the House of Delegates but no one of such nominees shall be a member of a faculty of a school of dentistry or a member of a state board of dental examiners or jurisdictional dental licensing agency. The House of Delegates shall elect the three (3) members from those nominated by the Board of Trustees and the House of Delegates.
- b. Six (6) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a dental school.
- c. Three (3) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in the dental schools accredited by this Association and shall not be members of any state board of dental examiners or jurisdictional dental licensing agency.
- d. One (1) member who is a dental hygienist shall be selected by the American Dental Hygienists' Association.
- e. One (1) member who is a public representative shall be selected by the Joint Commission on National Dental Examinations.
- f. One (1) member who is a dental student shall be selected annually by the American Student Dental Association.

**C. COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION.** The Commission for Continuing Education Provider Recognition shall be composed of members selected as follows:

- a. Four (4) members, at least two of whom shall be general dentists, shall be selected from nominations open to all trustee districts from the active, life or retired members of this Association. These members shall be nominated by the Board of Trustees and elected by the House of Delegates.
- b. One (1) member who is an active, life or retired member of this Association (if eligible) shall be selected by the American Association of Dental Boards from the active membership of that body.
- c. One (1) member who is an active, life or retired member of this Association (if eligible) shall be selected by the American Dental Education Association from its active membership.
- d. One (1) member who is an active, life or retired member of this Association (if eligible) shall be selected by the American Society of Constituent Dental Executives from its active membership.
- e. One (1) member who is an active, life or retired member of this Association shall be selected by each sponsoring organization of the ADA recognized dental specialties.\*

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\* The Commission for Continuing Education Provider Recognition initially shall be composed of the incumbent members of the CERP Committee of the Council on Dental Education and Licensure that was retired by the 2014 House of Delegates and any new appointees to the CERP Committee of the Council on Dental Education and Licensure selected by the American Association of Dental Boards, American Dental Education Association, American Society of Constituent Dental Executives and/or a sponsoring organization of any ADA recognized dental specialty. To the extent that there exists an unfilled position on the Commission for Continuing Education Provider Recognition for an ADA appointee when the Commission is created, that position shall be treated as a vacancy and filled in accordance with the procedure set forth in CHAPTER XV. COMMISSIONS, Section 70 of these ADA Bylaws. These inaugural Commission members shall serve for terms that are equal in time to their unfinished terms on the retired CERP Committee. This footnote shall expire at adjournment sine die of the 2018 House of Delegates.

D. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING BOARDS. The National Commission on Recognition of Dental Specialties and Certifying Boards shall be composed of members selected as follows:

- a. One (1) specialist from each dental specialty recognized by this Association or this Commission who is an active, life or retired member of this Association appointed by the sponsoring organization for that specialty.
- b. A number of general dentists equal to the number of members appointed pursuant to subsection D.a. of this Section who are active, life or retired members of this Association appointed by the Board of Trustees.
- c. A member of the general public appointed by the Commission.\*\*

*Section 30. REMOVAL FOR CAUSE:* The Board of Trustees may remove a commission member for cause in accordance with procedures established by the Board of Trustees, which procedures shall provide for notice of the charges, including allegations of the conduct purported to constitute each violation, and a decision in writing which shall specify the findings of fact which substantiate any and all of the charges, and that prior to issuance of the decision of the Board of Trustees, no commission member shall be excused from attending any meeting of a commission unless there is an opportunity to be heard or compelling reasons exist which are specified in writing by the Board of Trustees.

*Section 40. ELIGIBILITY:*

A. All members of commissions who are dentists must be active, life or retired members in good standing of this Association except as otherwise provided in these *Bylaws*.

B. A member of the Joint Commission on National Dental Examinations, who was selected by the American Association of Dental Boards and who is no longer an active member of that Association, may continue as a member of the Commission for the balance of that member's term.

C. When a member of the Joint Commission on National Dental Examinations, who was selected by the American Dental Education Association, shall cease to be a member of the faculty of a member school of that Association, such membership on the Commission shall terminate, and the President of the American Dental Association shall declare the position vacant.

D. Any organizations that select members to serve on the Commission for Continuing Education Provider Recognition and offer continuing dental education courses shall be continuing education providers currently approved by that Commission.

E. No member of a commission may serve concurrently as a member of a council or another commission.

F. The Commissions of this Association shall elect their own chairs who shall be active, life or retired members of this Association.

*Section 50. CONSULTANTS, ADVISERS AND STAFF:*

A. CONSULTANTS AND ADVISERS. Each commission shall have the authority to nominate consultants and advisers in conformity with rules and regulations established by the Board of Trustees except as otherwise provided in these *Bylaws*. The Joint Commission on National Dental Examinations also shall select consultants to serve on the Commission's test construction committees. The Commission on Dental Accreditation shall have the power to appoint consultants to assist in developing requirements and guidelines for the conducting of accreditation evaluations, including site visitations, of predoctoral, advanced dental educational, and dental auxiliary educational

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\*\* To achieve the desired staggering of member terms for continuity, the initial terms of the members of the National Commission on Recognition of Dental Specialties and Certifying Boards shall be as set forth in Appendix 2 that accompanied Resolution XXH-2017 that established this Commission. This footnote shall expire without further action at the adjournment sine die of the 2021 House of Delegates

programs. The Commission for Continuing Education Provider Recognition shall have the power to appoint consultants to assist in developing standards and procedures, conducting recognition reviews and conducting appeals. The National Commission on Recognition of Dental Specialties and Certifying Boards shall have the power to appoint consultants to assist in developing procedures, conducting recognition reviews and conducting appeals.

B. STAFF. The Executive Director shall employ the staff of Commissions, in the event they are employees, and shall select the titles for commission staff positions.

*Section 60. TERM OF OFFICE:* The term of office of members of the commissions shall be four (4) years except that (a) the term of office of members of the Commission on Dental Accreditation selected pursuant to the *Rules of the Commission on Dental Accreditation* shall be governed by those *Rules* and (b) the term of office of the dental student selected by the American Student Dental Association for membership on the Joint Commission on National Dental Examinations shall be one (1) year.

The tenure of a member of a commission shall be limited to one (1) term of four (4) years except that (a) the consecutive tenure of members of the Commission on Dental Accreditation selected pursuant to the *Rules of the Commission on Dental Accreditation* shall be governed by those *Rules* and (b) tenure in office of the dental student selected by the American Student Dental Association for membership on the Joint Commission on National Dental Examinations shall be one (1) term. A member shall not be eligible for appointment to another commission or council for a period of two (2) years after completing a previous commission appointment.

*Section 70. VACANCY:* In the event of a vacancy in the office of a commissioner, the following procedure shall be followed:

A. In the event the member of a commission, whose office is vacant, is or was a member of and was appointed or elected by this Association, the President of this Association shall appoint a member of this Association possessing the same qualifications as established by these *Bylaws* for the previous member, to fill such vacancy until a successor is elected by the next House of Delegates of this Association for the remainder of the unexpired term.

B. In the event the member of a commission whose office is vacant was selected by an organization other than this Association, such other organization shall appoint a successor possessing the same qualifications as those possessed by the previous member of the commission.

C. In the event such vacancy involves the chair of the commission, the President of this Association shall have the power to appoint an *ad interim* chair, except as otherwise provided in these *Bylaws*.

D. If the term of the vacated commission position has less than fifty percent (50%) of a full four-year term remaining at the time the successor member is appointed or elected, the successor member shall be eligible for election to a new, consecutive four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment or election, the successor member shall not be eligible for another term.

*Section 80. MEETINGS OF COMMISSIONS:* Each commission shall hold at least one regular meeting annually, provided that funds are available in the budget for that purpose and unless otherwise directed by the Board of Trustees. Meetings may be held at the Headquarters Building, the Washington Office or from multiple remote locations through the use of a conference telephone or other communications equipment by means of which all members can communicate with each other. Such meetings shall be conducted in accordance with rules and procedures established by the Board of Trustees.

*Section 90. QUORUM:* A majority of the members of any commission shall constitute a quorum.

*Section 100. PRIVILEGE OF THE FLOOR:* Chairs and members of the commissions who are not members of the House of Delegates shall have the right to participate in the debate on their respective reports but shall not have the right to vote.

*Section 110. ANNUAL REPORT AND BUDGET:*

A. ANNUAL REPORT. Each commission shall submit, through the Executive Director, an annual report to the House of Delegates and a copy thereof to the Board of Trustees.

B. PROPOSED BUDGET. Each commission shall submit to the Board of Trustees, through the Executive Director, a proposed itemized budget for the ensuing fiscal year.

*Section 120. POWER TO ADOPT RULES:* Any commission of this Association shall have the power to adopt rules for such commission and amendments thereto, provided such rules and amendments thereto do not conflict with or limit the Constitution and Bylaws of this Association. Rules and amendments thereto, adopted by the Commission on Dental Accreditation, Joint Commission on National Dental Examinations and Commission for Continuing Education Provider Recognition ~~any commission of this Association~~, shall not be effective until submitted in writing to and approved by majority vote of the House of Delegates of this Association, except the Joint Commission on National Dental Examinations shall have such bylaws and amendments thereto as the House of Delegates of this Association may adopt by majority vote for the conduct of the purposes and management of the Joint Commission on National Dental Examinations. The Commission on Dental Accreditation shall have the authority to make corrections in punctuation, grammar, spelling, name changes, gender references, and similar editorial corrections to the Rules of the Commission on Dental Accreditation which do not alter its context or meaning without the need to submit such editorial corrections to the House of Delegates. Such corrections shall be made only by a unanimous vote of the Commission on Dental Accreditation members present and voting. The National Commission on Recognition of Dental Specialties and Certifying Boards shall have the power to adopt rules and amendments thereto pursuant to a two-thirds affirmative vote of the members present and voting.

*Section 130. DUTIES:*

A. COMMISSION ON DENTAL ACCREDITATION. The duties of the Commission on Dental Accreditation shall be to:

- a. Formulate and adopt requirements and guidelines for the accreditation of dental, advanced dental and allied dental educational programs.
- b. Accredite dental, advanced dental and allied dental educational programs.
- c. Provide a means for appeal from an adverse decision of the accrediting body of the Commission to a separate and distinct body of the Commission whose membership shall be totally different from that of the accrediting body of the Commission.
- d. Submit an annual report to the House of Delegates of this Association and interim reports, on request, and the Commission's annual budget to the Board of Trustees of the Association.
- e. Submit the Commission's articles of incorporation and rules and amendments thereto to this Association's House of Delegates for approval by majority vote.

B. JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS. The duties of the Joint Commission on National Dental Examinations shall be to:

- a. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of assisting state boards of dental examiners in determining qualifications of dentists who seek license to practice in any state or other jurisdiction of the United States. Dental licensure is subject to the laws of the state or other jurisdiction of the United States and the conduct of all clinical examinations for licensure is reserved to the individual board of dental examiners.
- b. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of assisting state boards of dental examiners in determining qualifications of dental hygienists who seek license to practice in any state or other jurisdiction of the United States. Dental hygiene licensure is subject to the laws of the state or other jurisdiction of the United States and the

- conduct of all clinical examinations for licensure is reserved to the individual board of dental examiners.
- c. Make rules and regulations for the conduct of examinations and the certification of successful candidates.
- d. Serve as a resource of the dental profession in the development of written examinations.

C. COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION. The duties of the Commission for Continuing Education Provider Recognition shall be to:

- a. Formulate and adopt requirements, guidelines and procedures for the recognition of continuing dental education providers.
- b. Approve providers of continuing dental education programs and activities.
- c. Provide a means for continuing dental education providers to appeal adverse recognition decisions.
- d. Submit an annual report to the House of Delegates of this Association and interim reports, on request, and the Commission's annual budget to the Board of Trustees of the Association.
- e. Submit the Commission's rules and amendments thereto to this Association's House of Delegates for approval by majority vote either through or in cooperation with the Council on Dental Education and Licensure.

D. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING BOARDS. The duties of the Commission on Recognition of Dental Specialties and Certifying Boards shall be to:

- a. Formulate and adopt procedures for the recognition of specialties and specialty certifying boards in accord with the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties*.
- b. Grant or deny specialty recognition to specialty organizations and specialty certifying boards seeking recognition in accord with the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties*.
- c. Provide a means for ~~specialty~~ sponsoring organizations and ~~specialty~~ certifying boards to appeal an adverse recognition decision.
- d. Submit an annual report to the House of Delegates of this Association and interim reports on request.
- e. Submit the Commission's annual budget to the Board of Trustees of the Association.

and be it further

**Resolved**, if Resolution 7, *Amendment of the ADA Bylaws pursuant to 118H-2014* is adopted, that the following conforming changes to the ADA Bylaws amendments shown below be approved for placement into the newly revised ADA Bylaws and the new *Governance and Organizational Manual of the American Dental Association*.

### Amendments to Revised Bylaws

Additions are underlined and deletions are ~~stricken~~

### CHAPTER IX • COMMISSIONS

~~Section 10. NAME: The Association shall have the following commissions:~~ ESTABLISHMENT OF COMMISSIONS: The House of Delegates shall establish commissions as set forth below, each of which shall have the areas of responsibility, composition and operations that are set forth in these Bylaws and in the *Governance Manual*. The commissions of this association are:

Commission on Dental Accreditation

Joint Commission on National Dental Examinations

Commission for Continuing Education Provider Recognition

National Commission on Recognition of Dental Specialties and Certifying Boards

*Section 20. MEMBERSHIP AND OPERATION:* The composition and operation of the commissions shall be as set forth in the *Governance Manual*.

*Section 30. DUTIES:*

A. COMMISSION ON DENTAL ACCREDITATION. The duties of the Commission on Dental Accreditation shall be to:

- a. Formulate and adopt requirements and guidelines for the accreditation of dental, advanced dental and allied dental educational programs.
- b. Accredite dental, advanced dental and allied dental educational programs.
- c. Provide a means for appeal from an adverse decision of the accrediting body of the Commission to a separate and distinct body of the Commission whose membership shall be totally different from that of the accrediting body of the Commission.
- d. Submit an annual report to the House of Delegates of this Association and interim reports, on request, and the Commission's annual budget to the Board of Trustees of the Association.
- e. Submit the Commission's articles of incorporation and rules and amendments thereto to this Association's House of Delegates for approval by majority vote.

B. JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS. The duties of the Joint Commission on National Dental Examinations shall be to:

- a. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of assisting state boards of dental examiners in determining qualifications of dentists who seek license to practice in any state or other jurisdiction of the United States. Dental licensure is subject to the laws of the state or other jurisdiction of the United States and the conduct of all clinical examinations for licensure is reserved to the individual board of dental examiners.
- b. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of assisting state boards of dental examiners in determining qualifications of dental hygienists who seek license to practice in any state or other jurisdiction of the United States. Dental hygiene licensure is subject to the laws of the state or other jurisdiction of the United States and the conduct of all clinical examinations for licensure is reserved to the individual board of dental examiners.
- c. Make rules and regulations for the conduct of examinations and the certification of successful candidates.
- d. Serve as a resource of the dental profession in the development of written examinations.

C. COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION. The duties of the Commission for Continuing Education Provider Recognition shall be to:

- a. Formulate and adopt requirements, guidelines and procedures for the recognition of continuing dental education providers.
- b. Approve providers of continuing dental education programs and activities.
- c. Provide a means for continuing dental education providers to appeal adverse recognition decisions.
- d. Submit an annual report to the House of Delegates of this Association and interim reports, on request, and the Commission's annual budget to the Board of Trustees of the Association.

- e. Submit the Commission's rules and amendments thereto to this Association's House of Delegates for approval by majority vote either through or in cooperation with the Council on Dental Education and Licensure.

**D. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING BOARDS.** The duties of the Commission on Recognition of Dental Specialties and Certifying Boards shall be to:

- a. Formulate and adopt procedures for the recognition of specialties and specialty certifying boards in accord with the Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties.
- b. Grant or deny specialty recognition to specialty organizations and specialty certifying boards seeking recognition in accord with the Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties.
- c. Provide a means for ~~specialty~~ sponsoring organizations and ~~specialty~~ certifying boards to appeal an adverse recognition decision.
- d. Submit an annual report to the House of Delegates of this Association and interim reports on request.
- e. Submit the Commission's annual budget to the Board of Trustees of the Association.

#### **Amendments to the**

#### **Governance and Organizational Manual of the American Dental Association**

Additions are underlined and deletions are ~~stricken~~

### **CHAPTER IX. COMMISSIONS**

#### **A. Members, Selections, Nominations and Elections.**

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**4. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING BOARDS.** The National Commission on Recognition of Dental Specialties and Certifying Boards shall be composed of members selected as follows:

- a. One (1) specialist from each dental specialty recognized by this Association or this Commission who is an active, life or retired member of this Association appointed by the sponsoring organization for that specialty.
  - b. A number of general dentists equal to the number of members appointed pursuant to subsection 4.a. of this Section who are active, life or retired members of this Association appointed by the Board of Trustees.
  - c. A member of the general public appointed by the Commission.\*\*
- 5. Amendment.** The entirety of this Section A of IX is amendable by a two-thirds (2/3) affirmative vote of delegates present and voting provided that the proposed amendment(s) shall have been presented in writing at a previous session or a previous meeting of the same session of the House of Delegates.

\*\*\*\*

**L. Power to Adopt Rules:** Any commission of this Association shall have the power to adopt rules for such commission and amendments thereto, provided such rules and amendments thereto do not conflict with or limit the *Constitution and Bylaws* of this Association. Rules and amendments thereto, adopted by the Commission on Dental Accreditation, Joint Commission on National Dental

Examinations and Commission for Continuing Education Provider Recognition ~~any commission of this Association~~, shall not be effective until submitted in writing to and approved by majority vote of the House of Delegates of this Association, except the Joint Commission on National Dental Examinations shall have such bylaws and amendments thereto as the House of Delegates of this Association may adopt by majority vote for the conduct of the purposes and management of the Joint Commission on National Dental Examinations. The National Commission on Recognition of Dental Specialties and Certifying Boards shall have the power to adopt rules and amendments thereto pursuant to a two-thirds affirmative vote of the members present and voting. The Commissions on Dental Accreditation and the Commission for Continuing Education Provider Recognition shall have the authority to make corrections in punctuation, grammar, spelling, name changes, gender references, and similar editorial corrections to their Rules which do not alter context or meaning without the need to submit such editorial corrections to the House of Delegates. Such corrections shall be made only by a unanimous vote of the commission adopting such editorial correction.

Dr. Niessen stated, "I wanted to call your attention to the fact that there is a revised worksheet for Resolution 30RC. During the review of the reference committee's report, some of the conforming changes for Resolution 7 did not get printed on the report. The language that was inadvertently omitted starts on worksheet page 4067 and includes lines 13 through 30. Delegates will be given time to review this revised report. The content of lines 23 to 26, which speak to the ability of this new Commission to adopt rules, have not changed."

Dr. Niessen moved Resolution 30RC in lieu of Resolution 30 (*Supplement:4027*) with the Committee Recommendation to Vote Yes.

As a point of information, Dr. James M. Boyle, Pennsylvania, noted that 2012 was the last time the House of Delegates considered a request for approval of a specialty and at that time the House did not approve the request. He asked, "...was there any inquiry from the Federal Trade Commission [FTC] at any time following the action of the House of Delegates in 2012?"

In response, Mr. Craig Busey, general counsel, stated, "The specific answer to the question is no. We have been advised that legal representatives of the specialty group did consult with the FTC, but the FTC has not taken action on that request."

As a point of information, Dr. Thomas A. Trowbridge, Massachusetts, asked that the general counsel explain specifically how passing the revised Resolution 30RC will protect the state dental boards from pending or potential lawsuits on specialty practice.

In response, Mr. Busey stated, "...There is still going to be the question of whether specialty is not recognized by the ADA or by this Commission would need to be approved or need to be approved for advertising within the states." He also said, "...It's not an absolute panacea to the problem, but we do anticipate that it would provide a more equitable avenue that could be relied upon by the boards."

Dr. Faisal A. Quereshy, Ohio, moved to refer Resolution 30RC back to the appropriate committee. In speaking to the motion to refer, Dr. Quereshy said, "I feel that as the resolution currently stands, it removes the authority of this House of Delegates before fully understanding the details of the proposed Commission. Furthermore, I feel that the new Commission will not impact the dental advertising challenges being faced at the state level, which are not related to specialty recognition issues... Finally, the revised resolution changes that were submitted last night further exemplify further work that needs to be done on this resolution."

In response to Dr. Quereshy, the Speaker noted that no new content was added to the resolution, but was inadvertently left off during printing of the reference committee report. The Speaker requested that Dr. Quereshy clarify the motion to refer including what additional information is being sought and when the information should be reported back to the House.

Dr. Quereshy responded, "We want further delineation of what the Commission is going to do with regards to new specialties coming forth."



The Speaker ruled the motion to refer out of order.

Dr. Steven A. Brown, Rhode Island, moved to refer Resolution 30RC to the appropriate ADA committee for report back to the 2018 House of Delegates. In speaking to the motion to refer, Dr. Brown stated, "Specifically, this House needs to understand the rules that are going to be adopted by this Commission before we abdicate our responsibility to get rid of this function of the House, because we have a fiduciary responsibility to make sure that we do the best for what our members expect of us."

The Speaker stated that the rules of the Commission will not be the purview of the House, but that the House may want to see the rules before voting.

Dr. Brown stated, "In the reference committee, many of us were there. The ability to provide testimony specifically to Appendix 3 of this resolution, which was clearly a part of this resolution and was clearly labelled as rules or proposed rules ..."

In response, the Speaker stated, "If you read the resolution correctly, all you're doing is authorizing the formation of that. They will have their own ability to adopt rules. This House will not be adopting their rules, will have no control over their rules."

As a point of information, Dr. James D. Stephens, California, asked, "Could we get someone from the legal staff to explain how a committee or agency of the ADA would be able to make a report on the rules of a Commission that won't be formed unless we form it? ..."

In response, Mr. Busey said, "They couldn't."

Dr. Thomas A. Trowbridge, Massachusetts, spoke in favor of referral stating, "... the House of Delegates does, in fact, control the rules of this Commission. ..."

In response, the Speaker clarified that the resolution states that the Commission has the power to adopt rules. The Speaker stated, "... what it says is, the National Commission on Recognition of Dental Specialties and Certifying Boards shall have the power to adopt rules and amendments thereto pursuant to a two-thirds affirmative vote of the members present and voting. That's the voting members of that Commission."

As a point of information Dr. Gregory E. Phillips, Indiana, asked if the motion to refer was in order. He stated, "... the reason the second gentleman wanted to refer this was so that we could see the rules. But we just learned that we can't have rules without a Commission. So is that actually in order?"

In response, the Speaker ruled the motion to refer out of order. He stated, "... We're not going to see the rules. So on a point of order, the point is well taken. Since you will not be able to see the rules, then the reason for referring is moot. So we'll go back to debate on the main motion."

Pro and con discussion ensued. Individuals speaking in support of Resolution 30RC commented that the ADA risks becoming irrelevant if it does not amend its process for specialty recognition. The individuals noted that legislation addressing specialty recognition may be adopted by their state legislatures if the ADA does not act.

Dr. Daniel J. Gesek, Florida, spoke against Resolution 30RC stating, "... it's really important that the House understand the difference between dental advertising for specialists, which is a Board of Dentistry issue, and specialty recognition, which we're dealing with here. They're separate entities, and the lawsuits will not stop when it comes to dental specialty advertising..."

Dr. Jill M. Price, Oregon, chair of the Council on Dental Education and Licensure, spoke in favor of Resolution 30RC. She stated, "... We are still going to have a voice on this issue in the House of Delegates. I think this is a really important point, because although everybody thinks that maybe it's our chance to lose

control, and I think that what we need to understand is, we need to lose a little bit of control. ... This is a chance to mitigate bias, and it's our best defense on risk management for the ADA. ..."

A motion was made to vote immediately, which requires a two-thirds vote; on vote, the motion to vote immediately was adopted.

The Speaker noted that adoption of Resolution 30RC requires a two-thirds affirmative vote.

On vote, Resolution 30RC was adopted in lieu of Resolution 30.

**\*30H-2017. Resolved**, that the following conforming changes to the ADA *Bylaws* amendments shown below be approved for placement into the newly revised ADA *Bylaws* and the new *Governance and Organizational Manual of the American Dental Association*.

### Amendments to Revised Bylaws

Additions are underlined and deletions are ~~stricken~~

#### CHAPTER IX • COMMISSIONS

~~Section 10. NAME: The Association shall have the following commissions:~~ ESTABLISHMENT OF COMMISSIONS: The House of Delegates shall establish commissions as set forth below, each of which shall have the areas of responsibility, composition and operations that are set forth in these Bylaws and in the Governance Manual. The commissions of this association are:

Commission on Dental Accreditation

Joint Commission on National Dental Examinations

Commission for Continuing Education Provider Recognition

National Commission on Recognition of Dental Specialties and Certifying Boards

*Section 20. MEMBERSHIP AND OPERATION:* The composition and operation of the commissions shall be as set forth in the *Governance Manual*.

*Section 30. DUTIES:*

A. COMMISSION ON DENTAL ACCREDITATION. The duties of the Commission on Dental Accreditation shall be to:

- a. Formulate and adopt requirements and guidelines for the accreditation of dental, advanced dental and allied dental educational programs.
- b. Accredite dental, advanced dental and allied dental educational programs.
- c. Provide a means for appeal from an adverse decision of the accrediting body of the Commission to a separate and distinct body of the Commission whose membership shall be totally different from that of the accrediting body of the Commission.
- d. Submit an annual report to the House of Delegates of this Association and interim reports, on request, and the Commission's annual budget to the Board of Trustees of the Association.
- e. Submit the Commission's articles of incorporation and rules and amendments thereto to this Association's House of Delegates for approval by majority vote.

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\* With the adoption of Resolution 7H-2017, proposed amendments to the existing Bylaws became moot and only the wording to amend the revised *Bylaws*, *Governance Manual*, and *Manual of the House of Delegates* were considered and acted on by the House of Delegates.

**B. JOINT COMMISSION ON NATIONAL DENTAL EXAMINATIONS.** The duties of the Joint Commission on National Dental Examinations shall be to:

- a. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of assisting state boards of dental examiners in determining qualifications of dentists who seek license to practice in any state or other jurisdiction of the United States. Dental licensure is subject to the laws of the state or other jurisdiction of the United States and the conduct of all clinical examinations for licensure is reserved to the individual board of dental examiners.
- b. Provide and conduct written examinations, exclusive of clinical demonstrations for the purpose of assisting state boards of dental examiners in determining qualifications of dental hygienists who seek license to practice in any state or other jurisdiction of the United States. Dental hygiene licensure is subject to the laws of the state or other jurisdiction of the United States and the conduct of all clinical examinations for licensure is reserved to the individual board of dental examiners.
- c. Make rules and regulations for the conduct of examinations and the certification of successful candidates.
- d. Serve as a resource of the dental profession in the development of written examinations.

**C. COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION.** The duties of the Commission for Continuing Education Provider Recognition shall be to:

- a. Formulate and adopt requirements, guidelines and procedures for the recognition of continuing dental education providers.
- b. Approve providers of continuing dental education programs and activities.
- c. Provide a means for continuing dental education providers to appeal adverse recognition decisions.
- d. Submit an annual report to the House of Delegates of this Association and interim reports, on request, and the Commission's annual budget to the Board of Trustees of the Association.
- e. Submit the Commission's rules and amendments thereto to this Association's House of Delegates for approval by majority vote either through or in cooperation with the Council on Dental Education and Licensure.

**D. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING BOARDS.** The duties of the Commission on Recognition of Dental Specialties and Certifying Boards shall be to:

- a. Formulate and adopt procedures for the recognition of specialties and specialty certifying boards in accord with the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties*.
- b. Grant or deny specialty recognition to specialty organizations and specialty certifying boards seeking recognition in accord with the *Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialties*.
- c. Provide a means for ~~specialty~~ sponsoring organizations and ~~specialty~~ certifying boards to appeal an adverse recognition decision.
- d. Submit an annual report to the House of Delegates of this Association and interim reports on request.
- e. Submit the Commission's annual budget to the Board of Trustees of the Association.

## Amendments to the Governance and Organizational Manual of the American Dental Association

Additions are underlined and deletions are ~~stricken~~

### CHAPTER IX. COMMISSIONS

#### A. Members, Selections, Nominations and Elections.

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#### 4. NATIONAL COMMISSION ON RECOGNITION OF DENTAL SPECIALTIES AND CERTIFYING BOARDS. The National Commission on Recognition of Dental Specialties and Certifying Boards shall be composed of members selected as follows:

a. One (1) specialist from each dental specialty recognized by this Association or this Commission who is an active, life or retired member of this Association appointed by the sponsoring organization for that specialty.

b. A number of general dentists equal to the number of members appointed pursuant to subsection 4.a. of this Section who are active, life or retired members of this Association appointed by the Board of Trustees.

c. A member of the general public appointed by the Commission.\*\*

5. Amendment. The entirety of this Section A of IX is amendable by a two-thirds (2/3) affirmative vote of delegates present and voting provided that the proposed amendment(s) shall have been presented in writing at a previous session or a previous meeting of the same session of the House of Delegates.

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L. Power to Adopt Rules: Any commission of this Association shall have the power to adopt rules for such commission and amendments thereto, provided such rules and amendments thereto do not conflict with or limit the *Constitution and Bylaws* of this Association. Rules and amendments thereto, adopted by the Commission on Dental Accreditation, Joint Commission on National Dental Examinations and Commission for Continuing Education Provider Recognition ~~any commission of this Association~~, shall not be effective until submitted in writing to and approved by majority vote of the House of Delegates of this Association, except the Joint Commission on National Dental Examinations shall have such bylaws and amendments thereto as the House of Delegates of this Association may adopt by majority vote for the conduct of the purposes and management of the Joint Commission on National Dental Examinations. The National Commission on Recognition of Dental Specialties and Certifying Boards shall have the power to adopt rules and amendments thereto pursuant to a two-thirds affirmative vote of the members present and voting. The Commissions on Dental Accreditation and the Commission for Continuing Education Provider Recognition shall have the authority to make corrections in punctuation, grammar, spelling, name changes, gender references, and similar editorial corrections to their Rules which do not alter context or meaning without the need to submit such editorial corrections to the House of Delegates. Such corrections shall be made only by a unanimous vote of the commission adopting such editorial correction.

### Report of Reference Committee A (Budget, Business, Membership and Administrative Matters)

The Report of Reference Committee A was presented by Dr. Chad R. Leighty, Indiana, chair. The other members of the Committee were: Dr. Alice G. Boghosian, Illinois; Dr. Robert H. Carpenter, Georgia; Dr. Todd R. Christy, Michigan; Dr. Matthew E. Cohlma, Oklahoma; Dr. Patrick M. Grogan, Washington, D.C.; Dr. Gregory E. Jones, Oregon; Dr. Elizabeth C. Reynolds, Virginia; and Dr. Samuel E. Selcher, Pennsylvania.

**Consent Calendar** (Reference Committee A Resolution 63): The Reference Committee reported as follows:

The appended Resolution 63 lists resolutions referred and considered by this Reference Committee that received no or limited testimony, all positive testimony, all negative testimony, or the Reference Committee feels these resolutions were fully debated, with all issues considered. The Reference Committee's recommended action (adopt, adopt in lieu of, not adopt or refer) is identified on each resolution presented on the consent calendar. By adopting Resolution 63, the recommendations of the Reference Committee on the consent calendar resolutions will become the actions of the House of Delegates. It should be noted that if a resolution on the consent calendar is to "adopt in lieu of" with a Committee Recommendation to Vote No and the resolution remains on the approved consent calendar, the resolution is defeated and the underlying resolutions are automatically moot.

As customary, before voting on the consent calendar, any delegate wishing to discuss an item on the consent calendar has the right to request that resolution be removed and considered separately.

**63. Resolved**, that the recommendations of Reference Committee A on the following resolutions be accepted by the House of Delegates.

**Resolution 18**—(Adopt)—Revision of the Policy, Funding of Visits by ADA Officers  
(*Supplement:2002*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 19**—(Adopt)—Amendment of the Policy, Transparency (*Supplement:2004*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 28**—(Adopt)—Implementation of a Uniform Dues Transaction (*Supplement:2006*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 29**—(Adopt)—Program Assessment Criteria (*Supplement:2008*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 31**—(Adopt)—Amendment of ADA *Bylaws* with Respect to the Executive Director  
(*Supplement:2012*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

Hearing no objection, Resolution 63 was adopted by general consent.

**63H-2017. Resolved**, that the recommendations of Reference Committee A on the following resolutions be accepted by the House of Delegates.

**Resolution 18**—(Adopt)—Revision of the Policy, Funding of Visits by ADA Officers  
(*Supplement:2002*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 19**—(Adopt)—Amendment of the Policy, Transparency (*Supplement:2004*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 28**—(Adopt) —Implementation of a Uniform Dues Transaction (*Supplement:2006*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 29**—(Adopt)—Program Assessment Criteria (*Supplement:2008*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 31**—(Adopt)—Amendment of ADA Bylaws with Respect to the Executive Director  
(Supplement:2012) \$: None; FTE: 0  
**COMMITTEE RECOMMENDATION: Vote Yes.**

*Note: For the purpose of a fully documented record, the text of the resolutions presented in Resolution 63H follows.*

### **Consent Calendar Resolutions—Adopted**

#### *Revision of the Policy, Funding of Visits by ADA Officers*

**18H-2017. Resolved**, that any host dental organization inviting ADA officers to an event be asked when feasible to fund the costs of such attendance, and be it further

**Resolved**, that Payment of President's and/or President-elect's Expenses by Host Organizations (*Trans.*1989:519) and Funding of Visits to Constituent and Component Societies by ADA Officers (*Trans.*1988:456) be rescinded.

#### *Amendment of the Policy, Transparency*

**19H-2017. Resolved**, that the ADA policy, Transparency (*Trans.*2009:404) be amended (additions are underscored; deletions are ~~stricken~~):

**Resolved**, that action items and approved minutes of all open meetings of ADA councils, committees and of the Board of Trustees be promptly posted in the Members Only section on ADA.org, and be it further

**Resolved**, that the ADA, as the sole shareholder of ADABEI, shall direct ADABEI and any other subsidiaries to post on ADA Connect or its equivalent for the House of Delegates, ~~the Members Only section of ADA.org~~ all approved minutes of Board meetings, and be it further

**Resolved**, that security in the Members Only section on ADA.org be enhanced as may be necessary so as to ensure that members will have exclusive access to the information contained in this website area.

#### *Implementation of a Uniform Dues Transaction*

**28H-2017. Resolved**, that to simplify the member experience, all constituent societies are urged to use a uniform dues transaction which allows acceptance of dues payments in installments, permits payment of dues with a credit or debit card, and permits auto-renewal of dues, with an opt-out option.

#### *Program Assessment Criteria*

**29H-2017. Resolved**, that all councils receive annual training on their fiduciary responsibilities to the Association, and be it further

**Resolved**, that each agency of the Association apply the strategic plan and the effectiveness of each program to meet the goals of the program in order to evaluate Association programs under its control or oversight, and be it further

**Resolved**, that each council, or, where appropriate, the Board, shall review all resolutions having cost implications for the Association associated with that council or the Board, provided the resolution has been submitted prior to the first posting of resolutions to delegates, and shall provide a written report to the House that includes the council's (or Board's) recommendation with respect to the final disposition of the resolution and assessment in light of the strategic plan, and be it further

**Resolved**, that Resolution 44H-2011 (*Trans.*2011:444) be rescinded.

#### *Amendment of ADA Bylaws with Respect to the Executive Director*

**\*31H-2017. Resolved**, that the following conforming changes to the ADA *Bylaws* amendments shown in this resolution be approved for placement into the newly revised ADA *Bylaws* (deletions ~~stricken~~):

## CHAPTER VII • APPOINTIVE OFFICER

\* \* \*

Section 40. DUTIES: The Executive Director shall be the principal agent of the Board of Trustees and the elective officers and, under their direction, ~~shall be the chief operating officer of this Association.~~ ~~In this capacity,~~ the Executive Director shall:

- A. Preserve and protect the Constitution and Bylaws and the standing rules of this Association;
- B. Facilitate the activities of the officers and trustees of this Association in carrying out their respective administrative responsibilities under these Bylaws;
- C. Engage the staff of this Association and direct and coordinate their activities;
- D. Provide leadership in the formulation and recommendation of new policies to the Board of Trustees and elective officers;
- E. Oversee the management of Association policies that have been adopted by the Board of Trustees and/or the House of Delegates;
- F. Direct the publication of the official transactions of the House of Delegates and reports of officers, councils and committees;
- G. Assist the Board of Trustees in monitoring and providing guidance to all Association councils, commissions and committees;
- H. Maintain effective internal and external relationships with all officers and trustees of this Association, the leadership of related dental organizations, and representatives from other leading public and private organizations that interact with this Association; and
- I. Perform such other duties as are prescribed by these *Bylaws* and/or the *Governance Manual*.

## Non-Consent Resolutions

**ADA Sponsored Members Association Health Plan** (Illinois State Dental Society Resolution 2) The Reference Committee reported as follows:

The Reference Committee heard limited testimony both in support of and in opposition to Resolution 2.

The Reference Committee notes that the Council on Members Insurance and Retirement Programs has *Bylaws* responsibility for monitoring the insurance marketplace conditions and emerging trends, and takes appropriate action as needed. The Reference Committee also believes that although an Executive Order was signed last week, it would be premature to speculate on what the future holds in terms of coverage availability or affordability until legislation is adopted.

**2. Resolved**, that the American Dental Association investigate the financial and legal possibilities of offering a national association health plan for its members and report to the 2018 ADA House of Delegates.

Dr. Leighty moved Resolution 2 (*Supplement:2000*) with the Committee Recommendation to Vote No.

Dr. Frederick P. Babinowich, New Jersey, spoke in support of Resolution 2. He stated, "I am a sole practitioner who has been in practice for 35 years. Since my practice is small, I have had to go on the individual market to get health insurance. ... I feel it's incumbent on this House to pass this resolution to investigate, and I repeat, investigate the financial and legal possibilities of offering a national association health plan for its members. We hear a lot about a decrease in membership numbers and dues. Think of it, if

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\* With the adoption of Resolution 7H-2017, proposed amendments to the existing Bylaws became moot and only the wording to amend the revised *Bylaws*, *Governance Manual*, and *Manual of the House of Delegates* were considered and acted on by the House of Delegates.

we can establish such a plan, it would help with retention of members, recruitment of new members. In addition staff members of small offices could now be offered health insurance, which will help these offices compete against larger clinics. ...”

Dr. Samuel E. Selcher, Pennsylvania, spoke against Resolution 2, stating, “There’s no question this is something we would all love to have, an association plan. I was on the reference committee, heard the testimony of staff, one, they’re monitoring, literally as in daily, what’s happening. ... There’s only four companies right now that offer national plans. ... The ADA isn’t an insurance agency. You’d have to have a plan that makes it possible. The ADA is monitoring this very closely, but right now it would have to go through regulatory processes. We aren’t even close. I would encourage you to vote no on this. The ADA will continue to monitor, and we all know it will be great to have lower health insurance plans. Right now it’s not a possibility. They’re watching out for us. Trust our Council. ...”

Dr. Michael R. Varley, Colorado, spoke in support of Resolution 2, stating “...Regarding this issue here, I submit to you that given the numbers of dentists that we have in the American Dental Association, I believe the number is 160,000 nationally, I believe that provides a pretty good opportunity for leverage to really negotiate a very quality—a nice quality plan ... for members of the American Dental Association.”

As a point of information, Dr. Philip L. Schefke, Illinois, asked, “I was informed that there was a report available. May I know when the last report was published or available?”

In response to Dr. Schefke’s question, the Speaker stated, “The last one was 2002.”

A motion was made to vote immediately, which requires a two-thirds vote; on vote, the motion to vote immediately was adopted.

On vote, Resolution 2 was adopted.

**2H-2017. Resolved**, that the American Dental Association investigate the financial and legal possibilities of offering a national association health plan for its members and report to the 2018 ADA House of Delegates.

**Establishment of Dues Effective January 1, 2018** (Board of Trustees Resolution 23): Resolution 23 was considered at the last meeting of the House (see page 303).

**Proposed Council Restructure** (Council on Members Insurance and Retirement Programs Resolution 49): The Reference Committee reported as follows:

The Reference Committee heard limited testimony regarding Resolution 49, with the preponderance of the testimony in favor of the Resolution as written.

The Reference Committee agreed with the Council that given its oversight responsibilities, a smaller skills based council serves the *Bylaws* duties of the Council better than district representation. The Reference Committee supports adoption of Resolution 49.

The Standing Committee on Constitution and Bylaws approves the wording of Resolution 49 as submitted.

**49. Resolved**, that the ADA *Bylaws*, CHAPTER X. COUNCILS, *Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS*, Subsection A, unnumbered paragraph on the Council on Members Insurance and Retirement Programs, be amended as follows (additions underscored; deletions ~~stricken~~):

Council on Members Insurance and Retirement Programs shall be composed of ~~seventeen (17)~~ nine (9) members, ~~one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms~~ nominated by the Board of Trustees from any



trustee district and whose terms of office shall be staggered in such a manner that three (3) members will complete their terms each year.\*

\* In order to establish the Council's revised composition, the Council members in office at the time this footnote becomes effective shall finish their terms in accordance with their scheduled completion dates. For each of the service term years of 2018-2019 through 2020-2021, 3 new members shall be selected for nomination by the Board of Trustees for three-year service terms in order to achieve the new 3-year rotational pattern. This footnote shall expire at adjournment *sine die* of the 2021 House of Delegates.

and be it further

**Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 60. TERM OF OFFICE*, be amended as follows (additions underscored):

*Section 60. TERM OF OFFICE:* The term of office of members of councils shall be four (4) years except as otherwise provided in these *Bylaws*. The tenure of a member of a council shall be limited to one (1) term of four (4) years except as otherwise provided in these *Bylaws*. The term of office of members of the Council on Members Insurance and Retirement Programs shall be three years, with a tenure of up to two (2) terms. A member shall not be eligible for appointment to another council or commission for a period of two (2) years after completing a previous council appointment. The current recipient of the Gold Medal Award for Excellence in Dental Research shall serve on the Council on Scientific Affairs until the award is bestowed on the next honoree.

and be it further

**Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 70. VACANCY*, second paragraph, be amended as follows (deletions ~~stricken~~):

If the term of the vacated council position has less than fifty percent (50%) of a full ~~four-year~~ term remaining at the time the successor member is appointed or elected, the successor member shall be eligible for election to a new, consecutive ~~four-year~~ term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment or election, the successor member shall not be eligible for another term.

and be it further

**Resolved**, if Resolution 7, Amendment of the ADA *Bylaws* pursuant to 118H-2014 is adopted, that the following conforming changes to the foregoing ADA *Bylaws* amendments be approved for placement into the newly proposed CHAPTER VIII. COUNCILS, Sections A.1., E. and F (second paragraph) of the *Governance and Organizational Manual of the American Dental Association* (Insertions double underlined, deletions ~~double struck~~):

## CHAPTER VIII. COUNCILS

### A. Members, Selections, Nominations and Elections.

#### 1. Composition. The composition of the councils of this Association shall be as follows:

##### a. Council on Dental Education and Licensure. The Council on Dental Education and Licensure shall be composed of sixteen (16) members selected as follows:

##### i. Nominations.

- (a) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.\*

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\* A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

- (b) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.
- (c) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.
- ii. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish such additional committees believed to be essential to carrying out its duties.
- b. Council on Members Insurance Retirement Program. The Council on Members Insurance Retirement Programs shall be composed of nine (9) active, life or retired members who are selected from nominations open to all trustee districts whose terms of office shall be staggered in such a manner that three (3) members will complete their terms each year.\*\*
- c. Council on Scientific Affairs. The Council on Scientific Affairs shall be composed of sixteen (16) members who shall be selected from nominations open to all trustee districts, and the current recipient of the Gold Medal Award for Excellence in Dental Research.
- d. Remaining Councils. The remaining councils of this Association shall each be composed of seventeen (17) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms.

\* \* \* \* \*

E. Term of Office. Except for members of the Council on Members Insurance and Retirement Programs whose term of office shall be three (3) years, the ~~The~~ term of office of members of councils shall be four (4) years except as otherwise provided in the *Bylaws* or this *Governance Manual*. Except for members of the Council on Members Insurance and Retirement Programs whose tenure on the council shall be limited to two terms of three (3) years, the ~~The~~ tenure of a member of a council shall be limited to one (1) term of four (4) years except as otherwise provided in the *Bylaws* or this *Governance Manual*. The current recipient of the Gold Medal Award for Excellence in Dental Research shall serve on the Council on Scientific Affairs until the award is bestowed on the next honoree.

\* \* \* \* \*

If the term of the vacated council position has less than fifty percent (50%) of a full ~~four year~~ term remaining at the time the successor member is appointed or elected, the successor member shall be eligible for election to a new ~~four year~~ term. If fifty percent (50%) or more of the vacated term remains

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\*\* In order to establish the Council's revised composition, the Council members in office at the time this footnote becomes effective shall finish their terms in accordance with their scheduled completion dates. For each of the service term years of 2018-2019 through 2020-2021, 3 new members shall be selected for nomination by the Board of Trustees for three-year service terms in order to achieve the new 3-year rotational pattern. This footnote shall expire at adjournment sine die of the 2021 House of Delegates.

to be served at the time of the appointment or election, the successor member shall not be eligible for another term.

Dr. Leighty moved Resolution 49 (*Supplement:2065*) with the Committee Recommendation to Vote Yes.

Dr. Paul R. Miller, Florida, moved to amend the fourth resolving clause under CHAPTER VIII. COUNCILS Section A.1.b., so that the section would read as follows:

- b. Council on Members Insurance Retirement Program. The Council on Members Insurance Retirement Programs shall be composed of seventeen (17) members, one (1) skills based member from each trustee district. ~~nine (9) active, life or retired members who are selected from nominations open to all trustee districts whose terms of office shall be staggered in such a manner that three (3) members will complete their terms each year.\*\*~~

As a point of information, Dr. Emily A. Mattingly, Missouri, asked, "How does this affect the New Dentist Committee position on the Council? ... Does the part about having only one person from each district on the Council have any effect, because we could potentially have a New Dentist member from one of the other Districts."

In response, the Speaker stated, "Yes. That would be—that would put it in conflict. ... you're limiting it to one member from each trustee district, but we have a New Dentist Committee member, which will be on there, which puts it in conflict with another part of the Bylaws. So that part can't be in order at this time until we can find a way to reconcile that."

Dr. Miller responded, "Well, it wasn't out of order before, so I can't understand why it is now. It must be addressed in another part of the Bylaws."

In response, the Speaker stated, "Well, we have a New Dentist Committee member of every council, and I don't believe we limit in any other part of the Bylaws such that there could not be two members from a district. So that's why this is in conflict. ... It's in conflict with another part of the Bylaws. We have Bylaws that say that a New Dentist Committee member will be a nonvoting member of all councils. If you have 17 members from trustee districts, then if my math is right, there will be two members from some district."

In response, Dr. Miller agreed to add the words, "with the exception of the New Dentist Committee member," so that the proposed amendment would read:

Council on Members Insurance Retirement Program. The Council on Members Insurance Retirement Programs shall be composed of seventeen (17) members, one (1) skills based member from each trustee district with the exception of the New Dentist Committee member. ~~nine (9) active, life or retired members who are selected from nominations open to all trustee districts whose terms of office shall be staggered in such a manner that three (3) members will complete their terms each year.\*\*~~

Dr. Samuel E. Selcher, Pennsylvania, spoke against the amendment. He stated, "If you look at the current sources for running organizations, whenever possible, they recommend going to the best, the brightest. ... We want expertise. We want that organization of our insurance run as best as possible. It's not necessarily a political entity. ... So I put forth to you the best and brightest will work better, which is current association best policy not keeping our political district as we currently are doing with this amendment."

Dr. Mark J. Weinberger, New York, spoke in support of the amendment. He stated, "This Council has been effective immensely with its 17 members. ... Over the years, and I was a previous member of this Council, we were very good at getting programs for membership ... The insurance programs were always something that were of value to the members, and they value the Great West Life Insurance program. They value the retirement plans. ... So keeping it at 17 and having the diversity of a member from each of the districts has always been good. And now that you're adding the skills based, I think we're in much better shape."

Dr. Walter I. Chinoy, New Jersey, proposed a secondary amendment to delete the words “skills-based” from the amendment.

The Speaker ruled the proposed secondary amendment out of order, since removing the words “skills-based” would result in keeping the current *Bylaws* language.

As a point of information, Dr. Kirk M. Norbo, Sixteenth District Trustee, asked, “... is the New Dentist portion that you added into this, the New Dentist Committee member?”

The Speaker responded, “... the way they’re constructing it, is that the exclusion was to allow more than one member if that person—from a trustee district if that member was a New Dentist Committee member.”

Dr. Mark B. Desrosiers, Connecticut, moved to postpone definitely until after lunch further discussion on Resolution 49. On vote, the motion to postpone definitely was adopted.

### **Report of Reference Committee B (Dental Benefits, Practice and Related Matters)**

The Report of Reference Committee B was presented by Dr. Joseph G. Unger, Illinois, chair. The other members of the Committee were: Dr. L'Tanya J. Bailey, North Carolina; Dr. Mark E. Bronson, Ohio; Dr. Andrew B. Brown, Florida; Dr. Steven L. Essig, New York; Dr. Thomas W. Leslie, West Virginia; Dr. Cynthia R. Pauley, Washington; Dr. Carmen P. Smith, Texas; and Dr. Walter G. Weber, California.

**Consent Calendar** (Reference Committee B Resolution 66) The Reference Committee reported as follows:

The appended Resolution 66 lists resolutions referred and considered by this Reference Committee that received no or limited testimony, all positive testimony, all negative testimony, or the Reference Committee feels these resolutions were fully debated, with all issues considered. The Reference Committee's recommended action (adopt, adopt in lieu of, not adopt or refer) is identified on each resolution presented on the consent calendar. By adopting Resolution 66, the recommendations of the Reference Committee on the consent calendar resolutions will become the action of the House of Delegates. It should be noted that if a resolution on the consent calendar is to “adopt in lieu of” with a Committee recommendation to Vote No and the resolution remains on the approved consent calendar, the resolution is defeated and the underlying resolutions are automatically moot.

As customary, before voting on the consent calendar, any delegate wishing to discuss an item on the consent calendar has the right to request that resolution be removed and considered separately.

**66. Resolved**, that the recommendation of Reference Committee B on the following resolutions be accepted by the House of Delegates.

**Resolution 12**—(Adopt)—Rescission of Policy, Coordination of Benefits Reform (*Supplement:3000*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 13**—(Adopt)—Rescission of Policy, Patient's Right to Assign Payment  
(*Supplement:3002*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 14**—(Adopt)—Rescission of Policy, Dentist's Right to Participate in Dental Prepayment Plan (*Supplement:3004*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 15RC**—(Adopt Resolution 15RC in lieu of Resolution 15)—Revision of Policy, Assignment of Benefits (*Supplement:3006*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 16**—(Adopt)—Amendment of Policy, Statement on Dentist Health and Wellness (*Supplement:3007*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 17**—(Adopt)—Response to Resolution 96H-2015: Development of ADA Policy on Dentistry's Role in Sleep-Related Breathing Disorders (*Supplement:3009*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 34**—(Adopt)—Response to Resolution 85H-2016: Third-Party Payment Choices (*Supplement:3060*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 35**—(Adopt)—Third-Party Payer Patient Treatment History (*Supplement:3061*) \$: None; FTE: 0.2

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 36**—(Not Adopt)—Study on How Dental Benefit Companies Affect the Doctor-Patient Relationship (*Supplement:3062*) \$: 98,631; FTE: 1

**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 44**—(Adopt)—Response to Resolution 91-2016: Development of Sample Clinical Chart Entries To Increase Quality in Documentation (*Supplement:3065*) \$: 42,170; FTE: .25

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 50**—(Adopt)—Do-It-Yourself Teeth Straightening (*Supplement:3066*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 53**—(Adopt)—Genetic Testing for Risk Assessment (*Supplement:3079*) \$:None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 55**—(Not Adopt)—Credible Online Rating System of Dental Benefit Plans From the ADA to Help Consumers and Purchasers (*Supplement:3081*) \$: 171,400; FTE: 0.2

**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 56RC**—(Adopt Resolution 56RC in lieu of Resolution 56)—Establishment of a Comprehensive Dental Disease Clinical Registry (*Supplement:3084*) \$: 35,000; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 57**—(Adopt)—Revision of ADA Policy Statement on Inappropriate or Intrusive Provisions and Practices by Third-Party Payers (*Supplement:3085*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 58S-1**—(Adopt Resolution 58S-1 in lieu of Resolution 58)—Strategies for Elder Care (*Supplement:3089a*) \$: 119,398; FTE: 1

**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 59**—(Not Adopt)—Protection of Patients' Rights to Select Treatment Options (*Supplement:3093*) \$: None; FTE:0

**COMMITTEE RECOMMENDATION: Vote No**

Dr. Unger moved Resolution 66 with the Committee Recommendation to Vote Yes.

Requests were made to remove the following resolutions from the Consent Calendar:

Resolution 59 removed by Dr. Jay R. Wells, III, Pennsylvania

Resolution 17 removed by Dr. Ian Paisley, Colorado

The Speaker reminded everyone that Resolution 55 and Resolution 58S-1 had been withdrawn

Dr. Barry J. Taylor, Oregon, requested that Resolution 58 (*Supplement:3089*) be withdrawn.

Hearing no objection, Resolution 58 was withdrawn.

Hearing no objection, the amended Resolution 66 was adopted by general consent.

**66H-2017. Resolved**, that the recommendation of Reference Committee B on the following resolutions be accepted by the House of Delegates.

**Resolution 12**—(Adopt)—Rescission of Policy, Coordination of Benefits Reform (*Supplement:3000*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 13**—(Adopt)—Rescission of Policy, Patient's Right to Assign Payment  
(*Supplement:3002*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 14**—(Adopt)—Rescission of Policy, Dentist's Right to Participate in Dental Prepayment Plan (*Supplement:3004*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 15RC**—(Adopt Resolution 15RC in lieu of Resolution 15)—Revision of Policy, Assignment of Benefits (*Supplement:3006*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 16**—(Adopt)—Amendment of Policy, Statement on Dentist Health and Wellness  
(*Supplement:3007*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 17**—(Adopt)—Response to Resolution 96H-2015: Development of ADA Policy on Dentistry's Role in Sleep-Related Breathing Disorders (*Supplement:3009*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 34**—(Adopt)—Response to Resolution 85H-2016: Third-Party Payment Choices  
(*Supplement:3060*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 35**—(Adopt)—Third-Party Payer Patient Treatment History (*Supplement:3061*)  
\$: None; FTE: 0.2

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 36**—(Not Adopt)—Study on How Dental Benefit Companies Affect the Doctor-Patient Relationship (*Supplement:3062*) \$: 98,631; FTE: 1

**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 44**—(Adopt)—Response to Resolution 91-2016: Development of Sample Clinical Chart Entries To Increase Quality in Documentation (*Supplement:3065*) \$: 42,170; FTE: .25

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 50**—(Adopt)—Do-It-Yourself Teeth Straightening (*Supplement:3066*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 53**—(Adopt)—Genetic Testing for Risk Assessment (*Supplement:3079*)  
\$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

~~**Resolution 55**—(Not Adopt)—Credible Online Rating System of Dental Benefit Plans From the ADA to Help Consumers and Purchasers (*Supplement:3081*) \$: 171,400; FTE: 0.2~~

~~**COMMITTEE RECOMMENDATION: Vote No (Withdrawn)**~~

**Resolution 56RC**—(Adopt Resolution 56RC in lieu of Resolution 56)—Establishment of a Comprehensive Dental Disease Clinical Registry (*Supplement:3084*) \$: 35,000; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 57**—(Adopt)—Revision of ADA Policy Statement on Inappropriate or Intrusive Provisions and Practices by Third-Party Payers (*Supplement:3085*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

~~**Resolution 58S-1**—(Adopt Resolution 58S-1 in lieu of Resolution 58)—Strategies for Elder Care (*Supplement:3089a*) \$: 119,398; FTE: 1~~

~~**COMMITTEE RECOMMENDATION: Vote No (Withdrawn)**~~

~~**Resolution 59**—(Not Adopt)—Protection of Patients' Rights to Select Treatment Options (*Supplement:3093*) \$: None; FTE: 0~~

~~**COMMITTEE RECOMMENDATION: Vote No**~~

*Note. For the purpose of a fully documented record, the text of the resolutions presented in Resolution 66H follows.*

#### **Consent Calendar Resolutions—Adopted/Adopted in Lieu of**

##### *Rescission of Policy, Coordination of Benefits Reform*

**12H-2017. Resolved**, that the ADA Policy, Coordination of Benefits Reform (*Trans.2008:496*) be rescinded.

##### **Coordination of Benefits Reform (*Trans.2008:496*)**

**Resolved**, that the American Dental Association work with government agencies and dental carriers to enact coordination of benefit laws requiring that when a premium is paid and a claim submitted, that each benefit plan will pay the same amount they would allow if no other coverage was applicable up to 100% of the total claim, and be it further

**Resolved**, that the ADA encourage states to enact similar laws, and be it further

**Resolved**, that the ADA use its staff and resources to assist states in this process.

##### *Rescission of Policy, Patient's Right to Assign Payment*

**13H-2017. Resolved**, that the ADA policy, Patient's Right to Assign Payment (*Trans.1997:708*) be rescinded.

##### **Patient's Right to Assign Payment (*Trans.1997:708*)**

**Resolved**, that the American Dental Association seek, and constituent societies be urged to seek, appropriate relief through legislation and/or administrative process to require third-party payers to recognize the right of patients to authorize payment directly to the dentist, without changing and without regard to the participation status of the dentist.

##### *Rescission of Policy, Dentist's Right to Participate in Dental Prepayment Plan*

**14H-2017. Resolved**, that the ADA policy, Dentist's Right to Participate in Dental Prepayment Plan (*Trans.*1983:582) be rescinded.

**Dentist's Right to Participate in Dental Prepayment Plan (*Trans.*1983:582)**

**Resolved**, that constituent dental societies be urged to support enactment of legislation that would allow any dentist the right to participate as a contracting provider for a dental prepayment plan, provided the dentist is licensed to furnish the dental care services offered by said plan.

*Revision of Policy, Authorization of Benefits*

**15H-2017. Resolved**, that the American Dental Association supports the right of each dentist to accept or reject ~~authorized assignment~~ of benefits from any dental benefits plan, and be it further

**Resolved**, that the Association supports the right of every patient to assign ~~authorize~~ that his or her benefits be paid to the treating dentist and to have the ~~authorization~~ assignment honored by the third-party payer, and be it further

**Resolved**, that when a third-party payer submits payment directly to the patient, contrary to the patient's authorized preference, the dentist has the right to request payment directly from the patient. If the patient declines, then it is the third-party payer's responsibility to submit the correct payment to the dentist and ~~reclaim the erroneously submitted payment from the patient, within fifteen (15) days of being notified of the incorrect payment, and to submit the payment to the dentist whether or not the third-party payer has received reimbursement from the patient,~~ and be it further

**Resolved**, that in those states where dentists are not notified of the rescission of a prior ~~authorization~~ assignment of benefits, the Association encourage state dental societies to seek legislative relief.

*Amendment of Policy, Statement on Dentist Health and Wellness*

**16H-2017. Resolved**, that the ADA policy "Statement on Dentist Health and Wellness" (*Trans.*2005:321), be amended by deletion of the third paragraph (deletion ~~stricken~~).

**STATEMENT ON DENTIST HEALTH AND WELLNESS (*Trans.*2005:321)**

To preserve the quality of their performance and advance the welfare of patients, dentists are encouraged to maintain their health and wellness, construed broadly as preventing or treating acute or chronic diseases, including mental illness, addictive disorders, disabilities and occupational stress. When health or wellness is compromised, so may be the safety and effectiveness of the dental care provided. When failing physical or mental health reaches the point of interfering with a dentist's ability to engage safely in professional activities, the dentist is said to be impaired.

In addition to maintaining healthy lifestyle habits, every dentist is encouraged to have a personal physician whose objectivity is not compromised. Impaired dentists whose health or wellness is compromised are urged to take measures to mitigate the problem, seek appropriate help as necessary and engage in an honest self-assessment of their ability to continue practicing.

~~Dentists are encouraged to participate in the ADA's Health Screening Program when they attend annual session, both to assist them in monitoring key indicators of personal health and to contribute to the body of knowledge about dentist health and well-being.~~

Dentists are strongly encouraged to have adequate disability and overhead protection insurance coverage which they review on a regular basis.

The ADA and/or its constituent and component societies, as appropriate, are encouraged to assist their members in being able to provide safe and effective care by:

- promoting health and wellness among dentists;
- supporting peers in identifying dentists in need of help;



- intervening promptly when the health or wellness of a colleague appears to have become compromised, including the offer of encouragement, coverage or referral to a dentist well-being program;
- encouraging the development of mutual aid agreements among dentists, for practice coverage in the event of serious illness;
- establishing or cooperating with dentist (or multidisciplinary) well-being programs that provide a supportive environment to maintain and restore health and wellness;
- establishing mechanisms to assure that impaired dentists promptly cease practice;
- reporting impaired dentists who continue to practice, despite reasonable offers of assistance, to appropriate bodies as required by law and/or ethical obligations; and
- supporting recovered colleagues when they resume patient care.

*Response to Resolution 85H-2016: Third-Party Payment Choices*

**34H-2017. Resolved**, that the American Dental Association adopt the following statement on third-party payment choices.

**THIRD-PARTY PAYMENT CHOICES**

The American Dental Association urges third-party payers to support a dentist's right to receive a traditional paper check in lieu of alternative payment methods as payment for services rendered to a beneficiary of a dental benefits program. The ADA opposes third-party payer payment methodologies that require a dentist to accept virtual credit card payments, electronic funds transfer (EFT) payments or any other payment options as the only payment option without an opportunity to choose a paper check.

Virtual credit cards may apply processing fees and these fees can be much higher than the fees agreed upon by the dentist when signing the original credit card agreement.

While EFT improves efficiency for the payers and may, in the long-term, be beneficial for dental practices, there are some dental offices that may incur problems due to their current patient management systems not being fully equipped to handle end-to-end electronic claims processing in particular bulk claim payments. Under current circumstances dentists are simply left with having to deal with bank charges levied to adopt EFT or paying to get upgraded to new software simply to handle EFT and electronic remittance advice (ERA) transactions seamlessly. This results in little to no improvement in practice efficiency.

In addition, the ADA believes dental claims should be reimbursed within fifteen (15) business days from receipt of the claim by the third-party payer.

*Third-Party Payer Patient Treatment History*

**35H-2017. Resolved**, that the Council on Dental Benefit Programs formulate and pursue an action plan to encourage third-party payers to provide to the patient and treating dentist, documentation of current treatment history and patient benefits along with plan limitations based on frequency or time, and be it further

**Resolved**, that progress on this issue be reported to the 2018 House of Delegates.

*Response to Resolution 91-2016: Development of Sample Clinical Chart Entries to Increase Quality in Documentation*

**44H-2017. Resolved**, that the 2017 ADA House of Delegates approve the development of a practice management resource that will provide guidance on a variety of risk management topics, including properly charting clinical entries and documenting medical necessity, to be completed in 2018.

*Do-It-Yourself Teeth Straightening*

**50H-2017. Resolved**, that for the health and well-being of the public, the American Dental Association believes that supervision by a licensed dentist is necessary for all phases of orthodontic treatment including:

- oral examination
- periodontal examination
- radiographic examination
- study models or scans of the mouth
- treatment planning and prescriptions
- periodic progress assessments and
- final assessment with stabilizing measures

and be it further

**Resolved**, that the ADA strongly discourages the practice of do-it-yourself orthodontics because of the potential for harm to patients.

*Genetic Testing for Risk Assessment*

**53H-2017. Resolved**, that for the health and well-being of the public, the American Dental Association believes that any payer organization using a genetic test to determine eligibility for benefit coverage for specific oral healthcare services and any manufacturer of a test(s) used in such an effort must publish specific information on:

- Confirmation from an independent third-party agency of test validity and reliability for the intended purpose
- Analysis on how this specific plan design will impact health outcomes and plan costs
- Disclosure of financial relationships between the manufacturer and payer
- Disclosure of bias and conflict of interest between the test manufacturer, investigators providing evidence and literature used to promote the test and plan design and with the payer organization

and be it further

**Resolved**, that the American Dental Association should work with the American National Standards Institute (ANSI) to develop industry standards for these tests.

*Establishment of a Comprehensive Dental Disease Clinical Registry*

**56H-2017. Resolved**, that the appropriate ADA agencies investigate the feasibility and impact of establishing a comprehensive oral health clinical registry, and be it further

**Resolved**, that a comprehensive report be submitted to the 2018 House of Delegates.

*Revision of ADA Policy Statement on Inappropriate or Intrusive Provisions and Practices by Third-Party Payers*

**57H-2017. Resolved**, that the Comprehensive ADA Policy on Inappropriate or Intrusive Provisions and Practices by Third-Party Payers (*Trans.*2016:290) be amended under the section titled **Disallowed Clauses** by the addition of a third example as follows:

3. Surgical procedures to multiple sites when performed on the same day of service

and be it further

**Resolved**, that the ADA communicate its change to the Policy on Inappropriate or Intrusive Provisions and Practices by Third-Party Payers to all Third-Party Payers, and request changes that address the inappropriate disallowance of surgical procedures to multiple sites on the same day of service, and be it further

**Resolved**, that the American Dental Association, as needed, seek legislation and/or regulations to address these inappropriate third-party payer provisions and practices, and be it further

**Resolved**, that constituent dental societies be urged to seek legislation or regulation in their individual states to address these inappropriate third-party payer provisions and practices.

### **Consent Calendar Resolutions—Not Adopted**

#### *Study on How Dental Benefit Companies Affect the Doctor-Patient Relationship*

**36. Resolved**, that the appropriate ADA agency conduct a study of dental benefit companies' policies and contracts. Compile and evaluate this information to develop a scoring system to dental benefit companies' impact on the doctor-patient relationship and the delivery of appropriate care, and be it further

**Resolved**, that the ADA make available to its members and the public, the results of these findings ranking the quality of these networks, and be it further

**Resolved**, that this scoring be examined and updated on a semi-annual basis.

### **Non-Consent Resolutions**

**Response to Resolution 96H-2015: Development of ADA Policy on Dentistry's Role in Sleep-Related Breathing Disorders** (Council on Dental Practice Resolution 17) The Reference Committee reported as follows:

The Reference Committee heard extensive testimony in favor of the resolution. While testimony from the American Academy of Sleep Medicine reaffirmed its previously communicated opposition to Resolution 17, the preponderance of testimony supported the resolution. Recognizing the thorough and inclusive consensus process followed by the Council on Dental Practice, the Reference Committee carefully considered this testimony and determined no changes to the resolution were needed. Upon discussion, the Reference Committee concurs with the Council on Dental Practice and the Board of Trustees and recommends adoption of the following resolution.

**17. Resolved**, that the following policy on Sleep-Related Breathing Disorders be adopted.

#### **Proposed Policy Statement on the Role of Dentistry in the Treatment of Sleep-Related Breathing Disorders**

Sleep-related breathing disorders (SRBD) are disorders characterized by disruptions in normal breathing patterns. SRBDs are potentially serious medical conditions caused by anatomical airway collapse and altered respiratory control mechanisms. Common SRBDs include snoring, upper airway resistance syndrome (UARS) and obstructive sleep apnea (OSA). OSA has been associated with metabolic, cardiovascular, respiratory, dental and other diseases. In children, undiagnosed and/or untreated OSA can be associated with cardiovascular problems, impaired growth as well as learning and behavioral problems.

Dentists can and do play an essential role in the multidisciplinary care of patients with certain sleep-related breathing disorders and are well positioned to identify patients at greater risk of SRBD. SRBD can be caused by a number of multifactorial medical issues and are therefore best treated through a collaborative model. Working in conjunction with our colleagues in medicine, dentists have various methods of mitigating these disorders. In children, the dentist's recognition of suboptimal early craniofacial growth and development or other risk factors may lead to medical referral or orthodontic/orthopedic intervention to treat and/or prevent SRBD. Various surgical modalities exist to treat SRBD. Oral appliances, specifically custom-made, titratable devices can improve SRBD in adult patients compared to no therapy or placebo devices. Oral appliance therapy (OAT) can improve OSA in adult patients, especially those who are intolerant of continuous positive airway pressure (CPAP). Dentists are the only health care provider with the knowledge and expertise to provide OAT.

The dentist's role in the treatment of SRBD includes the following:

- Dentists are encouraged to screen patients for SRBD as part of a comprehensive medical and dental history to recognize symptoms such as daytime sleepiness, choking, snoring or witnessed apneas and an evaluation for risk factors such as obesity, retrognathia, or hypertension. If risk for SRBD is determined, these patients should be referred, as needed, to the appropriate physicians for proper diagnosis.
- In children, screening through history and clinical examination may identify signs and symptoms of deficient growth and development, or other risk factors that may lead to airway issues. If risk for SRBD is determined, intervention through medical/dental referral or evidenced based treatment may be appropriate to help treat the SRBD and/or develop an optimal physiologic airway and breathing pattern.
- Oral appliance therapy is an appropriate treatment for mild and moderate sleep apnea, and for severe sleep apnea when a CPAP is not tolerated by the patient.
- When oral appliance therapy is prescribed by a physician through written or electronic order for an adult patient with obstructive sleep apnea, a dentist should evaluate the patient for the appropriateness of fabricating a suitable oral appliance. If deemed appropriate, a dentist should fabricate an oral appliance.
- Dentists should obtain appropriate patient consent for treatment that reviews the proposed treatment plan, all available options and any potential side effects of using OAT and expected appliance longevity.
- Dentists treating SRBD with OAT should be capable of recognizing and managing the potential side effects through treatment or proper referral.
- Dentists who provide OAT to patients should monitor and adjust the Oral Appliance (OA) for treatment efficacy as needed, or at least annually. As titration of OAs has been shown to affect the final treatment outcome and overall OA success, the use of unattended cardiorespiratory (Type 3) or (Type 4) portable monitors may be used by the dentist to help define the optimal target position of the mandible. A dentist trained in the use of these portable monitoring devices may assess the objective interim results for the purposes of OA titration.
- Surgical procedures may be considered as a secondary treatment for OSA when CPAP or OAT is inadequate or not tolerated. In selected cases, such as patients with concomitant dentofacial deformities, surgical intervention may be considered as a primary treatment.
- Dentists treating SRBD should continually update their knowledge and training of dental sleep medicine with related continuing education.
- Dentists should maintain regular communications with the patient's referring physician and other healthcare providers to the patient's treatment progress and any recommended follow-up treatment.
- Follow-up sleep testing by a physician should be conducted to evaluate the improvement or confirm treatment efficacy for the OSA, especially if the patient develops recurring OSA relevant symptoms or comorbidities.

Dr. Unger moved Resolution 17 (*Supplement:3009*) with the Committee Recommendation to Vote Yes.

Dr. Jason M. Ehtessabian, Colorado, moved to amend Resolution 17 by adding a bullet point between the third and fourth bullet point, which reads as follows:

- Oral appliance therapy is an appropriate treatment only by a physician's prescription, based on the diagnosis of a physician who has examined the patient.

In speaking to the amendment, Dr. Ehtessabian stated, "What we hope you consider is that there are many different types of sleep disorders. It's not just sleep apnea that we're talking about here, and we believe that physician involvement in this is really important for ultimate patient outcomes, especially when dealing with something as life threatening as sleep apnea can potentially be."

Dr. David P. Jackson, Colorado, spoke in support of the amendment. He said, "...My concern is, I think there is very real risk to a dentist who works without the previous diagnosis of a physician. In the event that an event like fatality occurs, I think the risk is very great that when it gets litigated, and it likely could be or will be, that the outcome for the dentist will not be very good."

Dr. Christopher M. Connell, Ohio, member of the Council on Dental Practice, spoke against the amendment saying, "...This resolution was carefully crafted with significant input from both medicine and dentistry to define the role of the dentist and the M.D. in the treatment of SRBD, define assessment goals, and define treatment options in order of consideration depending on the patient selection. This resolution provides guidelines and a framework to work in concert with appropriate treating professionals, and these important definitive statements are designed to walk down the very middle of the spectrum of opinions, so the more careful collaboration can take place to care for our patients with these various breathing disorders."

Discussion in opposition to the amendment ensued. Individuals speaking against the amendment commented that the amendment takes away the role of the dentist and passes it on to the physician, and that the amendment does not include which oral appliances would require a prescription written by a physician.

A motion was made to vote immediately, which requires a two-thirds vote; on vote the motion to vote immediately was adopted. On vote, the amendment was not adopted.

On vote, Resolution 17 was adopted.

**17H-2017. Resolved,** that the following policy on Sleep-Related Breathing Disorders be adopted.

#### **Proposed Policy Statement on the Role of Dentistry in the Treatment of Sleep-Related Breathing Disorders**

Sleep-related breathing disorders (SRBD) are disorders characterized by disruptions in normal breathing patterns. SRBDs are potentially serious medical conditions caused by anatomical airway collapse and altered respiratory control mechanisms. Common SRBDs include snoring, upper airway resistance syndrome (UARS) and obstructive sleep apnea (OSA). OSA has been associated with metabolic, cardiovascular, respiratory, dental and other diseases. In children, undiagnosed and/or untreated OSA can be associated with cardiovascular problems, impaired growth as well as learning and behavioral problems.

Dentists can and do play an essential role in the multidisciplinary care of patients with certain sleep-related breathing disorders and are well positioned to identify patients at greater risk of SRBD. SRBD can be caused by a number of multifactorial medical issues and are therefore best treated through a collaborative model. Working in conjunction with our colleagues in medicine, dentists have various methods of mitigating these disorders. In children, the dentist's recognition of suboptimal early craniofacial growth and development or other risk factors may lead to medical referral or orthodontic/orthopedic intervention to treat and/or prevent SRBD. Various surgical modalities exist to treat SRBD. Oral appliances, specifically custom-made, titratable devices can improve SRBD in adult patients compared to no therapy or placebo devices. Oral appliance therapy (OAT) can improve OSA

in adult patients, especially those who are intolerant of continuous positive airway pressure (CPAP). Dentists are the only health care provider with the knowledge and expertise to provide OAT.

The dentist's role in the treatment of SRBD includes the following:

- Dentists are encouraged to screen patients for SRBD as part of a comprehensive medical and dental history to recognize symptoms such as daytime sleepiness, choking, snoring or witnessed apneas and an evaluation for risk factors such as obesity, retrognathia, or hypertension. If risk for SRBD is determined, these patients should be referred, as needed, to the appropriate physicians for proper diagnosis.
- In children, screening through history and clinical examination may identify signs and symptoms of deficient growth and development, or other risk factors that may lead to airway issues. If risk for SRBD is determined, intervention through medical/dental referral or evidenced based treatment may be appropriate to help treat the SRBD and/or develop an optimal physiologic airway and breathing pattern.
- Oral appliance therapy is an appropriate treatment for mild and moderate sleep apnea, and for severe sleep apnea when a CPAP is not tolerated by the patient.
- When oral appliance therapy is prescribed by a physician through written or electronic order for an adult patient with obstructive sleep apnea, a dentist should evaluate the patient for the appropriateness of fabricating a suitable oral appliance. If deemed appropriate, a dentist should fabricate an oral appliance.
- Dentists should obtain appropriate patient consent for treatment that reviews the proposed treatment plan, all available options and any potential side effects of using OAT and expected appliance longevity.
- Dentists treating SRBD with OAT should be capable of recognizing and managing the potential side effects through treatment or proper referral.
- Dentists who provide OAT to patients should monitor and adjust the Oral Appliance (OA) for treatment efficacy as needed, or at least annually. As titration of OAs has been shown to affect the final treatment outcome and overall OA success, the use of unattended cardiorespiratory (Type 3) or (Type 4) portable monitors may be used by the dentist to help define the optimal target position of the mandible. A dentist trained in the use of these portable monitoring devices may assess the objective interim results for the purposes of OA titration.
- Surgical procedures may be considered as a secondary treatment for OSA when CPAP or OAT is inadequate or not tolerated. In selected cases, such as patients with concomitant dentofacial deformities, surgical intervention may be considered as a primary treatment.
- Dentists treating SRBD should continually update their knowledge and training of dental sleep medicine with related continuing education.
- Dentists should maintain regular communications with the patient's referring physician and other healthcare providers to the patient's treatment progress and any recommended follow-up treatment.
- Follow-up sleep testing by a physician should be conducted to evaluate the improvement or confirm treatment efficacy for the OSA, especially if the patient develops recurring OSA relevant symptoms or comorbidities.

**Protection of Patients' Rights to Select Treatment Options:** (Seventeenth Trustee District Resolution 59): The Reference Committee reported as follows:

The Reference Committee heard testimony for and against Resolution 59. There are many policies that express the same sentiment as the resolution as presented and apply to all dental benefit programs including any potential Medicare benefit. The Committee noted that current ADA policy is supportive of a Medicare benefit and the Council on Dental Benefit Programs is looking at a dental benefit in Medicare. Upon discussion, the Reference Committee recommends against adoption of the following resolution.

**59. Resolved,** that the ADA must advocate for the protection of patients' rights to select treatment options for optimal health through consultation with their dentist in any dental benefit plan that may be developed in any future Medicare programs.

Dr. Unger moved Resolution 59 (*Supplement:3093*) with a Committee Recommendation to Vote No.

Dr. Jay R. Wells, Pennsylvania, spoke in support of Resolution 59, stating, "The American Dental Association is a well-respected organization and should have some input when government is considering whether dentistry should be included in this or not."

Dr. Mark A. Limosani, Florida, spoke in support of Resolution 59. He stated, "As a new dentist, I'm very concerned about dentistry and Medicare. ... While we have full confidence in the anticipated work of CDBP, CDP and CGA to thoroughly review the various concepts of a potentially comprehensive dental benefit in Medicare, we find it essential to share this with this House of Delegates, the growing concern of our membership about the momentum of special interest groups pushing for dentistry in Medicare. The ADA policy on this is 38 years old. It is buried in a 33 point list of comprehensive care concepts. The Medicare of today is not the Medicare of 1979. Our position to this resolution also claims that we already have similar policy on third-party payers, but that policy does not address government plans such as Medicare. We believe this only supports, not impedes, the work of CDBP. We see protecting the doctor-patient relationship as a common sense, foundational principle we already espouse. It is time to apply this principle to the conversation in dentistry and Medicare."

Dr. Gary S. Davis, Pennsylvania, spoke in support of Resolution 59 stating, "We understand that we already have policy supportive of Medicare benefit and that CDBP is looking at a dental benefit in Medicare. However, I do not believe this is enough for the protection of the patients we treat. As we have learned from the past, it is better for our members to be proactive and have a seat at the table where these new decisions are being made rather than being reactive and letting others make the decisions."

The Speaker asked if there was any further discussion on Resolution 59; there was none. On vote, Resolution 59 was not adopted.

### **Report of Reference Committee C (Dental Education, Science and Related Matters)**

The Report of Reference Committee C was presented by Dr. Linda C. Niessen, Florida, chair. The other members of the Committee were: Dr. David E. Andersen, Minnesota; Dr. John G. Buchanan, North Carolina; Dr. Steven J. Holm, Indiana; Dr. John K. Holman, Mississippi; Dr. Laji J. James, Texas; Dr. Marsha A. Pyle, Missouri; Dr. Robert L. Skinner, Arkansas; and Dr. James D. Stephens, California.

**Consent Calendar** (Reference Committee C Resolution 65) The Reference Committee reported as follows:

The appended Resolution 65 lists resolutions referred and considered by this Reference Committee that received no or limited testimony, all positive testimony, all negative testimony, or the Reference Committee feels these resolutions were fully debated, with all issues considered. The Reference Committee's recommended action (adopt, adopt in lieu of, not adopt or refer) is identified on each resolution presented on the consent calendar. By adopting Resolution 65, the recommendations of the Reference Committee on the consent calendar resolutions will become the actions of the House of

Delegates. It should be noted that if a resolution on the consent calendar is to “adopt in lieu of” with a Committee Recommendation to Vote No and the resolution remains on the approved consent calendar, the resolution is defeated and the underlying resolutions are automatically moot.

As customary, before voting on the consent calendar, any delegate wishing to discuss an item on the consent calendar has the right to request that resolution be removed and considered separately.

**65. Resolved**, that the recommendations of Reference Committee C on the following resolutions be accepted by the House of Delegates.

**Resolution 8**—(Adopt)—Rescission of the Policy, Cardiopulmonary Resuscitation Instruction (*Supplement:4000*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 9**—(Adopt)—Response to Resolution 19H-2016: Recognition of Operative Dentistry as an Interest Area in General Dentistry (*Supplement:4002*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 10**—(Adopt)—Amendment of the Policy Statement on Continuing Dental Education (*Supplement:4003*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 11**—(Adopt)—Policy on State Dental Board Recognition of the Commission for Continuing Education Provider Recognition (*Supplement:4005*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 21**—(Adopt)—Amendment of the Joint Commission on National Dental Examinations Standing Rules (*Supplement:4017*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 39**—(Adopt)—Amendment of the ADA Policy on Evidence-Based Dentistry (*Supplement:4036*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 40**—(Adopt)—Rescission of the ADA Policy on Acupuncture (*Supplement:4039*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 41RC**—(Adopt Resolution 41RC in lieu of Resolution 41)—Amendment of the ADA Policy on Unconventional Dentistry (*Supplement:4042*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 42**—(Adopt)—Amendment of the ADA Policy on Use of Laboratory Animals in Research (*Supplement:4044*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 43**—(Adopt)—Recession of the ADA Policy on Standardized Numbering System for Diamond Burs (*Supplement:4045*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

Dr. Niessen moved Resolution 65 with a Committee Recommendation to Vote Yes.

Hearing no objection, Resolution 65 was adopted by general consent.

**65H-2017. Resolved**, that the recommendations of Reference Committee C on the following resolutions be accepted by the House of Delegates.



**Resolution 8**—(Adopt)—Rescission of the Policy, Cardiopulmonary Resuscitation Instruction (*Supplement:4000*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 9**—(Adopt)—Response to Resolution 19H-2016: Recognition of Operative Dentistry as an Interest Area in General Dentistry (*Supplement:4002*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 10**—(Adopt)—Amendment of the Policy Statement on Continuing Dental Education (*Supplement:4003*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 11**—(Adopt)—Policy on State Dental Board Recognition of the Commission for Continuing Education Provider Recognition (*Supplement:4005*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 21**—(Adopt)—Amendment of the Joint Commission on National Dental Examinations Standing Rules (*Supplement:4017*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 39**—(Adopt)—Amendment of the ADA Policy on Evidence-Based Dentistry (*Supplement:4036*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 40**—(Adopt)—Rescission of the ADA Policy on Acupuncture (*Supplement:4039*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 41RC**—(Adopt Resolution 41RC in lieu of Resolution 41)—Amendment of the ADA Policy on Unconventional Dentistry (*Supplement:4042*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 42**—(Adopt)—Amendment of the ADA Policy on Use of Laboratory Animals in Research (*Supplement:4044*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 43**—(Adopt)—Recession of the ADA Policy on Standardized Numbering System for Diamond Burs (*Supplement:4045*) \$: None; FTE: 0

**COMMITTEE RECOMMENDATION: Vote Yes**

*Note: For the purpose of a fully documented record, the text of the resolutions presented in Resolution 65H follows.*

#### **Consent Calendar Resolutions—Adopted/Adopted in Lieu of**

*Rescission of the Policy, Cardiopulmonary Resuscitation Instruction*

**8H-2017. Resolved**, that the ADA policy, Cardiopulmonary Resuscitation Instruction (*Trans.1976:860*) be rescinded.

#### **Cardiopulmonary Resuscitation Instruction (*Trans.1976:860*)**

**Resolved**, that constituent and component societies be encouraged to make regularly available to their members and their auxiliary personnel continuing education in cardiopulmonary resuscitation.

*Response to Resolution 19H-2016: Recognition of Operative Dentistry as an Interest Area in General Dentistry*

**9H-2017. Resolved**, that the ADA Policy Recognition of Operative Dentistry as an Interest Area in General Dentistry (*Trans.*2016:304) be amended (additions are underscored):

**Recognition of Operative Dentistry, Cariology and Biomaterials as an Interest Area in General Dentistry**

**Resolved**, that operative dentistry, cariology and biomaterials is an interest area in general dentistry recognized by the American Dental Association and sponsored by the Academy of Operative Dentistry.

*Amendment of the Policy Statement on Continuing Dental Education*

**10H-2017. Resolved**, that the ADA Policy, Statement on Continuing Dental Education (*Trans.*2006:331; 2011:465) be amended as follows (additions are underscored; ~~deletions are stricken~~):

**Definition of Continuing Dental Education:** Continuing dental education consists of educational activities designed to review existing concepts and techniques, to convey information beyond the basic dental education and to update knowledge on advances in scientific, clinical, and non-clinical related subject matter, including evidence-based dentistry and ethics. The objective is to improve the knowledge, skills and ability of the individual to provide the highest quality of service to the public and the profession. All continuing dental education should strengthen the habits of critical inquiry, balanced judgment and ethics that denote the truly professional and scientific person and should make it possible for new knowledge to be incorporated into the practice of dentistry as it becomes available.

Continuing education programs are typically designed for part-time enrollment and are usually of variable short duration, ~~although longer programs with structured, sequential curricula may also be included within this definition.~~ In contrast to accredited advanced dental education programs, continuing dental education programs do not lead to eligibility for ethical announcements or certification in a specialty recognized by the American Dental Association. Continuing dental education should be a part of a lifelong continuum of learning.

**Acceptable Subject Matter:** In order for specific course subject material to be acceptable for credit, the stated course objectives, overall curriculum design or topical outlines should be clearly stated. The information presented should enable the dental professional to enhance the dental-oral health and well-being of the public, either directly or through improved effectiveness of operations in dental practice, or through expansion of present knowledge through research. The dental professional should be able to apply the knowledge gained within his or her professional capacity.

**Acceptable Activities:** Continuing education activities are conducted in a wide variety of forms using many methods and techniques which are sponsored by a diverse group of institutions and organizations, including formally structured educational content offered by accredited or approved providers, and other types of activities that ~~S~~state boards and/or legislatures may by law specify as acceptable activities or content. The Association urges the state boards to allow maximum flexibility for an individual to choose content and learning activities based on individual preferences, needs, interests and resources. Additionally, clinical credit should be awarded for all activities related to the delivery of dental procedures including those with ethical components and self-study activities.

Acceptable forms might include but are not limited to:

- ~~attendance at and/or delivery of~~ participation in a formal continuing education course (a didactic and/or participatory activity presentation to review or update knowledge of new or existing concepts and techniques)
- delivery of a formally structured continuing education course

- general attendance at a multi-day convention type meeting (a meeting held at the national, state or regional level which involves a variety of concurrent educational experiences)
- authorship of publications (e.g., a book, a chapter of a book or an article or paper published in a professional journal)
- completion of self-study activities such as online courses and research, webinars, journal articles and downloadable books (individualized course of study which is structured and organized, but is available on an unscheduled and unsupervised basis; a method of providing feedback to the learner on performance or comprehension must be incorporated into the self-study activity)
- enrollment in a preceptor program (an independent course of study with a formally structured, preplanned and prescheduled curriculum where the participant observes and provides patient treatment using criteria and guidelines provided by the instructors; this type of study does not lead to an academic degree)
- academic service (e.g., instruction, administration or research related to undergraduate, postgraduate or graduate dental or allied dental training programs)
- presenting posters or table clinics
- participation on a state dental board, a board complaint investigation, peer review or quality care review procedures
- successful completion of Part II of the National Board Dental Examination, a recognized dental specialty examination or the National Board Dental Hygiene Examination if taken after initial licensure
- test development for written and clinical dental, dental hygiene and dental specialty examinations
- volunteering pro bono dental services or community oral health activities through a public health facility
- participation in dental research as a principal investigator or research assistant

*Policy on State Dental Board Recognition of the Commission for Continuing Education Provider Recognition*

**11H-2017. Resolved,** that the American Dental Association urges all state dental boards to recognize the Commission for Continuing Dental Education Provider Recognition as a national agency responsible for the approval of continuing dental education providers, and to accept for licensure renewal purposes dentists' participation in continuing education courses offered by providers approved by the Commission for Continuing Education Provider Recognition through the Continuing Education Recognition Program (CERP).

*Amendment of the Joint Commission on National Dental Examinations Standing Rules*

**21H-2017. Resolved,** that the Standing Rules of the Joint Commission on National Dental Examinations be revised as indicated in Appendix 1.

**Note:** See *Supplement:4018* for Appendix 1

*Amendment of the ADA Policy on Evidence-Based Dentistry*

**39H-2017. Resolved,** that the ADA Policy on Evidence-Based Dentistry (*Trans.*2001:462; 2012:469) be amended as follows (additions underscored; deletions ~~stricken~~):

**Policy Statement on Evidence Based Dentistry**

**Introduction:** ~~Dentistry has evolved as a profession that has uniquely and successfully combined science with the art of healing. Building on this foundation, the dental profession has maintained a strong commitment to sound science, public service and an ethical obligation to protect the patient's health. Over the last few decades~~ In the early 1990s, a process for reviewing scientific

~~evidence decision-making~~ emerged in medicine and other health fields that relies on systematic approaches to summarize the large volume of literature ~~that health care providers need to assimilate into clinical practice.~~ to assist patients and health care providers with translating evidence into clinical practice. David Sackett and colleagues defined evidence-based medicine as “the conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients. The practice of evidence-based medicine means integrating individual clinical expertise with the best available external clinical evidence from systematic research.”<sup>1</sup>

Simply stated, evidence-based medicine is “the integration of the best research evidence with clinical expertise and patient values.”<sup>2</sup> (Sackett et al. *Evidence-Based Medicine*. New York: Churchill Livingstone; 2000). With rapidly evolving science and technology, dentistry has also faced the complex demands of integrating and effectively implementing changes in treatment modalities that can arise from new scientific evidence.

To address these challenges, the dental profession has endorsed an evidence-based approach to clinical practice and oral health care, which is commonly known as evidence-based dentistry (EBD). The American Dental Association (ADA) continues to pursue a leadership role in the field of EBD to help clinicians interpret and apply the best available evidence in everyday practice.

**Definition of Evidence-Based Dentistry:** The ADA defines the term “*evidence-based dentistry*” as follows: “~~Evidence-based dentistry is~~ an approach to oral health care that requires the judicious integration of systematic assessments of clinically relevant scientific evidence, relating to the patient’s oral and medical condition and history, with the dentist’s clinical expertise and the patient’s treatment needs and preferences.”<sup>3,4</sup> (*Trans*. 2001:462)

In adopting this definition for EBD, the ADA also recognizes that treatment recommendations should be determined for each patient by his or her dentist, and that patient preferences should be considered in all decisions. Dentist experience and other circumstances, such as patients’ characteristics, additionally should also be considered in treatment planning and determining treatment needs. EBD does not provide a “cookbook” that dentists must follow, nor does it establish a standard of care. The EBD process must not be used to interfere in the dentist/patient relationship, nor is it to be used as a cost-containment tool by third-party payers.

**ADA Center for Evidence-Based Dentistry:** The Association supports the concept of evidence-based dentistry developed through systematic examination of the best available scientific data. In 2007, the Association established the ADA Center for Evidence-Based Dentistry to provide leadership in implementing ~~ADA programs and initiatives~~ related to EBD.

To realize its vision of disseminating the best available evidence and helping practitioners implement EBD, the ADA Center for Evidence-Based Dentistry works in collaboration with the Council on Scientific Affairs to convene expert panels that review the collective research evidence and develop evidence-based clinical practice guidelines ~~recommendations~~ on key clinical issues. The Association will continue developing evidence-based clinical ~~recommendations~~ practice guidelines and working with collaborative groups to conduct systematic reviews, critically appraising the reviews and policies developed by other organizations, and developing mechanisms for translating and disseminating information to the membership.

**Practicing Evidence-Based Dentistry:** ~~The goal of EBD is to help practitioners provide the best care for their patients. This process uses clinical and methodological experts to synthesize all of the evidence relative to a defined “question of interest,” and is published as a systematic review. The evidence is integrated with clinical experience and other factors relevant to specific patient needs and preferences. This characteristic of the EBD process is clearly explained in the classical definition of evidence-based medicine as “the conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients. The practice of evidence-based medicine means integrating individual clinical expertise with the best available external clinical evidence from systematic research” (Sackett DL, Rosenberg WMC, Gray JAM, Haynes RB, Richardson WS, 1996~~

~~Jan 13. Evidence based medicine: what it is and what it isn't BMJ 312:71-2). Simply stated, evidence-based medicine is "the integration of the best research evidence with clinical expertise and patient values" (Sackett et al. Evidence-Based Medicine. New York: Churchill Livingstone; 2000). Though this process was originally developed in medicine, its principles apply to all health care fields, including dentistry, and they are followed rigorously by the ADA Center for EBD.~~

**EBD Resources:** Detailed information on EBD, evidence-based clinical ~~recommendations~~practice guidelines, systematic reviews, EBD terminology, courses/workshops, critical summaries of ~~systematic reviews~~ and other resources are available ~~on~~at the website of the ADA Center for Evidence-Based Dentistry (<http://ebd.ada.org/>). Concise, user-friendly EBD resources from the ADA Center for EBD and other organizations are useful ~~informational~~ resources that can assist practitioners with integrating the best available evidence with clinical expertise and the needs and preferences of the individual dental patient.

### References

1. Sackett DL, Rosenberg WM, Gray JA, Haynes RB, Richardson WS. Evidence based medicine: what it is and what it isn't. BMJ 1996 Jan 13;312(7023):71-2.
2. Sackett DL, Straus SE, Richardson WS, et al. (eds.). Evidence-Based Medicine: How to Practice and Teach EBM (2<sup>nd</sup> ed.). Edinburgh: Churchill Livingstone, 2000.
3. American Dental Association. Transactions 2001:462.
4. Frantsve-Hawley J, Meyer DM. The evidence-based dentistry champions: a grassroots approach to the implementation of EBD. J Evid Based Dent Pract 2008; 8:64-69.

### *Rescission of the ADA Policy on Acupuncture*

**40H-2017. Resolved**, that the ADA Policy on Acupuncture (*Trans.*1973:688; 1999:975) be rescinded.

**Acupuncture** (*Trans.*1973:688; 1999:975)

**Resolved**, that major and coordinated research effort is needed to provide a valid scientific basis for the use of acupuncture in dentistry.

### *Amendment of the ADA Policy on Unconventional Dentistry*

**41H-2017. Resolved**, that the ADA Policy on Unconventional Dentistry (*Trans.*2001:460) be amended follows (additions underscored; deletions ~~stricken~~; Reference Committee addition is double-underscored):

### **Policy Statement on Complementary and Alternative Medicine in Dentistry ~~Unconventional Dentistry~~**

~~Unconventional diagnostic and treatment approaches to oral health care have attracted interest among some patients and practitioners in recent years. These diagnostic and treatment approaches have been variously described as "alternative," "holistic," "integrative," "biological," "environmental" or "complementary," although each term means something slightly different. For the purposes of this statement, "unconventional dentistry" is defined as encompassing scientifically unproven practices and products that do not conform to generally accepted dental practices or "conventional" methods of evaluation, diagnosis, prevention and/or treatment of diseases, conditions and/or dysfunctions relating to the oral cavity and its associated structures.~~

In September 2002, the National Center for Complementary and Alternative Medicine partnered with the National Institutes of Health (NIH) and the Agency for Healthcare Research and Quality to commission the Institute of Medicine (IOM) to convene a study committee to investigate scientific,

policy and practice questions arising from the use of complementary and alternative medicine (CAM) therapies by the American public.<sup>1</sup>

The IOM committee's final report<sup>1</sup> describes the current use of CAM in the United States, the populations using them, a summary of current practices and policies, and the development of conceptual framework linked to research and decision-making. One of the key messages from the cited report states:

"The committee recommends that the same principles and standards of evidence of treatment effectiveness apply to all treatments, whether currently labeled as conventional medicine or CAM. Implementing this recommendation requires that investigators use and develop as necessary common methods, measures, and standards for the generation and interpretation of evidence necessary for making decisions about the use of CAM and conventional therapies."<sup>1</sup>

Historically, dentistry has evolved as a strong and respected profession based on sound science, a moral commitment of service to the public, and an ethical obligation to protect the health of the patient. The ADA strongly supports this tradition of dentistry as a profession rooted in constantly evolving scientific information and an ethical duty to act for the benefit of others.

The dental community has always been open to emerging diagnostic and treatment approaches that over the years have improved the oral health of the public, the health of the dental team and the practice of dentistry. The ADA, consistent with its ~~object to encourage commitment to evidence-based dentistry and the improvement of the oral health of the public and to promote the art and science of dentistry,~~ supports those diagnostic and treatment approaches that allow both patient and dentist to make informed choices among safe and effective options. The provision of dental care should be based on sound scientific principles and demonstrated clinical safety and effectiveness.

~~With the explosion of unrefereed information about oral health issues made possible by the Internet, the Association believes that the need for systematic evaluation of diagnostic and treatment efficacy and safety to assist practitioners in responding to patient inquiries is greater than ever. The dental profession advocates an evidence-based approach to oral health care that requires the judicious integration of systematic assessments of clinically relevant scientific evidence, relating to the patient's oral and medical condition and history, with the dentist's clinical expertise and the patient's treatment needs and preferences. The ADA supports the scientific exploration needed to discover new diagnostic and treatment approaches and techniques, and encourages advocates of unconventional dentistry to pursue scientifically valid, systematic assessment of diagnostic and treatment efficacy and safety. The ADA is open to the idea of integrating new therapies in clinical practice, along with those that have been already tested and shown to be safe and effective in improving patient outcomes. However, the ADA also acknowledges that interventions which are considered CAM are usually understudied interventions that require further scientific testing and investigation to draw reliable conclusions about their safety, effectiveness and potential benefits beyond placebo.~~

Health care interventions, whether or not considered CAM, should be subject to testing using similar research standards and scientific rigor to provide a strong, evidence-based foundation for their safety and appropriate use. Within this context, the notion of CAM as a specific subset of interventions that belong to a specific discipline can be considered questionable.

## **References**

1. Institute of Medicine (US) Committee on the Use of Complementary and Alternative Medicine by the American Public. Complementary and Alternative Medicine in the United States. Washington (DC): National Academies Press; 2005:2. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK83799/>. Accessed June 12, 2017.

**42H-2017. Resolved**, that the ADA Policy on Use of Laboratory Animals in Research (*Trans.*1964:254; 2006:329) be amended as follows (additions underscored; deletions ~~stricken~~).

**Policy Statement on Use of Laboratory Animals in Research and Training**

**Resolved**, that the following statements ~~regarding the use of laboratory animals in research be adopted as an affirmation of policy:~~ The American Dental Association favors all reasonable efforts that would ensure the humane treatment of laboratory animals in research and training, in accordance with applicable laws, guidelines and regulations, but opposes the enactment of ~~restrictive~~ legislation, guidelines and regulations that would ~~hamper investigation or~~ impede the progress of research; and be it further

**Resolved**, that the American Dental Association encourages researchers and dental material manufacturers to ~~find~~ replace non-animal models with non-animal methodologies testing modalities for dental materials and techniques whenever the non-animal alternatives testing modalities would accomplish the same purpose.

*Rescission of the ADA Policy on Standardized Number System for Diamond Burs*

**43H-2017. Resolved**, that the ADA Policy, Standardized Numbering System for Diamond Burs (*Trans.*2005:321), be rescinded.

**Standardized Numbering System for Diamond Burs**

**Resolved**, that the American Dental Association encourages manufacturers and distributors to follow the International Organization for Standardization number coding system for diamond-bur instruments.

**Non-Consent Resolutions**

**OTC Product Labeling of pH** (Ninth Trustee District Resolution 45) The Reference Committee reported as follows:

The Reference Committee heard testimony for and against this resolution. The Reference Committee appreciates the importance of the issue raised by this resolution. However, the ADA is not a regulatory agency and thus may have limited influence on manufacturers' labeling practices. The Reference Committee also discussed whether the FTE impact of the requested action would be an efficient use of limited staff resources.

In August 2017, the ADA filed a Citizen's Petition with the FDA urging the agency to expedite the OTC monograph process. This petition specifically highlighted the need for revision and completion of those monographs that directly affect dentistry. When the FDA begins the OTC monograph revision process, the ADA will add pH-related requests to the list of comments provided to the agency.

Reference Committee members noted that information on the pH of dental products is currently available in the *ADA/PDR Guide to Dental Therapeutics* (fifth edition, 2012) or through Science Institute staff. The Reference Committee believes that the action proposed in this resolution would best be handled through existing efforts to change the OTC monograph. The Reference Committee concurs with the Board recommendation to vote "no" on this resolution.

**45. Resolved**, that the ADA supports and encourages manufacturers to provide product labeling to include information on pH level for over-the-counter anti-caries and fluoride rinses.

Dr. Niessen moved Resolution 45 (*Supplement:4048*) with the Committee Recommendation to Vote No.

As a point of information, Dr. Patrick J. Tepe, Wisconsin, asked for clarification on a discrepancy between the Board comments for Resolution 45 and the Reference Committee's report.

In response to Dr. Tepe's question, Dr. Marcelo Araujo, vice president, Science Institute, stated, "Science is committed to address all pH related issues through the current efforts assigned by the CSA and come back with some more information in the future."

Dr. Christopher J. Smiley, Michigan, moved to refer Resolution 45 to the Council on Scientific Affairs or appropriate ADA agencies to provide a report back to the 2018 House of Delegates. In speaking to the motion to refer, Dr. Smiley stated, "This report should detail ADA's efforts to provide our members and, most importantly, their patients information on the pH of all oral health rinses."

As a point of information, Dr. Ralph A. Cooley, Texas, asked for clarification saying, "I heard the author of the resolution make the motion for referral, and what I heard him say was that to refer this for all rinses, just not the over-the-counter anti-caries and fluoride rinses. So I guess I would like some clarification about that..."

In response to Dr. Cooley's question, Dr. Araujo responded, "All the work that we are doing now we will incorporate information for all rinses, not just fluoride. So the current work is already addressing the question that refers to that."

Dr. Richard M. Peppard, Texas, made a motion to amend the resolution before referral consideration so that the resolving clause would read as follows:

**Resolved**, that the ADA supports and encourages manufacturers to provide product labeling to include information on the pH level for over-the-counter anti-caries and fluoride rinses, oral products available to the public for disease prevention and palliation.

In response, the Speaker said, "It's on the motion to refer. If you have an additional inquiry that you want reported back on referral, you could amend the motion to refer. ... So, for instance, he asked for some specific information. If you wanted to add to that list, you could do that. Otherwise, we are just debating the motion to refer. ..."

Dr. Peppard spoke against referral, saying, "I think this does need some specific focus in the wording that they've chosen to use, and the reason for that is because in my practice, in Austin, Texas, I've referred a great many patients that are receiving post radiation therapy from MD Anderson, and these people come to me with absolutely no salivary capacity whatsoever. ... Every single thing that these people consume has an effect of their mucosa and I think this is a very critical thing that we need to have as an asset from our scientific committee and council people to provide for our members."

In speaking to the amendment to the motion to refer, Dr. Peppard stated, "Instead of just limiting this to rinses, I want to expand it to all oral products available to the public for disease prevention and palliation. I believe that the disease prevention covers the anti-caries and fluoride rinses, as well as other medications or anything that they may take over the counter, and palliation is a word that's appropriate for the relief, resolution of pain and inflammation from the mucosal issues. So this doesn't just cover rinses. It covers everything that they can buy over-the-counter and gives them a great deal of pertinent information in their own health care."

A delegate from the floor spoke against the amendment stating, "... I think all products is just way too broad. You're talking about toothpaste. If you want all rinses, that's perfectly fine, but if you are going to go to all oral products, you're talking about a very broad range of products."

On vote, the motion to amend the motion to refer was adopted.

The Speaker asked if there was any further discussion on the amended motion to refer; there was none.



On vote, the motion to refer Resolution 45, as amended, to the appropriate ADA agency for further study and report to the 2018 House of Delegates was adopted.

### Report of Reference Committee D (Legislative, Health, Governance and Related Matters)

The Report of Reference Committee D was presented by Dr. Bradley W. Barnes, Illinois, chair. The other members of the Committee were: Dr. Ann E. Christopher, Maryland; Dr. Nathalie Dube, Michigan; Dr. Stacey Gardner, Alabama; Dr. Kristi Golden, Arkansas; Dr. Mark B. Hughes, Arizona; Dr. Cary Limberakis, Pennsylvania; Dr. Eugene G. Porcelli, New York; and Dr. Richard D. Riddle, Connecticut.

**Consent Calendar** (Note: The Reference Committee D Consent Calendar Resolution 64 was considered as a priority item of business and adopted. Resolution 64 begins on page 230).

### Non-Consent Resolutions

**Evaluate the Business of the House of Delegates** (2017 Task Force to Evaluate the Business of the House of Delegates Resolution 1 and Board of Trustees Resolution 1B): The Reference Committee reported as follows:

After hearing testimony on the question whether a super majority should be required for the introduction of new business less than 15 days prior to the opening of the annual meeting, the Committee recommends adoption of the Board's Substitute Resolution 1B, which would require only a simple majority to proceed with such new business, rather than Resolution 1 which would require a two thirds majority. The Committee agrees with the Board's observation that requiring a super majority would place undue burden on the districts, particularly on those that do not meet prior to the first meeting of the House. The Committee notes that the vote on whether to allow introduction of the new business is taken without debate, which serves to limit the time and any disruption caused by proposing new business so close to the opening of the House. The substitute resolution also provides flexibility to the House for responding to newly raised issues of concern to members.

The Standing Committee on Constitution and Bylaws approves the wording of Resolution 1B as submitted, except that, because of the pendency of Resolution 7 to delete Chapters II through XX of the current *Bylaws* and adopt Chapters II through XVI of the proposed *Bylaws* and revisions to the *Manual of the House of Delegates*, the Standing Committee proposes an additional resolving clause to make changes to the proposed *Manual of the House of Delegates* conforming to the amendments proposed in this resolution should this resolution and Resolution 7 be adopted by the House of Delegates. The amended resolution is as follows.

**1B. Resolved**, that effective with the close of the 2017 House of Delegates, CHAPTER V. HOUSE OF DELEGATES, *Section 130. RULES OF ORDER, A. STANDING RULES AND REPORTS, e. INTRODUCTION OF NEW BUSINESS*, of the ADA *Bylaws* be amended as follows (additions highlighted; deletions ~~double strike out~~):

#### *Section 130: RULES OF ORDER*

e. INTRODUCTION OF NEW BUSINESS. No new business shall be introduced into the House of Delegates less than 15 days prior to the opening of the annual session, ~~unless except when~~ such new business is submitted by a Trustee District or the American Student Dental Association Delegation and is permitted to be introduced by a two-thirds (2/3) affirmative vote majority vote of the delegates present and voting. ~~No new business shall be introduced into the House of Delegates at the last meeting of a session except when such new business is submitted by a Trustee District or the American Student Dental Association Delegation and is permitted to be introduced by a two-thirds (2/3) affirmative vote of the delegates present and voting.~~ The motion introducing such new business shall not be debatable. Approval of such new business shall

require a majority vote except new business introduced at the last meeting of a session that would require a bylaw amendment cannot be adopted at such last meeting. Reference committee recommendations shall not be deemed new business.

and be it further

**Resolved**, if Resolution 7, *Amendment of the ADA Bylaws pursuant to 118H-2014* is adopted, that the following conforming changes to the amendments to the ADA *Bylaws* shown in this resolution be approved for placement into the newly revised *Manual of the House of Delegates* (additions underscored, deletions stricken):

### Introduction of New Business

No new business shall be introduced into the House of Delegates less than 15 days prior to the opening of the annual session, ~~unless except when such new business is~~ submitted by a trustee district or the American Student Dental Association ~~delegation and is permitted to be introduced by a majority vote of the delegates present and voting. No new business shall be introduced into the House of Delegates at the last meeting of a session except when such new business is submitted by a trustee district or the American Student Dental Association and is permitted to be introduced by a two-thirds (2/3) affirmative vote of the delegates present and voting.~~ The motion introducing such new business shall not be debatable. Approval of such new business shall require a majority vote except new business introduced at the last meeting of a session that would require a bylaw amendment cannot be adopted at such last meeting. Reference committee recommendations shall not be deemed new business.

Any resolution that the Speaker refers to a reference committee must be made available to all members of the House before adjournment of the first meeting. For this reason, resolutions received in the Headquarters Office before the House officially convenes its first meeting will be processed, referred to a reference committee, and made available to all members of the House at that meeting. Resolutions received after the first meeting has convened will not be referred to a reference committee. They will be accepted as new business, posted on ADA Connect, and taken up when the Speaker calls for new business.

Dr. Barnes moved Resolution 1B (*Supplement:5002*) in lieu of Resolution 1 (*Supplement:5001*) with the Committee Recommendation to Vote Yes.

Dr. Judee Tippet-Whyte, California, spoke in support of Resolution 1B. She said, "I realize there are some concerns about the ability to submit new resolutions for the House, and some of the constituent societies do not meet prior to the caucus. ... We're trying to be able to let all the delegates have as much information ahead of the House so that they can have their answer—the answers to the questions they may have."

Dr. Robert M. Peskin, New York, spoke against Resolution 1B stating, "We as a trustee district have a meeting at the House of Delegates traditionally, and it's because of that that we don't meet ahead of time and we don't have the opportunity to put any information together in terms of new business. ... I don't see that the House is being encumbered by new business that comes in within that 15-day window, and I would urge my colleagues to vote no on Resolution 1B and allow things to proceed as they have so that all components and all the trustee districts will not be disenfranchised because of this resolution."

Dr. Robert J. Wilson, Maryland, spoke against Resolution 1B. He said, "I would like to draw your attention to the six resolutions that would be affected in this House if this new language had been in place. Three of them were on the consent calendar. One was withdrawn, the one that had a great financial impact. Two were non-consent items. One was a substitute that was moved in lieu of by the reference committee, and one passed without comment. I submit to you that if this was in place, the processes would have taken longer than it did to actually take care of these resolutions. The cure is worse than the disease. There is no need for this resolution."

Additional discussion in opposition to Resolution 1B ensued.

A motion was made to vote immediately which requires a two-thirds vote; on vote the motion to vote immediately was adopted.

On vote, Resolution 1B was adopted in lieu of Resolution 1.

**\*1H-2017. Resolved**, that the following conforming changes to the amendments to the ADA *Bylaws* shown in this resolution be approved for placement into the newly revised *Manual of the House of Delegates* (additions underscored, deletions ~~stricken~~):

### **Introduction of New Business**

No new business shall be introduced into the House of Delegates less than 15 days prior to the opening of the annual session, ~~unless except when such new business is submitted by a trustee district or the American Student Dental Association delegation and is permitted to be introduced by a majority vote of the delegates present and voting. No new business shall be introduced into the House of Delegates at the last meeting of a session except when such new business is submitted by a trustee district or the American Student Dental Association and is permitted to be introduced by a two-thirds (2/3) affirmative vote of the delegates present and voting.~~ The motion introducing such new business shall not be debatable. Approval of such new business shall require a majority vote except new business introduced at the last meeting of a session that would require a bylaw amendment cannot be adopted at such last meeting. Reference committee recommendations shall not be deemed new business.

Any resolution that the Speaker refers to a reference committee must be made available to all members of the House before adjournment of the first meeting. For this reason, resolutions received in the Headquarters Office before the House officially convenes its first meeting will be processed, referred to a reference committee, and made available to all members of the House at that meeting. Resolutions received after the first meeting has convened will not be referred to a reference committee. They will be accepted as new business, posted on ADA Connect, and taken up when the Speaker calls for new business.

As a point of order, Dr. Robert M. Peskin, New York, stated, "...So my understanding was we were doing this as a bylaws amendment, and therefore, the [vote] threshold for this would have been two-thirds and not a simple majority."

In response, the Speaker stated, "Your point is not well taken. On page 5065, on line 48, 'be it further Resolved, if Resolution 7, *Amendment of the ADA Bylaws pursuant to Resolution 118H-2014* is adopted, that the following conforming changes to the ADA *Bylaws* shown in this resolution be approved for placement into the newly revised *Manual of the House of Delegates*' and the new wording is on page 5066, lines 5 through 24."

Dr. Peskin responded saying, "So that would be a rule, not a bylaw, and therefore, if this was to come up at a future meeting, that with this adoption, that rule could be suspended if we wanted to?"

In response, the Speaker stated, "...That's true, yes."

### **Amendment to Chapter I, Section 20.A. of the ADA Bylaws: The Meaning of Equivalent Degree.**

(Council on Ethics, Bylaws and Judicial Affairs Resolution 3 and Reference Committee Resolution 3RC): The Reference Committee reported as follows:

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\* With the adoption of Resolution 7H-2017, proposed amendments to the existing Bylaws became moot and only the wording to amend the revised *Bylaws*, *Governance Manual*, and *Manual of the House of Delegates* were considered and acted on by the House of Delegates.

The Reference Committee discussed Resolution 3 and was concerned that the definition of “equivalent degree” as presented would prohibit, for example, an oral and maxillofacial surgeon with a medical degree but not a dental degree from becoming a member of the American Dental Association. Consequently, the Committee proposes the following in lieu of Resolution 3.

The Standing Committee on Constitution and Bylaws approves the wording of Resolution 3RC as submitted.

**3RC. Resolved**, that Section 20.A. of Chapter I of the ADA Bylaws, scheduled to go into effect at the close of the 2017 House of Delegates, be amended as follows (additions double underscored, deletions ~~stricken~~):

#### Section 20. MEMBERSHIP ELIGIBILITY

A. ACTIVE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree\* shall be eligible to be an active member of this Association if he or she meets the following qualifications:

\* As used in these Bylaws, the term “equivalent degree” means a dental degree that the jurisdiction involved deems sufficient to allow the degree holder to sit for a dental licensure examination in the jurisdiction without any additional training.

Dr. Barnes moved Resolution 3RC in lieu of Resolution 3 (*Supplement:5003*) with the Committee Recommendation to Vote Yes.

Dr. Monica Hebl, Wisconsin, moved to amend Resolution 3RC, in the footnote which defines “equivalent degree”, by adding the words “full and complete” between the words “a” and “degree” and inserting the words “for a dentist’s license” between the words “examination” and “in the jurisdiction.”

In speaking to the amendment, Dr. Hebl stated, “Without this amendment, a dental therapist could obtain an equivalent degree because in Minnesota they sit for the credits dental licensure exam alongside the dental students for portions of the exam. So I believe this language is necessary to ensure the intent of the clarification of the definition of equivalent degree is realized.”

As a point of information, Dr. Hebl asked, “Does this language eliminate a mid-level from being able to be termed equivalent degree?”

In response to Dr. Hebl’s question, Mr. Thomas Elliott, Jr., deputy general counsel, said, “I believe it does.”

On vote, the proposed amendment was adopted.

Dr. Richard J. Dragon, Nevada, moved to further amend Resolution 3RC, in Section 20.A. ACTIVE MEMBER by adding the words “from a CODA accredited dental program” after the words “equivalent degree” so that this Section would read:

A. ACTIVE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree\* from a CODA accredited dental program shall be eligible to be an active member of this Association if he or she meets the following qualifications:

As a point of information, Dr. Richard A. Weinman, Georgia, asked “If you use this language, would that mean that a dentist in this country who got their dental degree in another country but did complete a specialty program who is now—will be licensed in many of the states would no longer be able to be considered an equivalent degree?”

In response to Dr. Weinman's question, the Speaker said, "The answer we're getting is that that would prevent some, even some existing members, from being members of the Association."

As a point of information, Dr. Kenneth S. Peters, Colorado, stated, "...We have a lot of our dental school faculty who do not have a D.D.S. or D.M.D., does this preclude them from being a member of the ADA?"

In response to Dr. Peters' question, the Speaker stated, "The answer is yes."

Dr. Richard J. Rosato, New Hampshire, requested that the Speaker rule the amendment out of order stating, "[the amendment] completely changes the intent of the resolution."

The Speaker responded, "Now, this Association has the ability to determine who it wants as its member, so it is in order."

Dr. Richard D. Riddle, Connecticut, spoke against the amendment. He stated, "I was also on the reference committee that dealt with this. We dealt with this language extensively. We didn't do it haphazardly. We were very careful to be inclusive and adding 'a CODA accredited dental program' would be detrimental to the purpose of this particular motion."

Dr. Douglas L. Kay, Illinois, spoke against the amendment, stating, "I'm a Chicago boy, however, I did go to school at the University of Paris, and I received a degree from there. I've been a proud member of the American Dental Association for 34 years, and I would hate to have that stripped away from me by this resolution."

Dr. W. Mark Donald, Mississippi, moved to refer Resolution 3RC. In speaking to the motion to refer, Dr. Donald said, "I would like to make a motion to refer on the basis of the fact that we have 'dental degree' that has been struck out and now you have in the new resolution that we just amended, it now includes 'dental degree' and 'dentist's license' and bring a definition back to the House related to the fact of dental therapy programs and dental hygiene programs, does that delete all those from the dental degree definition."

As a point of information, Dr. Steven A. Saxe, Nevada, asked if there would be any conflict between published ADA policies and position statements, and the definition of "equivalent degree," if the proposed amendment to add the words, "from a CODA accredited dental program" was not adopted.

In response, Mr. Elliott stated, "...it was the opinion of the Council that the definition provided in the resolution did not conflict with any policy or statement of the Association."

Dr. James D. Stephens, California, spoke against the motion to refer stating, "I think this House is astute enough to make this decision today and now."

On vote, the motion to refer was not adopted.

Discussion in opposition to the amendment ensued. Individuals commented that the amendment would disenfranchise members including those who completed advanced dental education at a CODA accredited program, but did not receive a D.D.S. or D.M.D. degree from a CODA accredited program.

A motion was made to vote immediately on the proposed amendment, which requires a two-thirds vote; on vote, the motion to vote immediately was adopted. On vote, the proposed amendment was not adopted.

On vote, Resolution 3RC, as amended, was adopted in lieu of Resolution 3.

**3H-2017. Resolved**, that Section 20.A. of Chapter I of the ADA Bylaws, scheduled to go into effect at the close of the 2017 House of Delegates, be amended as follows (additions double underscored, deletions ~~stricken~~):

## Section 20. MEMBERSHIP ELIGIBILITY

A. ACTIVE MEMBER. Any person holding a D.D.S., D.M.D. or equivalent degree\* shall be eligible to be an active member of this Association if he or she meets the following qualifications:

\* As used in these Bylaws, the term "equivalent degree" means a ~~dental~~ degree that the jurisdiction involved deems sufficient to allow the degree holder to sit for a full and complete dental licensure examination for a dentist's license in the jurisdiction without any additional training.

**New Dentist Committee Liaison Voting Privileges on Councils** (Board of Trustees Resolution 47 and Sixteenth Trustee District Resolution 47S-1): The Reference Committee reported as follows:

The Reference Committee heard substantial testimony concerning Resolution 47 and Resolution 47S-1. The Reference Committee agrees with the revisions proposed by Resolution 47S-1. Testimony in opposition to the Resolution was limited to members of the Council on Scientific Affairs, who expressed the concern that new dentist members would not have the requisite expertise, experience and time to serve on the Council. However, there was testimony in support of the Resolution that indicated there are new dentist members who have the educational background and experience needed to be successful contributors to all Councils, including skill-based Councils, like the Council on Scientific Affairs. In addition, the President, the President-elect, the First Vice President and two Trustees all testified in favor of Resolution 47S-1. They provided testimony concerning the care that is taken by the Board of Trustees to ensure that individuals nominated to serve on Councils meet the experience, expertise and other criteria set by the Councils themselves for appointment.

The Standing Committee on Constitution and Bylaws approves the wording of Resolution 47S-1 as submitted, except that an error in the number of members of the Council on Scientific Affairs has been detected and revised. The amended resolution follows (the Standing Committee amendments are indicated by green highlighted double underlining for additions and green highlighted ~~double strike throughs~~ for deletions).

**47S-1. Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS*, Paragraph A., be amended as follows (additions are double underscored; deletions ~~stricken~~):

## Section 20. MEMBERS, SELECTIONS, NOMINATIONS AND ELECTIONS:

A. The composition of the councils of this Association shall be as follows: In addition, a council may request an additional member who shall be a non-practicing dentist member appointed in accordance with Chapter I, Section 20Db of these *Bylaws*.

Council on Advocacy for Access and Prevention shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.\*

Council on Communications shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

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\* As used in this Chapter of the Bylaws, the term "new dentist" means either a member of the New Dentist Committee or a dentist who graduated from dental school with a D.D.S. or a D.M.D. degree less than ten (10) years prior to the selection.

Council on Dental Benefit Programs shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Dental Education and Licensure shall be composed of ~~sixteen (16)~~ seventeen (17) members selected as follows:

a. Nominations and Selection.

(1) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency. A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

(2) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.

(3) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.

(4) One (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

b. Election. The ~~eight (8)~~ members of the Council on Dental Education and Licensure nominated by the Board of Trustees shall be elected by the House of Delegates from nominees selected in accordance with this Section.

c. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish additional committees when they are deemed essential to carry out the duties of this Council.

Council on Dental Practice shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Ethics, Bylaws and Judicial Affairs shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Government Affairs shall be composed of ~~eighteen (18)~~ nineteen (19) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees. In addition, the chair of the political action committee shall be a non-voting member of the Council. Consideration shall be given to a candidate's experience in the military or other federal dental services. Members of the Council shall not be in the full-time employ of the federal government. Individuals called to active duty from the military reserves or national guard forces, providing such active duty has not been requested by the individual, shall not be considered to be in the full-time employ of the federal government.

Council on Members Insurance and Retirement Programs shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Membership shall be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

Council on Scientific Affairs shall be composed of ~~sixteen (16)~~ ~~seventeen (17)~~ eighteen (18) members, ~~fifteen (15)~~ sixteen (16) of ~~who whom~~ shall be selected from nominations open to all trustee districts, the current recipient of the Gold Medal Award for Excellence in Dental Research, and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

and be it further

**Resolved**, that the ADA *Bylaws*, Chapter X. COUNCILS, *Section 60. TERM OF OFFICE*, be amended as follows (additions underscored; deletions ~~stricken~~):

*Section 60. TERM OF OFFICE*: The term of office of members of councils shall be four (4) years except as otherwise provided in these *Bylaws*. The tenure of a member of a council shall be limited to one (1) term of four (4) years except as otherwise provided in these *Bylaws*. Except as otherwise provided in these Bylaws, a A-member shall not be eligible for appointment to another council or commission for a period of two (2) years after completing a previous council appointment. The terms of office for the new dentist members of councils recommended by the New Dentist Committee and nominated by the Board of Trustees shall be one (1) year terms; however, such members shall not be limited as to the number of consecutive to four (4) one (1) year terms of council service during the period that they are characterized as new dentists that they may serve. The current recipient of the Gold Medal Award for Excellence in Dental Research shall serve on the Council on Scientific Affairs until the award is bestowed on the next honoree.

**Resolved**, that the ADA *Bylaws*, CHAPTER VII. BOARD OF TRUSTEES, *Section 140. COMMITTEES*, be amended as follows (additions underscored, deletions ~~stricken through~~):

*Section 140. COMMITTEES*: The Board of Trustees shall have a standing New Dentist Committee. The Committee shall consist of one (1) member from each trustee district who are active members selected by the Board of Trustees and confirmed by the House of Delegates. Members of the Committee shall have received their D.D.S. or D.M.D. degree less than ten (10) years before the time of selection. The chair of the Committee shall be appointed annually by the Board of Trustees.



Members of the Committee shall serve one (1) term of four (4) years. The Board of Trustees shall stagger the terms of the members of the Committee in a manner so four (4) members will complete their terms each year, except every fourth year when five (5) members shall complete their terms.

The Board of Trustees shall have the power to remove a Committee member for cause in accordance with procedures established by the Board in its *Rules*. In the event of any vacancy on the Committee, the Board of Trustees shall select a member of this Association possessing the same qualifications as established by these *Bylaws* for the previous member, to fill such vacancy for the remainder of the unexpired term. If the term of the vacated Committee position has less than fifty percent (50%) of a full four-year term remaining at the time the successor member is selected, the successor member shall be eligible for selection to a new, consecutive four-year term. If fifty percent (50%) or more of the vacated term remains to be served at the time of selection, the successor member shall not be eligible for another term.

The New Dentist Committee's work shall be assigned by the Board of Trustees, and reports and proposals formulated by the Committee shall be referred to the Board for decision and action. The duties of the Committee shall be to:

- a. Provide the Board of Trustees with expertise on issues affecting new dentists.
- b. Advocate to the Board of Trustees, other agencies of this Association and the tripartite dental societies the perspectives of the new dentist in the development of policies, programs, benefits and services of the Association.
- c. Identify the needs and concerns of new graduate dentists and make recommendations for any programs to assist with their transition to practice.
- d. Enhance member value, encourage involvement and active participation, and build a community of new dentists in organized dentistry.
- e. ~~Serve as non-voting members of councils and commissions of this Association on issues affecting new dentists; these appointments will be recommended by the Committee and assigned by the Board of Trustees.~~ Recommend new dentist members to serve as members of councils of this Association; these recommendations are submitted to the Board of Trustees for consideration as nominations to be forwarded to the House of Delegates.
- f. Facilitate the development of constituent and component new dentist committees and provide resources to assist constituent and component dental societies in meeting the needs of new dentists.
- g. Enhance the development of future leaders by providing and promoting leadership development opportunities and training for new dentists.

and be it further

**Resolved**, that if Resolution 7, *Amendment of the ADA Bylaws pursuant to Resolution 118H-2014* is adopted, that the following conforming changes to the foregoing ADA *Bylaws* amendments be approved for placement into the newly revised *Governance and Organizational Manual of the American Dental Association* as follows:

## **CHAPTER VIII. COUNCILS**

### **A. Members, Selections, Nominations and Elections.**

1. Composition. The composition of the councils of this Association shall be as follows:

- a. Council on Dental Education and Licensure. The Council on Dental Education and Licensure shall be composed of seventeen (17) members selected as follows:
  - i. Nominations.
    - (a) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.\*
    - (b) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.
    - (c) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.
    - (d) One (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees. \*\*
  - ii. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish such additional committees believed to be essential to carrying out its duties.
- b. Council on Scientific Affairs. The Council on Scientific Affairs shall be composed of ~~sixteen (16)~~ ~~seventeen (17)~~ eighteen (18) members, ~~fifteen (15)~~ ~~sixteen (16)~~ of whom ~~who~~ shall be selected from nominations open to all trustee districts, ~~and the current recipient of the Gold Medal Award for Excellence in Dental Research and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.~~
- c. Remaining Councils. The remaining councils of this Association shall each be composed of ~~seventeen (17)~~ eighteen (18) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.

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\* A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

\*\* As used in this Chapter of the Bylaws, the term "new dentist" means either a member of the New Dentist Committee or a dentist who graduated from dental school with a D.D.S. or a D.M.D. degree less than ten (10) years prior to the selection.

2. Term and Tenure. The term of service for new dentist members recommended by the New Dentist Committee and nominated by the Board of Trustees elected to serve on councils shall be one (1) year; however, such members shall ~~not be limited as to the number of terms that they may serve~~ to four (4) one (1) year terms of council service during the period that they are characterized as new dentists.

Dr. Barnes moved Resolution 47S-1 (*Supplement:5044a*) in lieu of Resolution 47 (*Supplement:5040*) with the Committee Recommendation to Vote Yes.

The Speaker asked if there was any discussion regarding Resolution 47S-1; there was none. The Speaker noted that adoption of Resolution 47S-1 requires a two-thirds affirmative vote. On vote, Resolution 47S-1 was adopted in lieu of Resolution 47.

**\*47H-2017. Resolved,** that the following conforming changes to the foregoing ADA *Bylaws* amendments be approved for placement into the newly revised *Governance and Organizational Manual of the American Dental Association* as follows:

## CHAPTER VIII. COUNCILS

### A. Members, Selections, Nominations and Elections.

1. Composition. The composition of the councils of this Association shall be as follows:
  - a. Council on Dental Education and Licensure. The Council on Dental Education and Licensure shall be composed of seventeen (17) members selected as follows:
    - i. Nominations.
      - (a) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.\*\*
      - (b) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.
      - (c) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.

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\* With the adoption of Resolution 7H-2017, proposed amendments to the existing Bylaws became moot and only the wording to amend the revised *Bylaws*, *Governance Manual*, and *Manual of the House of Delegates* were considered and acted on by the House of Delegates.

\*\* A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

- (d) One (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.\*
- ii. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish such additional committees believed to be essential to carrying out its duties.
- b. Council on Scientific Affairs. The Council on Scientific Affairs shall be composed of ~~sixteen (16) seventeen (17)~~ eighteen (18) members, fifteen (15) sixteen (16) of whom ~~who~~ shall be selected from nominations open to all trustee districts, ~~and the current recipient of the Gold Medal Award for Excellence in Dental Research and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.~~
- c. Remaining Councils. The remaining councils of this Association shall each be composed of ~~seventeen (17) eighteen (18)~~ members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms and one (1) new dentist member recommended by the New Dentist Committee and nominated by the Board of Trustees.
2. Term and Tenure. ~~The term of service for new dentist members recommended by the New Dentist Committee and nominated by the Board of Trustees elected to serve on councils shall be one (1) year; however, such members shall not be limited as to the number of terms that they may serve to four (4) one (1) year terms of council service during the period that they are characterized as new dentists.~~

**New Dentist Committee Liaison Assignments on Councils:** (Board of Trustees Resolution 48): The Reference Committee reported as follows:

The Reference Committee concurs with the Board of Trustees and supports adoption of the following resolution.

**48. Resolved,** that the following nominations of New Dentist Committee members to the ADA Councils be approved:

Council on Advocacy for Access and Prevention (CAAP), Dr. Colleen Greene  
 Council on Communications (CC), Dr. Andrea Fallon  
 Council on Dental Benefit Programs (CDBP), Dr. Sara Stuefen  
 Council on Dental Education and Licensure (CDEL), Dr. Jon Pascarella  
 Council on Dental Practice (CDP), Dr. Mike Saba  
 Council on Ethics, Bylaws and Judicial Affairs (CEBJA), Dr. Lindsey Compton  
 Council on Government Affairs (CGA), Dr. Robin Nguyen  
 Council on Membership (CM), Dr. Lauren Czerniak  
 Council on Members Insurance and Retirement Programs (CMIRP), Dr. Britany Matin  
 Council on Scientific Affairs (CSA), Dr. Ben Youel

Dr. Barnes moved Resolution 48 (*Supplement:5045*) with the Committee Recommendation to Vote Yes.

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\* As used in this Chapter of the Bylaws, the term "new dentist" means either a member of the New Dentist Committee or a dentist who graduated from dental school with a D.D.S. or a D.M.D. degree less than ten (10) years prior to the selection.

The Speaker asked if there was any discussion regarding Resolution 48; there was none. Hearing no objection, Resolution 48 was adopted.

**48H-2017. Resolved**, that the following nominations of New Dentist Committee members to the ADA Councils be approved:

Council on Advocacy for Access and Prevention (CAAP), Dr. Colleen Greene  
 Council on Communications (CC), Dr. Andrea Fallon  
 Council on Dental Benefit Programs (CDBP), Dr. Sara Stuefen  
 Council on Dental Education and Licensure (CDEL), Dr. Jon Pascarella  
 Council on Dental Practice (CDP), Dr. Mike Saba  
 Council on Ethics, Bylaws and Judicial Affairs (CEBJA), Dr. Lindsey Compton  
 Council on Government Affairs (CGA), Dr. Robin Nguyen  
 Council on Membership (CM), Dr. Lauren Czerniak  
 Council on Members Insurance and Retirement Programs (CMIRP), Dr. Britany Matin  
 Council on Scientific Affairs (CSA), Dr. Ben Youel

**Strategic Conference on Mid-Level Challenges:** (Ninth Trustee District Resolution 54): The Reference Committee reported as follows:

The Reference Committee appreciates the intent of this resolution and agrees with the need for timely sharing of information among the states including legislative efforts concerning workforce. However, the Committee was informed that the ADA currently provides a number of in-person forums for state dental associations to discuss workforce legislative issues and share their insights. This outreach also includes regularly scheduled conference calls with state executive directors, local PR firms and others involved in these efforts.

**54. Resolved**, that the ADA Board is urged to convene a one-day meeting at ADA Headquarters for the constituents facing mid-level legislative challenges and those who have had mid-levels approved (to include but not limited to Arizona, Florida, Kansas, Maryland, Massachusetts, Michigan, New Mexico, North Dakota, Ohio, Maine, Minnesota and Vermont) for the purpose of sharing information, identifying successful strategies, and enhancing the effectiveness of organized dentistry in meeting the challenge of state legislative efforts to establish mid-level providers, and be it further **Resolved**, that the ADA maintain and archive this information and to share with other state societies.

Dr. Barnes moved Resolution 54 (*Supplement:5061*) with the Committee Recommendation to Vote No.

As a point of information, a delegate from the floor asked for clarification from the general counsel on the Noerr-Pennington Doctrine in regards to discussing legislation versus discussing matters that could lead to antitrust issues.

In response, Mr. J. Craig Busey, general counsel, stated, "Yes, the Noerr-Pennington Doctrine is the court-created doctrine that allows competitors to engage in collective discussions and efforts to petition the government. If the efforts fall outside the petition of the government and become a collusive effort to exclude competitors, the exemption no longer applies. But as long as this resolution is dealing with legislative efforts and legislative discussions, Noerr-Pennington would protect it."

Dr. Michael Maihofer, Michigan, spoke in support of Resolution 54. He said, "...don't we, as the American Dental Association, claim that we are the leading advocate for our profession. And haven't our Washington Leadership Conference, our Presidents-Elects Conference, in fact, all of the conferences, the national [ones] that we have had, continue to identify the issue of mid-level providers as the number one issue that threatens the health of our profession? And haven't we seen that the already existing in-person forums that the Reference Committee have identified, like the SPA calls and all of the other leadership conferences, are too broad and focused to adequately address this issue? ... \$27,000 is a drop in the ADA budget. I can't think of a better way to spend our members' dues dollars. In fact, I can't think of a better way to help our members succeed. ..."

Dr. Mark E. Bronson, Ohio, chair of the Council on Government Affairs and chair of the SPA Committee, spoke against Resolution 54. He stated, "...SPA calls are your five appointed people, the chair, the vice chair of the CGA, two trustees, as well as the Council on Communications to discuss strategies and discuss things dealing with the SPA funding. ... As we strategize with utilizing our staff at the ADA office, your second resolving clause in this [resolution] discusses sharing information or having that information archived. That is consistently done at the Chicago office."

Dr. Richard A. Weinman, Georgia, moved to amend Resolution 54 in the first resolving clause by inserting the words "and any interested constituent society" after the word "Vermont" so that the first resolving clause would read:

**Resolved**, that the ADA Board is urged to convene a one-day meeting at ADA Headquarters for the constituents facing mid-level legislative challenges and those who have had mid-levels approved (to include but not limited to Arizona, Florida, Kansas, Maryland, Massachusetts, Michigan, New Mexico, North Dakota, Ohio, Maine, Minnesota and Vermont) and any interested constituent society for the purpose of sharing information, identifying successful strategies, and enhancing the effectiveness of organized dentistry in meeting the challenge of state legislative efforts to establish mid-level providers,

As a point of information, Dr. Raymond K. Martin, Massachusetts, asked what the \$27,575 dollar financial implication for Resolution 54 would cover.

In response to Dr. Martin's question, the Treasurer stated, "It is for the Board members that would like to come, as well as the five states or six states, two people on each one I think is the way it went."

In speaking to the amendment, Dr. Weinman stated, "...You don't want to wait until after legislation is introduced. You want to be working on this before it happens. ... in the state of Mississippi just recently, one of the Foundations, I don't remember if it's Pew or Kellogg, has announced its intent to set up an office there with the purpose of introducing a mid-level provider to their legislation on the upcoming year. Again, another instance where a state would be excluded in this particular language but should be attending this. It is an open forum to get the information they would need to react to these."

As a point of information, Dr. Richard D. Riddle, Connecticut, asked, "...would it be possible to get an opinion from counsel as to whether this, as the proposed amendment or original...would trigger an FTC event?"

In response to Dr. Riddle's question, Mr. Busey said, "...Whether it creates any antitrust exposure depends on the way that it's implemented, and the difficulty with any meeting that gets together for this purpose, you'd have to be very, very careful to make sure that it does not exceed the purpose of petitioning the government or discussing ways to petition the government. If when a group convenes they start to discuss ways of excluding competitors or ways to mount a boycott or to do anything else that might be more direct and might not involve petitioning the government, it does create an issue. ..."

Dr. Douglas S. Hadnot, Montana, spoke against the amendment, stating, "I'm concerned about the budget issue or the budget impact of inviting virtually all of the states to a meeting such as this that could result in a pretty high price tag."

Dr. W. Mark Donald, Mississippi, spoke in favor of the amendment, stating, "Just for clarity, those states that are listed have either faced legislative challenges or have mid-levels approved. The amendment will allow those societies that do not fit that category but may be ripe for the pickings for some of these foundations to come in, and learn the strategy and be able to implement those in their state. ..."

Dr. Mary K. Smith, Washington, moved to refer Resolution 54 to the appropriate agencies with a report back to the 2018 House of Delegates. In speaking to the motion to refer, Dr. Smith said, "... the one thing that stands out to me, is there is no date here of when we're supposed to accomplish this by—and I also am not crazy about the idea that we're going to do this at ADA Headquarters. ... I think there are other avenues ...

we've got the Lobbyist Conference, we have the Washington Leadership. Could we do something like that, as a half-day workshop where people are already going there? ..."

Pro and con discussion ensued on the motion refer. Individuals speaking in support of the motion to refer commented in favor of holding a workshop during existing conferences. Those speaking against the motion to refer commented that the conference proposed in Resolution 54 is needed immediately and cannot wait until after the 2018 House of Delegates.

A motion was made to vote immediately on the motion to refer, which requires a two-thirds vote; on vote, the motion to vote immediately was adopted. On vote, the motion to refer was not adopted.

The Speaker asked if there was any further discussion on the proposed amendment; there was none.

On vote, the proposed amendment was adopted.

As a point of information, Dr. Wade M. Banner, California, asked what the financial implication would be if two representatives from every state were to attend the conference proposed in Resolution 54.

In response to Dr. Banner's question, the Treasurer stated that the estimated financial implication would be \$150,000 dollars.

Dr. Margaret S. Gingrich, Michigan, spoke in support of Resolution 54, as amended, stating, "In many states, dentistry is under siege. An example is in Michigan. The mid-level provider bill has passed our Senate and is in our House Committee. We are having to slowly call and network at meetings our contacts in other states to see what has worked and what has not worked, as well as how Pew and Kellogg are trying to introduce this in other states. Since our bill passed through the Committee and the Senate in less than three weeks, it would have been helpful to have access to successful strategic plans from other states."

As a point of information, Dr. John J. Mooney, Connecticut, asked what the financial implication would be if the states covered the cost of airfare and hotel for their representatives.

In response to Dr. Mooney's question, the Treasurer stated that the estimated financial implication would be reduced by \$50,000 dollars if states paid for the transportation and hotel costs.

As a point of information, Dr. Zacharias J. Kalarickal, Florida, asked for clarification on the availability of funds for a conference. He asked, "...if we run out of money, doesn't that limit who is going to be able to attend the conference."

In response to Dr. Kalarickal's question, the Treasurer responded that if the intent of the Resolution is to invite all states to attend a meeting, then the meeting would be budgeted accordingly. He stated, "...If the intention is to have the main states there for sure but all states invited on their own dollar, that's how we'll budget. So the intention of the resolution, it appears to me, is you are inviting all states to be there. Now, I also want to say that we're getting into a range, we are not an exclusive organization. So if there is 50 states and a hundred people plus a hundred people, we're going to—we're going to make sure they're funded and will go into using deficits to do that. We don't want to exclude something like this."

As a point of information, Dr. Fredrick P. Babinowich, New Jersey, asked if a legal challenge would be more likely if the conference was national with all states invited to attend.

In response to Dr. Babinowich's question, Mr. Busey stated, "The likelihood of exposure, the possibility of exposure, increases dramatically each time you talk about increasing the size of the group or increasing the scope of the discussion. ... If you're talking about states for which there is no legislative challenge, if I were on the other side of this issue, I would argue that your meeting must be for more than legislative challenges. ... So I think that there is a more significant risk the broader that the meeting becomes and the more possibility you have for other things to discuss rather than legislative strategy."

Dr. Christopher T. Gorecki, Michigan, moved to amend Resolution 54 by adding a resolving clause between the first and second resolving clauses which would read as follows:

**Resolved**, that the states cover the travel and lodging expenses for their representatives, and be it further

Dr. Gorecki stated, "... we're doing too much work in regards to all of the budgetary processes. This will limit the extent of all of the problems that are added."

Pro and con discussion on the proposed amendment ensued.

As a point of information, Dr. Mark B. Hughes, Arizona asked, "Could I get clarification on what resources and measures are being taken right now to deal with this problem? ... would a meeting like this do anything at all?"

In response to Dr. Hughes' question, Mr. Michael Graham, senior vice president, Government and Public Affairs, stated, "Right now for the workforce states, we hold biweekly phone calls. Very often there are calls in between those calls so that we're actually talking to those states more than every other week. We hold biweekly calls with all the workforce states to talk about legislative solutions, and then we do have opportunities at some of our meetings, and we have taken those up if need to talk at the Lobbyist Conference, Lobby Day and even at this meeting. So three significant areas."

In response to a question, Mr. Busey stated, "...It's your meeting, and you can invite who you like. And I assume that the people that you would want to be inviting, if they are the state representatives, would be the ones who are advocates of our position and opponents of the mid-level providers. So that shouldn't be an issue ... it doesn't have to be an open meeting to the entire public."

A motion was made to vote immediately on the proposed amendment, which requires a two-thirds vote; on vote, the motion to vote immediately was adopted.

On vote, the proposed amendment was adopted.

Pro and con discussion on the Resolution, as amended, ensued. Individuals speaking in support of the Resolution, as amended, commented that the conference proposed in the Resolution follows ADA policy that the ADA actively participate in discussions involving dental workforce issues. Individuals speaking in support also commented that a conference is needed so that dentists facing challenges related to mid-level providers could meet face-to-face with dentists from states that have experienced these challenges. Individuals speaking against the Resolution, as amended, commented that holding a conference would not be effective and that resources are currently available to assist states facing mid-level provider challenges. Further, states experienced with mid-level provider challenges could continue efforts in assisting other states without the need for a conference.

Dr. Andrea Richman, Massachusetts, moved to amend Resolution 54 in the first resolving clause by replacing the words "mid-level legislation" with the word "workforce," and deleting all of the words following "organized dentistry" so that the amended first resolving clause would read as follows:

**Resolved**, that the ADA Board is urged to convene a one-day meeting at ADA Headquarters for the constituents facing ~~mid-level legislative~~ workforce challenges and those who have had mid-levels approved (to include but not limited to Arizona, Florida, Kansas, Maryland, Massachusetts, Michigan, New Mexico, North Dakota, Ohio, Maine, Minnesota and Vermont) and any interested constituent society for the purpose of sharing information, identifying successful strategies, and enhancing the effectiveness of organized dentistry ~~in meeting the challenge of state legislative efforts to establish mid-level providers,~~

In speaking to the amendment, Dr. Richman stated, "...I think this would, number one, improve the optics; and, number two, make it clear that we're discussing workforce challenges and possible solutions."



As a point of information, Dr. Michael H. Halasz, Ohio, said, "I am concerned that we're kind of having this discussion with the possibility that there could be members of Pew or Kellogg in the room. Do I need to be concerned about that? And is that a legal issue?"

In response to Dr. Halasz' question, Mr. Busey said, "No. I don't think so. The discussion you're having is one that is a legitimate discussion. If you're are going to have a meeting solely for the purpose of receiving legal advice, then that would be something you would need to clear the room of anybody else. The discussion, as I have heard it so far, doesn't create that concern for me. ..."

Dr. Stanley D. Halpern, Georgia, requested that the word "legislative" remain in the first resolving clause so that the proposed amendment would read as follows:

**Resolved**, that the ADA Board is urged to convene a one-day meeting at ADA Headquarters for the constituents facing ~~mid-level~~ legislative workforce challenges and those who have had mid-levels approved (to include but not limited to Arizona, Florida, Kansas, Maryland, Massachusetts, Michigan, New Mexico, North Dakota, Ohio, Maine, Minnesota and Vermont) and any interested constituent society for the purpose of sharing information, identifying successful strategies, and enhancing the effectiveness of organized dentistry ~~in meeting the challenge of state legislative efforts to establish mid-level providers,~~

Hearing no objection, the Speaker declared that the word "legislative" would remain, as requested by Dr. Halpern.

On vote, the proposed amendment was not adopted.

A motion was made to vote immediately on Resolution 54, as amended, which requires a two-thirds vote; on vote, the motion to vote immediately was adopted.

On vote, Resolution 54, as amended, was not adopted.

**Strengthening the State Public Affairs (SPA) Program:** (Eleventh Trustee District Resolution 61): The Reference Committee reported as follows:

In recent years the states have faced increased legislative challenges on a variety of issues, including workforce issues, which have occasionally warranted additional funding for the SPA program. The Reference Committee heard compelling testimony that the Board of Trustees has always responded quickly to requests for funds made by states through the SPA Oversight Committee. Therefore, the Reference Committee believes that the current approval process works well and that the resolution for additional funding in the SPA program budget is not necessary.

**61. Resolved**, that the 2018 Budget be amended to increase the "Grants and Awards" expense line of the proposed 2018 Annual Budget from \$2,627,000 to \$3,027,000 to provide an additional \$400,000 for SPA grants to state dental associations.

Dr. Barnes moved Resolution 61 (*Supplement:5062*) with the Committee Recommendation to Vote No.

Dr. Bruce D. Grbach, Ohio, spoke against Resolution 61. He said, "Facing challenges to our profession in the legislative arena is not about throwing money at them. We will always be hard pressed to spend more money than entities like Kellogg and Pew. Successful defense of our profession in the legislative arena begins and ends with building strong relationships with legislators before significant issues are placed before them. ... I challenge my colleagues to build better relationships with their legislators instead of waiting for events to happen and trying to outspend them."

Dr. David C. Lurye, Colorado, spoke in support of Resolution 61, stating, "...We have small legislators that a lot of the anti's, and I'm not talking about non-dentist people, just anti's, anti-amalgam, anti-fluoride, come and infiltrate. We have a tough time fending that off. ... We need to have a little bit of a war chest so that we can come away from here saying we're ready. ..."

A motion was made to vote immediately, which requires a two-thirds vote; on vote, the motion to vote immediately was adopted.

On vote, Resolution 61 was not adopted.

### **Adjournment**

Dr. Shakalpi R. Pendurkar, California, moved to adjourn the Second Meeting of the House of Delegates. Without objection, the Speaker declared the Second Meeting of the ADA House of Delegates adjourned at 12:40 p.m., Monday, October 23, 2017.

**Monday, October 23, 2017**

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### **Third Meeting of the ADA House of Delegates**

**Call to Order:** The Third Meeting of the 158th Annual Session of the ADA House of Delegates was called to order at 1:47 p.m., Monday, October 23, 2017, by the Speaker of the House of Delegates, Dr. Glen D. Hall.

### **Special Order of Business—Installation Ceremony**

Prior to the installation ceremony, the Speaker recognized the following retiring ADA officers and trustees and thanked them for their service and dedication.

Dr. Irene Marron-Tarrazzi, first vice president  
 Dr. Andrew J. Kwasny, trustee, Third District  
 Dr. Alvin W. Stevens, Jr., trustee, Fifth District  
 Dr. Gary E. Jeffers, trustee, Ninth District

The Speaker also introduced the continuing members of the Board of Trustees and thanked them for their service on behalf of the profession.

Dr. Judith M. Fisch, trustee, First District  
 Dr. Chad P. Gehani, trustee, Second District  
 Dr. W. Roy Thompson, trustee, Sixth District  
 Dr. Billie Sue Kyger, trustee, Seventh District  
 Dr. Robert N. Bitter, trustee, Eighth District  
 Dr. Kenneth McDougall, trustee, Tenth District  
 Dr. Rickland G. Asai, trustee, Eleventh District  
 Dr. Raymond A. Cohlma, trustee, Twelfth District  
 Dr. Lindsey A. Robinson, trustee, Thirteenth District  
 Dr. Daniel J. Klemmedson, trustee, Fourteenth District  
 Dr. Richard C. Black, trustee, Fifteenth District  
 Dr. Kirk M. Norbo, trustee, Sixteenth District  
 Dr. Cesar R. Sabates, trustee, Seventeenth District  
 Dr. G. Lewis Mitchell, Jr., first vice president  
 Dr. Ronald P. Lemmo, treasurer  
 Dr. Kathleen T. O'Loughlin, executive director

The Speaker introduced Dr. Gary L. Roberts for the purpose of installing the new officers and trustees.

The following new officers and trustees were introduced:

Dr. Linda K. Himmelberger, trustee, Third District  
 Dr. George R. Shepley, trustee, Fourth District  
 Dr. John F. Harrington, Jr., trustee, Fifth District  
 Dr. Julio H. Rodriguez, trustee, Ninth District  
 Dr. Richard A. Huot, second vice president

*Installation of Officers and Trustees.* Dr. Roberts installed Dr. Jeffrey M. Cole, Delaware, as ADA President-elect; Dr. Joseph P. Crowley, Ohio, as ADA President; Dr. Richard Huot, Florida, as second vice president; and Drs. Linda Himmelberger, George Shepley, John Harrington and Julio Rodriguez as trustees. Dr. Roberts extended congratulations to the new officers and trustees.

Additionally, Dr. Roberts asked the members of the House of Delegates, and they collectively agreed, to pledge their support by accepting assignments when called upon, by bringing forward the opinions and concerns of the members in their districts and by engaging in open and honest debate on issues.

**Presentation to Dr. Roberts:** Dr. Crowley, as the newly installed ADA President, presented Dr. Roberts with the insigne of past president and a certificate of appreciation recognizing his dedication to the Association and the dental profession.

**Presentation of Dr. Joseph Crowley:** Dr. Crowley addressed the members of the House of Delegates. He thanked his wife Pauletta, his children and grandchildren and his office staff who were in attendance. His remarks focused on the strength of communities, mentoring new dentists and the importance of dentistry in overall health. He stated, "We have to claim our place in a larger society as a major player in health care, not just dental health but overall health. ... We have to step up in new ways to advocate for our higher goals that contribute to this big world in which we live, not just our dental world. We, as dentists, must be heard. We need to look at our role in society differently. ... It's about being a bigger part of conversations about health. It's about making sure that people who need care get care."

Dr. Crowley listed three areas of commitment: working closely with peer organizations, carving out a new role for dentists in the national conversation about overall health and setting big goals to constantly improve all we do. He concluded by stating, "Let's take what we know, take what we have and use our skills. Let's use our God given talents to continue to affect the people that are around us. ... We can make this difference in the world by just being dentists. Now let's step outside ourselves, take the risk and be bold and have courage. Let's make that difference in this world a big difference."

The installation ceremony concluded following Dr. Crowley's remarks.

**Remarks of the Chair of the American Dental Political Action Committee (ADPAC):** Dr. Richard F. Andolina expressed appreciation to members of the House of Delegates for their generous donations as well as the many others who donated to ADPAC during the annual meeting.

**Report of the Standing Committee on Credentials, Rules and Order:** Dr. David M. Ku, Committee chair, announced the presence of a quorum and read the ADA Disclosure Policy.

## Unfinished Business

### Report of Reference Committee A (Continued)

Dr. Chad R. Leighty, chair, Reference Committee A, returned to the podium to present the Reference Committee's remaining items of business.

**Proposed Council Restructure (Continued)** (Council on Members Insurance and Retirement Programs Resolution 49):

Dr. Paul R. Miller, Florida, moved to withdraw the amendment to Resolution 49, which he proposed during the second meeting of the House of Delegates. Hearing no objection, the Speaker announced the amendment withdrawn.

Dr. Paul R. Miller, Florida, moved to amend the fourth resolving clause, by deleting CHAPTER VIII. COUNCILS, Section A.1.b., of the *Governance and Organizational Manual of the American Dental Association* as follows:

~~b. Council on Members Insurance Retirement Program. The Council on Members Insurance Retirement Programs shall be composed of nine (9) active, life or retired members who are selected from nominations open to all trustee districts whose terms of office shall be staggered in such a manner that three (3) members will complete their terms each year.\*~~

~~\* In order to establish the Council's revised composition, the Council members in office at the time this footnote becomes effective shall finish their terms in accordance with their scheduled completion dates. For each of the service term years of 2018-2019 through 2020-2021, 3 new members shall be selected for nomination by the Board of Trustees for three-year service terms in order to achieve the new 3-year rotational pattern. This footnote shall expire at adjournment sine die of the 2021 House of Delegates.~~

and inserting new language, so that CHAPTER VIII. COUNCILS, Section A.1.b. would read as follows:

- b. Council on Members Insurance Retirement Program. The Council on Members Insurance Retirement Programs shall be composed of eighteen (18) skills-based members, one from each trustee district and one new dentist recommended by the New Dentist Committee and nominated by the Board of Trustees.

In speaking to the amendment, Dr. Miller stated, "I feel reducing the size of the Council does not solve any problems or make the Council more efficient. ... there is minimal cost savings by reducing the size, and the costs are not paid for from the operating budget, but indirectly through the insurance plans. CMIRP is responsible for one of the best and most used member benefits of the Association, and it's one of the strongest and most important in the areas of non-dues revenue. ... it is incumbent on every district to be represented when this much money is involved. ... It is important that if and when an association health plan is developed, that states with plans do not have their non-dues revenue affected and states or districts without plans are not thrown under the bus. Every district needs a seat at the table for development of a good health care plan with such broad reaching effects."

Pro and con discussion on the proposed amendment ensued. Individuals speaking in support of the amendment commented that it was important for each district to have representation on the Council. Individuals speaking against the amendment commented that a workgroup was commissioned to assess the size, structure, geographic representation and composition of the Council and recommended that the Council be skills-based and composed of nine members.

In response to a question, the Speaker confirmed that a new dentist member would serve on the Council regardless of whether or not the proposed amendment is adopted.

A motion was made to vote immediately on the proposed amendment, which requires a two-thirds vote; on vote, the motion to vote immediately was adopted.

On vote the proposed amendment was not adopted.

The Speaker asked if there was any further discussion on Resolution 49; there was none. The Speaker noted that adoption of Resolution 49 requires a two-thirds affirmative vote. On vote, Resolution 49 was adopted.

**\*49H-2017. Resolved**, that the following conforming changes to the foregoing ADA *Bylaws* amendments be approved for placement into the newly proposed CHAPTER VIII. COUNCILS, Sections A.1., E. and F (second paragraph) of the *Governance and Organizational Manual of the American Dental Association* (Insertions double underlined, deletions ~~double struck~~):

## **CHAPTER VIII. COUNCILS**

### **A. Members, Selections, Nominations and Elections.**

#### **1. Composition.** The composition of the councils of this Association shall be as follows:

##### **a. Council on Dental Education and Licensure.** The Council on Dental Education and Licensure shall be composed of sixteen (16) members selected as follows:

##### **i. Nominations.**

- (a) Eight (8) members shall be nominated by the Board of Trustees on a rotational system by trustee district from the active, life or retired members of this Association, no one of whom shall be a full-time member of a faculty of a school of

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\* With the adoption of Resolution 7H-2017, proposed amendments to the existing Bylaws became moot and only the wording to amend the revised *Bylaws*, *Governance Manual*, and *Manual of the House of Delegates* were considered and acted on by the House of Delegates.

dentistry, a current dental examiner or member of a state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.\*

- (b) Four (4) members who are active, life or retired members of this Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.
- (c) Four (4) members who are active, life or retired members of this Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be current dental examiners or members of any state or regional testing agency, state board of dentistry or jurisdictional dental licensing agency.
- ii. Committees. The Council on Dental Education and Licensure shall establish a standing Committee on Dental Education and a standing Committee on Licensure, each consisting of eight (8) members selected by the Council. The Council may establish such additional committees believed to be essential to carrying out its duties.
- b. Council on Members Insurance Retirement Program. The Council on Members Insurance Retirement Programs shall be composed of nine (9) active, life or retired members who are selected from nominations open to all trustee districts whose terms of office shall be staggered in such a manner that three (3) members will complete their terms each year.\*\*
- c. Council on Scientific Affairs. The Council on Scientific Affairs shall be composed of sixteen (16) members who shall be selected from nominations open to all trustee districts, and the current recipient of the Gold Medal Award for Excellence in Dental Research.
- d. Remaining Councils. The remaining councils of this Association shall each be composed of seventeen (17) members, one (1) member from each trustee district whose terms of office shall be staggered in such a manner that four (4) members will complete their terms each year except every fourth year when five (5) members shall complete their terms.

\* \* \* \* \*

E. Term of Office. Except for members of the Council on Members Insurance and Retirement Programs whose term of office shall be three (3) years, the term of office of members of councils shall be four (4) years except as otherwise provided in the *Bylaws* or this *Governance Manual*. Except for members of the Council on Members Insurance and Retirement Programs whose tenure on the council shall be limited to two terms of three (3) years, the ~~The~~ tenure of a member of a council shall be limited to one (1) term of four (4) years except as otherwise provided in the *Bylaws* or this *Governance Manual*. The current recipient of the Gold Medal Award for Excellence in Dental Research shall serve on the Council on Scientific Affairs until the award is bestowed on the next honoree.

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\* A person shall be considered to be a full-time member of a faculty if he or she works for the school of dentistry more than two (2) days or sixteen (16) hours per week.

\*\* In order to establish the Council's revised composition, the Council members in office at the time this footnote becomes effective shall finish their terms in accordance with their scheduled completion dates. For each of the service term years of 2018-2019 through 2020-2021, 3 new members shall be selected for nomination by the Board of Trustees for three-year service terms in order to achieve the new 3-year rotational pattern. This footnote shall expire at adjournment sine die of the 2021 House of Delegates.

If the term of the vacated council position has less than fifty percent (50%) of a full ~~four-year~~ term remaining at the time the successor member is appointed or elected, the successor member shall be eligible for election to a new ~~four-year~~ term. If fifty percent (50%) or more of the vacated term remains to be served at the time of the appointment or election, the successor member shall not be eligible for another term.

#### **Approval of the 2018 Budget** (Board of Trustees Resolution 22)

The Treasurer, Dr. Ronald Lemmo, reported that the preliminary budget presented a surplus of \$134,000. With the financial implications of the House adopted resolutions, the 2018 budget resulted in a deficit of \$64,000.

On vote, Resolution 22 was adopted.

**22H-2017. Resolved**, that the 2018 Annual Budget of revenues and expenses, including net capital requirements be approved.

#### **Establishment of Dues Effective January 1, 2018:** (Board of Trustees Resolution 23): The Reference Committee report as follows:

The Reference Committee heard no testimony regarding the 2018 dues. The Reference Committee supports no dues increase as recommended by the Board of Trustees.

**23. Resolved**, that the dues of ADA active members shall be \$532.00, effective January 1, 2018.

Dr. Leighty moved Resolution 23 (*Supplement:2061*) with the Committee Recommendation to Vote Yes.

Resolution 23 required a sixty percent affirmative vote.

On vote, Resolution 23 was adopted.

**23H-2017. Resolved**, that the dues of ADA active members shall be \$532.00, effective January 1, 2018.

#### **Concluding Remarks of the Speaker:** The Speaker made the following statement:

The actions of this House of Delegates are no longer the opinions, wishes or suggestions or recommendations of any individual, committee or officer but are now the actions of the entire House of Delegates. And as this House of Delegates is authorized under the Association's *Bylaws* to act for the entire association, they are the actions of the entire Association. It is now incumbent upon every member of this Association to accept the actions of this House of Delegates as the actions of the American Dental Association.

**Recognition of Retiring Delegates and Alternate Delegates:** The Speaker requested that all retiring delegates and alternate delegates stand; the House applauded the individuals in recognition of their service.

#### **Adjournment**

Dr. Joelle Abed-Elahad, Michigan, moved to adjourn the 158th Annual Session of the ADA House of Delegates. Without objection, the Speaker declared the 158th Annual Session of the ADA House of Delegates adjourned *sine die* at 3 p.m. on Monday, October 23, 2017.

Notes



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## Continuing Education Program

Notes

# Continuing Education Program

Georgia World Congress Center, Atlanta, Georgia

October 19–22, 2017

The 2017 Annual Meeting Continuing Education Program was held October 20–22, 2017 at the Georgia World Congress Center.

The continuing education program was under the direction of the Committee on Annual Meetings and composed of the following members:

David J. Fulton, Jr., Chair, Waukegan, Illinois; Alvin W. (Red) Stevens, Jr., 5th District, 2017 Board of Trustees Liaison, Birmingham, Alabama; J. Jerald Boseman, Jr., Salt Lake City, Utah; William H. Bragdon, Greenville, South Carolina; Henry F. (Bud) Evans, III, 2018 Continuing Education Chair-Designate, Chewelah, Washington; Charles B. Foy, Jr., Madisonville, Louisiana; Raymond A. Jarvis, 2018 NDC Consultant, non-voting member, Shreveport, Louisiana; Paul F. Kirkegaard, Jr., Saint Paul, Minnesota; Howard I.A. Lieb, 2018 General Chair-Designate, Staten Island, New York; Calbert M.B. Lum, 2018 Hawaii CLA General

Chair, non-voting member, Honolulu, Hawaii; C. Roger Macias, Jr., 2019 General Chair-Designate, San Antonio, Texas; Sara J. Perrone, 2017 ASDA Liaison, non-voting member, Buffalo, New York; Stephen T. Radack, Erie, Pennsylvania; Andrea Richman, Newton Centre, Massachusetts; David L. Rothman, San Francisco, California; Kevin M. Sloan, Ann Arbor, Michigan; Karyn L. Stockwell, 2017 CLA General Chair, Kennesaw, Georgia; Wayne T. Tadsen, Lawrenceville, Georgia; Beatriz E. Terry, Miami, Florida; Nanette C. Tertel, 2019 Continuing Education Chair-Designate, Toledo, Ohio; Nipa R. Thakkar, 2017 NDC Liaison, non-voting member, Wilkes Barre, Pennsylvania; Douglas A. Wyckoff, 2017 Continuing Education Chair, Cameron, Missouri; Catherine H. Mills, director, Chicago, Illinois

The following were presenters for the 2017 Continuing Education Program:

Abdel-Fattah, Reda  
Abt, Elliot  
Alonge, John  
Araujo, Marcelo  
Aschheim, Kenneth  
Bader, Herbert  
Barsley, Robert  
Bashinelli, Chris  
Baum, Jim  
Behrendt, Kirk  
Benjamin, Scott  
Berley, Ken  
Berman, Marvin  
Blair, Charles  
Blanton, Alan  
Boghossian, Alan  
Bona, Richard  
Borysewicz, Mary  
Bowen, Gregory  
Brady, Lee Ann  
Brennan, Leonard  
Brucia, Jeff  
Budenz, Alan  
Bulnes, Christopher  
Butler, Brian

Caperila, Lillian  
Cardoza, Anthony  
Carrasco-Labra,  
Alonso  
Carr, Colin  
Carroll, John  
Carstensen, Steve  
Caruso, Timothy  
Chambers, Mark  
Chevalier, Jennifer  
Chong, Chol  
Christensen, Gordon  
Clough, Sharon  
Collins, Fiona  
Connor, Margaret  
Convissar, Robert  
Cram, Sally  
Crossley, Harold  
Daley, Ellen  
Dayries-Ling, Amy  
Delgado, Alex  
Dewhirst, Nancy  
Dexter, William  
DiBona Pastan,  
Christina

Dobrin, Lawrence  
Doring, Charles  
Dufu, Tiffany  
DuVall, Nicholas  
Easty, Dan  
Ehrlich, Todd  
El Gazzar, Dahlia  
Engelhardt-Nash,  
Debra  
Carter, Pat  
Fathi, Nava  
Favagehi, Mehrdad  
Feuerstein, Paul  
Fiorellini, Joseph  
Fletcher, Molly  
Fontana, Margherita  
Francis, Lee  
Frazer, Robert  
Fukuoka, Brooke  
Gambardella, Ellen  
Gardiner, Mitchell  
Geiermann, Steven  
Geisinger, Maria  
Geissberger, Marc  
Glickman, Gerald

Glick, Michael  
Goldstein, Ronald  
Gonzales, Theresa  
Graeber, John  
Gremillion, Henry  
Gross, Neil  
Grover, Jane  
Grudmeier, Laura  
Haas, Manor  
Hawkins, Mel  
Haywood, Van  
Hemsley, Jason  
Herman, Gary  
Hicks, Lauri  
Hofstede, Theresa  
Homicz, Alphonse  
Horowitz, Alice  
Hutcheson,  
Katherine  
Hyman, Mark  
Jablow, Marty  
Jaecks, Kelli  
Jellerson, Jeffrey  
Junker, Michele  
Kachalia, Parag

Kim, Jeffrey	Pleva, David	Williamson, Gail
King, Tim	Pollick, Howard	Woodburn, Bill
Kleive, Mark	Potter, Brad	Young, Matthew
Kohner, James	Preble, Dave	Zablotsky, Nevin
Leary, Paul	Raman, Prabu	Zahrebelny, Olya
Lemke, Kelly	Ramondetta, Lois	
Letwin, Noah	Ramos-Gomez,	
Levine, Mitchell	Francisco	
Levin, Roger	Rasner, Steven	
Limoli, Tom	Rathi, Nakul	
Little, David	Ratner, Craig	
Low Dog, Tieraona	Riepe, Amanda	
Malcmacher, Louis	Riepe, Andrew	
Maleki, Nahid	Rhodes, S. Craig	
Mariotti, Angelo	Rice, David	
Markowitz, Lauri	Robbins, Heather	
Massad, Joseph	Roble, Richard	
McCamish,	Rosenthal, Nancy	
DeWayne	Rubinstein, Mitchell	
McGinley, Jane	Sanders, Emme	
McNickle, Ian	Severance, Gary	
McRay, Brett	Sharifi, Nader	
Merijohn, George	Shatz, Peter	
Miles, Dale	Shea, Gavin	
Miller, Jonathan	Short, Rico	
Miller, Kim	Silverstein, Lee	
Miller, Raymond	Slayton, Rebecca	
Minichetti, John	Smith, James	
Miraglia, Benedict	Smith, Pamela	
Molinari, John	Snyder, Steven	
Morell, Maritza	Spencer, Jamison	
Morgan, Jaimee	Spolarich, Ann	
Morrow, Sabrina	Straub-Morarend,	
Muller, Susan	Cheryl	
Nager, Martin	Strong, Samuel	
Nash, Ross	Stuefen, Sara	
Neely, Christine	Sturgis, Erich	
Norton, Kordell	Sutter, Julie	
Nosti, John	Sutton, Matt	
Novy, Brian	Suzuki, Jon	
Odiatu, Uche	Suzuki, Kevin	
Oromchian, Ali	Tanaka, Terry	
Padilla, Ray	Thikkurissy, Sarat	
Pansick, Ethan	Varga, Glennine	
Parkinson, Jay	Vujicic, Marko	
Parks, Edwin	Waguespack, Dennis	
Patel, Mayoer	Walker, Desiree	
Paumier, Thomas	Wall, Rachel	
Peterson, Douglas	Watrous, Trent	
Phillips, Wendy	Wharton, Melinda	
Plankers, Tammara	Williams, John	

## Directory

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### Officers, Trustees, Senior Staff, Councils, Commissions, Committee on Local Arrangements

#### Officers

Roberts, Gary L., *president*,  
Shreveport, Louisiana  
Crowley, Joseph P.,  
*president-elect*,  
Cincinnati, Ohio  
Marron-Tarrazzi, Irene, *first*  
*vice president*, Miami,  
Florida  
Mitchell, G. Lewis, Jr.,  
*second vice president*,  
Gadsden, Alabama  
Hall, Glen D., *speaker*,  
*House of Delegates*,  
Abilene, Texas  
Lemmo, Ronald P., *treasurer*,  
Wickliffe, Ohio  
O'Loughlin, Kathleen T.,  
*executive director and*  
*secretary*, Chicago,  
Illinois

#### Trustees

Asai, Rickland G., 2018,  
*Eleventh District*,  
Portland, Oregon  
Bitter, Robert N., 2018,  
*Eighth District*,  
Edwardsville, Illinois  
Black, Richard C., 2019,  
*Fifteenth District*, El  
Paso, Texas  
Cohlma, Raymond A., 2019,  
*Twelfth District*,  
Oklahoma City,  
Oklahoma  
Cole, Jeffrey M., 2017,  
*Fourth District*,  
Wilmington, Delaware  
Fisch, Judith M., 2019,  
*First District*, Rutland,  
Vermont  
Gehani, Chad P., 2018  
*Second District*,  
Jackson Heights, New  
York  
Jeffers, Gary E., 2017,  
*Ninth District*, Northville,  
Michigan

Kwasny, Andrew J., 2017,  
*Third District*, Erie,  
Pennsylvania  
Kyger, Billie Sue, 2020,  
*Seventh District*,  
Gallipolis, Ohio  
McDougall, Kenneth, 2020,  
*Tenth District*,  
Jamestown, North  
Dakota  
Norbo, Kirk M., 2020,  
*Sixteenth District*,  
Purcellville, Virginia  
Robinson, Lindsey, 2018  
*Thirteenth District*,  
Grass Valley, California  
Sabates, Cesar R., 2020,  
*Seventeenth District*,  
Coral Gables, Florida  
Stevens, Alvin W., Jr., 2017,  
*Fifth District*,  
Birmingham, Alabama  
Thompson, Roy, 2020,  
*Sixth District*,  
Murfreesboro,  
Tennessee

#### Senior Staff

Araujo, Marcelo, vice  
president, Science  
Institute  
Bowman, Jerome K., chief of  
governance and strategy  
management  
Busey, J. Craig, general  
counsel  
Fleeks, Judith, vice president,  
Human Resources  
Goodman, James S., vice  
president, Conferences  
and Continuing  
Education  
Graham, Michael A., senior  
vice president,  
Government and Public  
Affairs  
Mark, Toni, chief technology  
officer

Moritz, Stephanie, chief  
communications officer  
Preble, David M., vice  
president, Practice  
Institute  
Robinson, Bill, vice president,  
Member and Client  
Services  
Sholty, Paul, chief financial  
officer  
Springer, Michael D., senior  
vice president, Business  
and Publishing  
Vujicic, Marko, chief  
economist and vice  
president, Health Policy  
Institute  
Willey, James L., senior  
director, Practice Institute  
Ziebert, Anthony J., senior  
vice president,  
Education/Professional  
Affairs

#### Councils

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##### Advocacy for Access and Prevention

Soderstrom, Andrew P.,  
2017, *chair*, Modesto,  
California  
Fagan, Timothy R., 2018,  
*vice chair*, Enid,  
Oklahoma  
Bradberry, Robert D., 2020,  
Marietta, Georgia  
Casamassimo, Paul S., 2020,  
Columbus, Ohio  
Cashion, Scott W., 2018,  
Greensboro, North  
Carolina  
Gerlach, William H., 2018,  
Plano, Texas

Greene, Colleen, Milwaukee, Wisconsin\*

Herman, Richard P., 2019, New Windsor, New York

Humenik, Mark J., 2020, Northbrook, Illinois

Jones, Shelly F., 2017, Midland, Michigan

Koday, Mark, 2019, Yakima, Washington

LoMonaco, Carmine J., 2020, West Caldwell, New Jersey

Nunokawa, Neil C., 2017, Wailuku, Hawaii

Peckosh, Valerie B., 2017, Dubuque, Iowa

Risner-Bauman, Alicia, 2019, Horseheads, New York

Stevenson, Richard A., 2020, Jacksonville, Florida

Switzer-Nadasdi, Rhonda, 2018, Brentwood, Tennessee

Wasserman, 2019, Michael H., Pittsfield, Massachusetts

Grover, Jane S., *director* Chicago, Illinois

### Communications

Herre, Craig W., 2017, *chair*, Leawood, Kansas

Reich, Robin S., 2018, *vice chair*, Smyrna, Georgia

Bean, Canise Y., 2018, Columbus, Ohio

Carney, Kerry K., 2020, Benicia, California

Hall, Jeannette Peña, 2020, Coral Gables, Florida

Hanley, Yvonne S., 2018, Fergus Falls, Minnesota

Hight, James R., Jr., 2017, Jackson, Tennessee

Iuorno, Frank P., Jr., 2020, Glen Allen, Virginia

Karp, William H., 2019, Fayetteville, New York

Kenyon, David J., 2019, Altoona, Wisconsin

Lindemann, Kurt S., 2018, Kalispell, Montana

Manzanares, David J., 2020, Albuquerque, New Mexico

Meinecke, Gigi, 2019, Potomac, Maryland

Poteet, Sarah, 2020, Dallas, Texas

Quartey, Tricia, Brooklyn, New York\*

Schefke, Philip L., 2019, Woodridge, Illinois

Tauberg, James A.H., 2017, Pittsburgh, Pennsylvania

Woods, Karl P., 2017, Houlton, Maine

MacLachlan, Janine, *director*, Chicago, Illinois

### Dental Benefit Programs

Riggins, Ronald D., 2017, *chair*, Moline, Illinois

Snyder, Steven I., 2018, *vice chair*, St. James, New York

a'Becket, Thomas R., 2020, Millersville, Maryland

Bulnes, Christopher M., 2019, Tampa, Florida

Calitri, Paul, 2020, West Greenwich, Rhode Island

Chung, Kenneth L., 2020, Milwaukie, Oregon

Davenport, C. Scott, 2018, Charlotte, North Carolina

Dean, Brittany T., Edmonds, Washington\*

Eder, B. Scott, 2017, South Charleston, West Virginia

Gordon, Douglas J., 2017, El Sobrante, California

Hamel, David, 2018, Marysville, Kansas

Hill, Steven J., 2017, Lubbock, Texas

Hollingsworth, James W., 2020, Newton, Mississippi

Kessler, Brett H., 2019, Denver, Colorado

Makowski, Martin J., 2019, Clinton Township, Michigan

Mihalo, Mark J., 2019, Ogden Dunes, Indiana

Olenwine, Cynthia, 2020, Nazareth, Pennsylvania

Vaillant, Matthew J., 2018, Farmington, Minnesota

Aravamudhan, Krishna, *director*, Chicago, Illinois

### Dental Education and Licensure

Price, Jill M., 2017, (ADA), *chair*, Portland, Oregon

Glickman, Gerald N., 2018, (ADEA), *vice chair*, Dallas, Texas

Aksu, Mert N., 2019, (ADEA), Detroit, Michigan

Boden, David F., 2020, (ADA), Port Saint Lucie, Florida

Cassella, Edmund A., 2019, (ADA), Honolulu, Hawaii

Donoff, R., Bruce, 2020, (ADEA), Boston, Massachusetts

Edgar, Bryan C., 2018, (AADB), Federal Way, Washington

Gehani, Rekha C., 2020, (ADA), Jackson Heights, New York

Gesek, Daniel J., Jr., 2017, (AADB), Jacksonville, Florida

Halpern, David F., 2018, (ADA), Columbia, Maryland

Hebert, Edward J., 2018, (ADA), Lake Charles, Louisiana

Korzeb, Jennifer, 2019, (ADA), Methuen, Massachusetts

Moser, Ronald F., 2019, (AADB), Bowie, Maryland

Pascarella, Jonathan, Red Bluff, California\*

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\* New Dentist Committee member without the power to vote.

Raman, Prabu, 2017, (ADA),  
Kansas City, Missouri  
Sarrett, David C., 2017,  
(ADEA), Richmond,  
Virginia  
Shaffer, Marybeth, 2020,  
(AADB), Columbiana,  
Ohio  
Hart, Karen M., *director*,  
Chicago, Illinois

#### **Dental Practice**

O'Toole, Terry G., 2017,  
*chair*, Carlsbad,  
California  
Ratner, Craig S., 2018, *vice*  
*chair*, Staten Island, New  
York  
Aflatooni, Nima, 2020, Gold  
River, California  
Camarata, Rita M., 2017,  
Houston, Texas  
Connell, Christopher M.,  
2019, Lyndhurst, Ohio  
Edgar, Linda J., 2020,  
Federal Way,  
Washington  
Hale, Hal E., 2019, Andover,  
Kansas  
Kent, Leigh W., 2018  
Birmingham, Alabama  
Landes, Christine M., 2017,  
Newtown, Pennsylvania  
Liddell, Rudolph T., III, 2020,  
Brandon, Florida  
Mazur-Kary, Michelle L.,  
2017, Auburn, Maine  
Medovic, Michael D., 2020,  
Wheeling, West Virginia  
Mikell, Julia K., 2019,  
Columbia, South Carolina  
Saba, Michael, Union, New  
Jersey\*  
Theurer, Scott L., 2018,  
Logan, Utah  
Van Scoyoc, Stacey K.,  
2019, Bloomington,  
Illinois  
Wojcik, Michael S., 2018,  
Shelby Township,  
Michigan

Wolff, Douglas S., 2020,  
Saint Paul, Minnesota  
Porembski, Pamela M.,  
*director*, Chicago, Illinois

#### **Ethics, Bylaws and Judicial Affairs**

Halasz, Michael H., 2017,  
*chair*, Kettering, Ohio  
Herman, Gary N., 2018, *vice*  
*chair*, Village, California  
Browder, Larry F., 2020,  
Montgomery, Alabama  
Cohen, Donald F., 2020,  
Houston, Texas  
Edwards, Adam A., 2017,  
Altamont, New York  
Griffin, Seth W., 2020,  
Benton Harbor, Michigan  
Howley, Thomas A., Jr., 2019  
*ad interim*,  
Perkiomenville,  
Pennsylvania  
Ilkka, Don J., 2018,  
Eustis, Florida  
Kochhar, Puneet, 2018,  
Dover, New Hampshire  
Kurkowski, Michael A., 2020,  
Shoreview, Minnesota  
Merritt, Ken W., 2017,  
Clovis, New Mexico  
Moss, J. David, 2018,  
Florence, South Carolina  
Patel, Vishruti M., 2019 *ad*  
*interim*, Plainfield, Illinois  
Rice, Marvin E., 2019,  
Mexico, Missouri  
Shekitka, Robert A., 2017,  
Newark, New Jersey  
Smith, James A., 2019,  
Portland, Oregon  
Soileau, Kristi M., 2020, New  
Orleans, Louisiana  
Stuefen, Sara E., Vinton,  
Iowa\*  
Elliott, Thomas C., Jr.,  
*director*, Chicago, Illinois

#### **Government Affairs**

Bronson, Mark E., 2017,  
*chair*, Cincinnati, Ohio

Graham, Frank J., 2018, *vice*  
*chair*, Teaneck, New  
Jersey  
Armstrong, Craig S., 2019,  
Houston, Texas  
Beauchamp, K. Jean, D.,  
2018, Clarksville,  
Tennessee  
Bishop, Deborah S., 2020,  
Huntsville, Alabama  
Cheek, Daniel K., 2019,  
North Chapel Hill,  
Carolina  
Desrosiers, Mark B., 2020,  
Columbia, Connecticut  
Fijal, Phillip J., 2020, Des  
Plains, Illinois  
Garrett, Marty B., 2018,  
Baton Rouge, Louisiana  
Hennessy, Rhonda M., 2020,  
Linden, Michigan  
Incalcaterra, Charles J.,  
2017, Bethlehem,  
Pennsylvania  
Kalarickal, Zacharias J.,  
2020, Wesley Chapel,  
Florida  
Medrano-Saldana, Lauro,  
2019, Valley Stream,  
New York  
Minahan, David M., 2018,  
Kenmore, Washington  
Morrison, Scott L., 2017,  
Omaha, Nebraska  
Nguyen, Robin, Trinity,  
Florida\*  
Terlet, Ariane, 2019,  
Berkeley, California,  
White, David M., 2017 *ad*  
*interim*, Reno, Nevada  
Spangler, Thomas J., Jr.,  
*director*, Washington,  
D.C.

#### **Members Insurance and Retirement Programs**

McLean, David E., 2017,  
*chair*, South Burlington,  
Vermont  
Hehli, Peter D., 2018, *vice*  
*chair*, Appleton,  
Wisconsin

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\* New Dentist Committee member  
without the power to vote.

Coleman, J. Preston, 2017,  
San Antonio, Texas  
Ellison, Naomi L., 2019, Los  
Angeles, California  
Hokanson, Brian, 2017,  
Gillette, Wyoming  
Johnston, Jon J., 2020,  
Punxsutawney,  
Pennsylvania  
Jolly, Sr., Robert L., 2019,  
North Little Rock,  
Arkansas  
Kido, Scott H., 2020, Nampa,  
Idaho  
Kilcollin, Katie L., 2019,  
Union, West Virginia  
Lipton, James M., 2018,  
Highland, Indiana  
Mann, Marshall H., 2018,  
Rome, Georgia  
Olenyn, Paul T., 2017, *ad  
interim*, Burke, Virginia  
Pirrmann, Peter J., 2019,  
Carbondale, Illinois  
Sterritt, Frederic C., 2020,  
Raritan, New Jersey  
Tota, Christopher M., 2020,  
Hawthorne, New York  
White, Cecil, Jr., 2020,  
Atlantic Beach, Florida  
Wieting, D. Scott, 2018,  
York, Nebraska  
Yates, Lindsey, Chicago,  
Illinois\*

Tiernan, Rita, *senior  
manager*, Chicago,  
Illinois

### Membership

Maranga, Maria C., 2017,  
*chair*, Aquebogue, New  
York  
Romano, Rodrigo, 2018, *vice  
chair*, South Miami,  
Florida  
Chatterjee Kirk, Pia, 2020,  
Jackson, Mississippi  
Czerniak, Lauren, Toledo,  
Ohio\*  
Durbin, Michael G., 2017,  
Prospect Heights, Illinois  
Ellinwood, Steven P., 2018,  
Fort Wayne, Indiana

Freedman, I. Jay, 2020,  
Abington, Pennsylvania  
Hanlon, Mary Jane, 2020,  
Kennebunkport, Maine  
Irani, Karin, 2019, Beverly  
Hills, California  
Jones, Gary O., 2017,  
Mesa, Arizona  
Kampfe, Mark I., 2020, Rapid  
City, South Dakota  
Muncy, Marc, 2018,  
Clarksville, Arkansas  
Riordan, Danielle M., 2020,  
St. Peters, Missouri  
Sherwin, Ted, 2019, Orange,  
Virginia  
Smith, Carmen P., 2017,  
Dallas, Texas  
Tigani, Stephen, 2019,  
Washington, D.C.  
Vitek-Hitchcock, Alexa, 2019,  
DeWitt, Michigan  
Willis, Heather A., 2018,  
Fairbanks, Alaska  
Reynolds, Andrew, *senior  
manager*, Chicago,  
Illinois

### Scientific Affairs

Platt, Jeffrey A., 2017, *chair*,  
Indianapolis, Indiana  
Eleazer, Paul D., 2018, *vice  
chair*, Birmingham,  
Alabama  
Aminoshariae, Anita, 2018,  
Cleveland, Ohio  
Braun, Thomas W., 2019,  
Mars, Pennsylvania  
Dmytryk, John J., 2017,  
Oklahoma City,  
Oklahoma  
Fallon, Andrea C., Agawam,  
Massachusetts\*  
Fontana, Margherita R.,  
2020, Ann Arbor,  
Michigan  
Geisinger, Maria L., 2020,  
Birmingham, Alabama  
Jefferies, Steven R., 2020,  
Media, Pennsylvania  
Keels, Martha Ann, 2020,  
Chapel Hill, North  
Carolina

Mariotti, Angelo, 2019,  
Columbus, Ohio  
Moore, Paul A., 2018,  
Pittsburgh, Pennsylvania  
Offenbacher, Steven, 2018,  
Chapel Hill, North  
Carolina  
Parker, William, 2019, Davis,  
Florida  
Roberts, Howard W., 2018,  
Biloxi, Mississippi  
Slayton, Rebecca L., 2017,  
Seattle, Washington  
Tinanoff, Norman, 2019,  
Lutherville, Maryland  
Weyant, Robert J. 2017,  
Pittsburgh, Pennsylvania  
Lyznicki, James M., *senior  
manager*, Chicago,  
Illinois

### Commissions

#### Continuing Education Provider Recognition

Leary, Paul, 2017, (ADA),  
*chair*, Smithtown, New  
York  
Fiorellini, Joseph P., 2018,  
(AAP), *vice chair*,  
Philadelphia,  
Pennsylvania  
Beitel, Brian A., 2017,  
(AAPD),  
Huntsville, Alabama  
Bennett, Jeffrey D., 2019,  
(AAOMS), Avon, Indiana  
Chehal, Hardeep K., 2017,  
(AAOMP), Omaha,  
Nebraska  
Dixon, Debra, 2018,  
(AAOMR),  
Edwardsville, Illinois  
Garcia-Aguirre, Augusto C.,  
2019, Aguadilla, Puerto  
Rico  
Hammond, Barry, 2019,  
Evans, Georgia  
Hughes, Bertram J., 2020,  
(ADA), Gainesville,  
Florida  
Hutten, Mark C., 2018,  
(ACP),

\* New Dentist Committee member  
without the power to vote.



Hinsdale, Illinois  
 Kirkpatrick, Timothy C., 2017, (AAE), Biloxi, Mississippi  
 Lipp, Mitchell J., 2019, New York, New York  
 McNulty, Conor, 2018, (ASCDE), Wilsonville, Oregon  
 Reed, Susan, 2020, (AAPHD), Charleston, South Carolina  
 Rosenthal, Nancy R., 2019, Huntington Valley, Pennsylvania  
 Steiner, Ann, 2017, (ADA), Yucaipa, California  
 Borysewicz, Mary, *director*, Chicago, Illinois

### **Dental Accreditation**

Livingston, Harold, 2017, (SCDA/ADEA), *chair*, Jackson, Mississippi  
 Leffler, William, 2018, (AADB), *vice chair*, Massillon, Ohio  
 Attanasi, Ralph, C., 2018, (ADA), *ad interim*, Boca Raton, Florida  
 Callahan Barnard, Susan, 2019, (ADHA), Paramus, New Jersey  
 Campbell, Stephen, 2017, (ACP), Chicago, Illinois  
 Cushing, David, P., 2019, (Public), Princeton, New Jersey  
 Feldner, Loren, J., 2019, (ADA), Orland Park, Illinois  
 Flaitz, Catherine, M., 2019, (AAPD), Columbus, Ohio  
 Friedrichsen, Steven, 2020, (ADEA), Pomona, California  
 Geist, James, R., 2019, (AAOMR), Bloomfield, Michigan  
 Hagenbruch, Joseph, 2020, (ADA), Harvard, Illinois  
 Hebert, Alexandra, P., 2017, (ASDA/ADEA), San Francisco, California  
 Hershey, H. Garland, Jr., 2019, (AAO), Chapel Hill, North Carolina

Javed, Tariq, 2019, (ADEA), Mount Pleasant, South Carolina  
 Jee, Arthur Chen-Shu, 2020, (AADB), Laurel, Maryland  
 Johnson, Bradford, 2020, (AAE), Chicago, Illinois  
 Kassebaum, Denise, 2017, (ADEA), Aurora, Colorado  
 Kinney, Bruce, 2019, (AADB), Yakima, Washington  
 Lanier, Dennis, 2017, (NADL), Columbus, Georgia  
 Lerman, Mark, 2018, (AAOMP), Brookline, Massachusetts  
 Levy, Steven, 2020, (AAPHD), Iowa City, Iowa  
 Lobb, William, 2018, (ADEA), Milwaukee, Wisconsin  
 Mills, Michael, 2018, (AAP), San Antonio, Texas  
 Sherman, Robert, 2017, (AADB), Honolulu, Hawaii  
 Stanton, David, 2017, (AAOMS), Philadelphia, Pennsylvania  
 Stentiford, Deanna, 2020, (ADAA), Ocala, Florida  
 Stergar, Cindy, 2018, (Public), Butte, Montana  
 Surabian, Stanley R., 2017, (ADA), Fresno, California  
 Unser, Glenn, J., 2019, (Public), Torrance, California  
 Wheeler, Matthew, 2018, (Public), Urbana, Illinois  
 Tooks, Sherin, Ed.D., M.S., *director*, Chicago, Illinois

### **National Dental Examinations**

Licari, Frank W., 2017, (ADEA), *chair*, South Jordan, Utah  
 Heinrich-Null, Lisa, 2018, (ADA), *vice chair*, Victoria, Texas

Chamberlain, Dale Robert, 2018, (AADB), Helena, Montana  
 Efurd, Melissa "Mitzi" Gail, 2018, (ADHA), Little Rock, Arkansas  
 Fujimoto, Luis, J., 2017, (AADB), New York, New York  
 Haley, Cheryl D., 2019, (ADA), Ozark, Missouri  
 Henderson, Aaron, 2017, (ASDA Student Observer), Minneapolis, Minnesota  
 Jenkins, Issie L., 2018, (Public), Sykesville, Maryland  
 Leone, Cataldo, 2020, (ADEA), Boston, Massachusetts  
 Murray, Rhett L., 2017, (ADA), Aurora, Colorado  
 Nadershahi, Nader Aghaali, 2018, (ADEA), San Francisco, California  
 Parker, Patricia Anne, 2017, (AADB), Hillsboro, Oregon  
 Perkins, David W., 2017, (AADB), West Hartford, Connecticut  
 Robinson, William F., 2020, (AADB), Tampa, Florida  
 Telin, Jordan Joseph, 2017, (ASDA), Kenmore, New York  
 Weiss, Leonard P., 2019, (AADB), Beachwood, Ohio  
 Waldschmidt, David, *director and secretary*, Chicago, Illinois

### **Standing Committees**

#### **Advisory Committee on Annual Meetings**

Fulton, David J., Jr., 2017, *chair*, Waukegan, Illinois  
 Boseman, J. Jerald, 2020, Salt Lake City, Utah  
 Bragdon, William H., 2020, Greenville, South Carolina  
 Evans, Henry F., III, 2018,

Chewelah, Washington  
 Foy, Charles B., Jr., 2017,  
 Madisonville, Louisiana  
 Jarvis, Raymond A., 2018,  
 Shreveport, Louisiana  
 Kirkegaard, Paul F., 2019,  
 Saint Paul, Minnesota  
 LaMorte, Gregory, 2017,  
 South Orange, New  
 Jersey  
 Lieb, Howard I.A., 2018,  
 Staten Island, New York  
 Lum, Calbert M.B., (2018  
*General Chair,*  
*Committee on Local*  
*Arrangements*), Honolulu,  
 Hawaii  
 Macias, C. Roger, Jr., 2018,  
 San Antonio, Texas  
 Aurora, Colorado  
 Perrone, Sara, 2017, (ASDA  
*student without the power*  
*to vote*), Buffalo, New  
 York  
 Radack, III, Stephen T.,  
 2019, Erie, Pennsylvania  
 Richman, Andrea, 2018,  
 New Centre,  
 Massachusetts  
 Rothman, David L., 2020,  
 San Francisco, California  
 Sloan, Kevin M., 2020, Ann  
 Arbor, Michigan  
 Stockwell, Karyn L., 2017,  
 Kennesaw, Georgia  
 Tadsen, Wayne T., 2020,  
 Lawrenceville, Georgia  
 Terry, Beatriz E., 2019,  
 Miami, Florida  
 Tertel, Nanette C., 2019,  
 Toledo, Ohio  
 Thakkar, Nipa R., 2017,  
 Williston Park, New York\*  
 Wyckoff, Douglas A., 2017,  
 Cameron, Missouri  
 Mills, Catherine H., *director*,  
 Chicago, Illinois

#### **New Dentist Committee**

Ishkanian, Emily R., 2017,  
*chair*, Las Vegas,  
 Nevada

Thakkar, Nipa R., 2018, *vice*  
*chair*, Philadelphia,  
 Pennsylvania  
 Czerniak, Lauren M., 2019,  
 Toledo, Ohio  
 Dean, Brittany T., 2018,  
 Mill Creek, Washington  
 Fallon, Andrea C., 2019,  
 Westfield, Massachusetts  
 Greene, Colleen, 2020,  
 Milwaukee, Wisconsin  
 Jarvis, Raymond A., 2019,  
 Shreveport, Louisiana  
 Matin, Britany F., 2020,  
 Auburn, Alabama  
 Mattingly, Emily A., 2020,  
 Chillicothe, Missouri  
 Nguyen, Robin, 2019, Trinity,  
 Florida  
 Norbo, Justin R., 2017,  
 Purcellville, Virginia  
 Pascarella, Jonathan R.,  
 2018, Red Bluff,  
 California  
 Quartey, Tricia, 2019,  
 Brooklyn, New York  
 Saba, Michael, 2018, Union,  
 New Jersey  
 Shisler, Adam C., 2020,  
 Houston, Texas  
 Stuefen, Sara E., 2020,  
 Vinton, Iowa  
 Yates, Lindsey, 2017,  
 Chicago, Illinois  
 Lavick, Tera, *director*,  
 Chicago, Illinois

#### **Committee on Local Arrangements**

Stockwell, Karyn L., 2017  
 CLA General Chair,  
 Kennesaw, Georgia  
 Tourial, Sidney R., 2017 CLA  
 Vice Chair, Sandy  
 Springs, Georgia  
 Aguilera, Suzanna,  
 Operations Committee,  
 Powder Springs,  
 Georgia;  
 Jagor, Tom, Programs  
 Committee, Atlanta,  
 Georgia;

Nayee, Mayur, Operations  
 Committee, Smyrna,  
 Georgia  
 Weinman, Rebecca,  
 Programs Committee,  
 Atlanta, Georgia

#### **Annual Session Volunteers**

Adamczyk, Theresa  
 Aguilera, Suzanna  
 Alderman, E Joseph  
 Alexander, Joslyn  
 Allen, Tara  
 Anderson, Arlene  
 Anderson, Jackson  
 Anderson, Eric  
 Attia, Magdy  
 Babo, Evis  
 Balestrini, David  
 Balyan, Supriti  
 Batoon, Diana  
 Becker, Daren  
 Benet-Rockefeller, Miredy  
 Bennett, Yolanda T.  
 Benson, Henry  
 Benton, Donald  
 Berger, Edward  
 Best, Lou  
 Bethea, Janine  
 Bhat, Narayana  
 Bhat, Komal  
 Bishop, Timothy  
 Bloor, Priti  
 Bodner, Arthur  
 Bowersox, Lauren  
 Bradford, Henry  
 Bragg, Jennifer  
 Braswell, Laura  
 Broda, Mindy  
 Broderick, Thomas  
 Brown, Donald  
 Buitrago Huertas, Edlin

Calloway, Allise  
 Camp, Bruce  
 Camp, Nathaniel  
 Cardenas, Wendy  
 Carreno, David  
 Carroll, William  
 Cartier, Pierre  
 Cavola, Ronald

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\* New Dentist Committee member  
 without the power to vote.

Chadaram, Lavanya  
 Chalasani, Venkatadri  
 Chan, Raymond  
 Chandrakeerthi, Chirdeep  
 Chang, Bright  
 Chun, Brian  
 Clepper, Gregory  
 Cody, JoAnn  
 Cohen, Solomon  
 Colvin, Sharon  
 Comeau, Jules  
 Conti, Amanda  
 Contractor, Hamir  
 Cramer, Narisa  
 Cunningham, Thomas

Dave, Jalpa  
 Davidson, Madalyn  
 Davies, Roland  
 Davis, Darlene  
 Derrick, Kendra  
 Digumarthi, Hari  
 Doffoney, Erin  
 DosSantos, Mauricio  
 Drew, R David  
 Drew, Monicha  
 Dubbaka, Pranusha  
 Duebbert, Ingrid  
 Dunkelberger, Fred  
 Dunn, Celia  
 Durham, Laura  
 Duval, Benjamin

Eccles-Major, Michelle  
 Elam, Teresa  
 Evans, Joel  
 Evans, Susan  
 Feldman, James  
 Feldman, Ellen  
 Ferris, Geraldine  
 Fong, Jennifer  
 Friend, Basil

Gallagher, Nancy  
 Garvin, James  
 Garvin, Katie  
 Ghalehgol, Amir  
 Gilbert, Kenneth  
 Gobichettyalayam, Sathish  
 Gray, Hardy  
 Greissing, Michelle

Hagberg, Carter  
 Halpern, Stanley  
 Hanes, Carole  
 Hanes, Philip

Hanono-Rosenthal, Bella  
 Hardy, Wolanda  
 Harrington, John  
 Haynes, Susan  
 Heider, J  
 Hochberg, David  
 Holliday, Lindsay  
 Hu, Aimee  
 Hudson, Vivian  
 Hutchinson, Kenneth

Ibrahim, Pola

Jacob, Serena  
 Jagor, Thomas  
 Jameson-Kuehl, Corinne  
 Jordan, La Tonya  
 Joyce, Janice

Kaelke, Kindel  
 Kalantari, Kyandukhta  
 Kalp, Randy  
 Kalwara, Kristin  
 Kamdar, Kiran  
 Kang, Joshua  
 Kansal, Jay  
 Kao, Solon  
 Karri, Pavani Priyanka  
 Kaufman, Stanley  
 Kaur, Jagdeep  
 Kays, Kevin  
 Kendrick, Jeffery  
 Kim, Mina  
 King, Linda  
 Kishore, Kamal  
 Koshy, Jessy  
 Krishna, Ranjitha  
 Kuhmichel, Amy  
 Kumar, Praneetha

Langston, Lyndsay  
 Lee, Charolette  
 Lefebvre, Carol  
 Leingang, Michael  
 Lewis, Elizabeth  
 Lima, Cintia  
 Lin, Steven  
 Lipscomb, Valencia  
 Long, Michael

Majeska, Richard  
 Mamidi, Jyothirmayi  
 Manzanares, David  
 Masters, Antonette  
 mayles, mary beth  
 McCain, Aubriannna

McCauley, Ashley  
 McCullough, Darryal  
 McGee, Heather  
 Mehta, Amish  
 Meiners, Christina  
 Mensah-Boateng, Daniel  
 Mercer, Michala  
 Miklas, Paul  
 Miller, Wayne  
 Mitchell, Jamie  
 Mittal, Kunal  
 Mittal, Sunil  
 Mittal, Kavita  
 Moore, Steve  
 Moore, Debbie  
 Moorhead, William  
 Moorman, Guy  
 Mramor, Andrew  
 Myers, Alan

Nagar, Shainal  
 Nagar, Ushma  
 Narayan, Minal  
 Nayee, Mayur  
 Nayyar, Arun  
 Norris, Rhoda-LeAnn

Odom, Angela  
 Oswal, Punita

Pafford, P Edward  
 Parekh, Chintan  
 Parikh, Shetal  
 Park, Julius  
 Patel, Mayoore  
 Patel, Atusha  
 Patel, Trushar  
 Patel, Kumar  
 Patrick, Carrie  
 Pena, Janie  
 Perpall, David  
 Pesicek, Marcia  
 Petree, Lewis  
 Phan, Vanessa  
 Phillips, Ruth  
 Post, Megan  
 Potter, Joeseph  
 Potts-Toombs, Denessa  
 Prasad, Neralagadde  
 Proctor, James  
 Puskas, Jane

Raetz, Randy  
 Ramirez, Juliana  
 Raper, Hal  
 Raymond, Richard

Reilly, Patrick  
Remer, Mike  
Rockefeller, Van  
Rodgers, Richard

Sachdev, Mehak  
Sachdeva, Suvidha  
Scheidt, Michael  
Scheinfeld, P  
Scheinfeld, Zoanna  
Schroeder, Lawson  
Schulman, Troy  
Schupp, Kristen  
Schwenk, David  
Seekand, Priyanka  
Setia, Saniya  
Shaffer, Marybeth  
Shah, Shruti  
Shah, Bhavik  
Shah, Neal  
Shapiro, Richard  
Shim, Sung  
Shinton, Lori  
Shirley, J.C.

Short, Rico  
Shue, Jill  
Singh, Manjeet  
Smith, Richard  
Snell, Deidra  
Sparkman, Thomas  
Steele, Dennis  
Stockwell, Karyn  
Suarez, Annette

Teruya, Darrell  
Test, Kelly  
Thomason, Ethelyn  
Thornton, Neely  
Thorsteinson, Shannon  
Tourial, Sidney  
Tower, Sharon  
Tranmer, Debbie

Uetsuki, John

Vallabhaneni, Jaya  
Van Gemert, Courtney  
Vanker, Divya

Vaughn, Ryan  
Vellanki, Asha  
Vernon, Michael  
Visor, Taressa  
Vollenweider, John

Walker, Ash  
Weinman, Rebecca  
Williams, Jerry  
Williamson, Anjali  
Wu, Arthur  
Wu, Janet  
Wu, Judy

Yang, Nancy  
Yee, David  
Yee, Jolie  
Young, Justin  
Young-Jones, Dorothy

Zeitman, Barry  
Zhou, Wenlian

# Appendix

## Notes

# Historical Record

The American Dental Association was organized in Niagara Falls, New York, on August 3, 1859. The president of this organizing convention was W.W. Allport and the secretary was J. Taft. Permanent organization was effected in Washington, D.C., July 3, 1860, when the officers *pro tem* were succeeded by regularly elected officers. In 1861 no session was held, owing to the Civil War; since

then, the sessions have been held annually with the exception of 1945, when no session was held because of World War II. In 1897, the Association united with the Southern Dental Association and the name was changed to the "National Dental Association," which name was retained until 1922, when the earlier name was resumed. A complete list of the officers and sessions follows.

## American Dental Association

Term	President	Corresponding Secretary	Recording Secretary	Date of Meeting	Place of Meeting
1860–61	W. H. Atkinson	W. M. Rogers	J. Taft		No meeting
1861–62	W. H. Atkinson	W. M. Rogers	J. Taft	1862	Cleveland
1862–63	G. Watt	J. F. Johnson	J. Taft	1863	Philadelphia
1863–64	W. H. Allen	C. R. Butler	J. Taft	1864	Niagara Falls
1864–65	J. H. McQuillen	G. W. Ellis	J. Taft	1865	Chicago
1865–66	C. W. Spalding	L. D. Shepard	J. Taft	1866	Boston
1866–67	C. P. Fitch	A. Hill	J. Taft	1867	Cincinnati
1867–68	A. Lawrence	C. R. Butler	J. Taft	1868	Niagara Falls
1868–69	Jonathan Taft	J. McManus	Edgar Park	1869	Saratoga Springs
1869–70	Homer Judd	I. A. Salmon	M. S. Dean	1870	Nashville
1870–71	W. H. Morgan	I. A. Salmon	M. S. Dean	1871	White Sulphur Springs, WV
1871–72	G. H. Cushing	I. A. Salmon	M. S. Dean	1872	Niagara Falls
1872–73	P. G. C. Hunt	J. Taft	M. S. Dean	1873	PutinBay, Ohio
1873–74	T. L. Buckingham	J. Taft	M. S. Dean	1874	Detroit
1874–75	M. S. Dean	G. L. Field	C. S. Smith	1875	Niagara Falls
1875–76	A. L. Northrop	J. H. McQuillen	C. S. Smith	1876	Philadelphia
1876–77	G. W. Keely	J. H. McQuillen	C. S. Smith	1877	Chicago
1877–78	F. H. Rehwinkel	M. H. Webb	M. S. Dean	1878	Niagara Falls
1878–79	H. J. McKellops	A. O. Rawls	G. H. Cushing	1879	Niagara Falls
1879–80	L. D. Shepard	M. H. Webb	G. H. Cushing	1880	Boston
1880–81	C. N. Pierce	A. M. Dudley	G. H. Cushing	1881	New York
1881–82	H. A. Smith	A. M. Dudley	G. H. Cushing	1882	Cincinnati
1882–83	W. H. Goddard	A. W. Harlan	G. H. Cushing	1883	Niagara Falls
1883–84	E. T. Darby	A. W. Harlan	A. H. Peck	1884	Saratoga Springs
1884–85	J. N. Crouse	A. W. Harlan	A. H. Peck	1885	Minneapolis
1885–86	W. C. Barrett	A. W. Harlan	G. H. Cushing	1886	Niagara Falls
1886–87	W. W. Allport	A. W. Harlan	G. H. Cushing	1887	Niagara Falls
1887–88	Frank Abbott	F. A. Levy	G. H. Cushing	1888	Louisville
1888–89	C. R. Butler	F. A. Levy	G. H. Cushing	1889	Saratoga Springs
1889–90	M. W. Foster	F. A. Levy	G. H. Cushing	1890	Excelsior Springs
1890–91	A. W. Harlan	F. A. Levy	G. H. Cushing	1891	Saratoga Springs
1891–92	W. W. Walker	F. A. Levy	G. H. Cushing	1892	Niagara Falls
1892–93	J. D. Patterson	F. A. Levy	G. H. Cushing	1893	Chicago
1893–94	J. D. Patterson	F. A. Levy	G. H. Cushing	1894	Old Point Comfort, VA
1894–95	J. Y. Crawford	E. E. Chase	G. H. Cushing	1895	Asbury Park, NJ
1895–96	J. Y. Crawford	E. E. Chase	G. H. Cushing	1896	Saratoga Springs
1896–97	James Truman	F. A. Levy	G. H. Cushing	1897	Old Point Comfort, VA

**National Dental Association**

<b>Term</b>	<b>President</b>	<b>Corresponding Secretary</b>	<b>Recording Secretary</b>	<b>Date of Meeting</b>	<b>Place of Meeting</b>
1897–98	Thomas Fillebrown	E. E. Chase	G. H. Cushing	1898	Omaha
1898–99	H. J. Burkhardt	E. E. Chase	G. H. Cushing	1899	Niagara Falls
1899–1900	B. Holly Smith	E. E. Chase	G. H. Cushing	1900	Old Point Comfort, VA
1900–01	G. V. Black	M. E. Gallup	G. H. Cushing	1901	Milwaukee
1901–02	J. A. Libbey	J. D. Pfeiffer	G. H. Cushing	1902	Niagara Falls
1902–03	L. G. Noel	W. D. Tracy	A. H. Peck	1903	Asheville, NC
1903–04	C. G. Chittenden	C. S. Butler	A. H. Peck	1904	St. Louis (Business only)
1904–05	W. E. Boardman	C. S. Butler	A. H. Peck	1905	Buffalo
1905–06	M. F. Finley	C. S. Butler	A. H. Peck	1906	Atlanta
1906–07	A. H. Peck	B. L. Thorpe	C. S. Butler	1907	Minneapolis
1907–08	William Carr	B. L. Thorpe	C. S. Butler	1908	Boston
1908–09	V. E. Turner	H. C. Brown	C. S. Butler	1909	Birmingham
1909–10	B. L. Thorpe	H. C. Brown	C. S. Butler	1910	Denver
1910–11	E. S. Gaylord	C. W. Rodgers	H. C. Brown	1911	Cleveland
1911–12	A. R. Melendy	C. W. Rodgers	H. C. Brown	1912	Washington, D.C.
1912–13	F. O. Hetrick	C. W. Rodgers	H. C. Brown	1913	Kansas City, MO

**Reorganized July 10, 1913**

<b>Term</b>	<b>President</b>	<b>General Secretary</b>	<b>Treasurer</b>	<b>Date of Meeting</b>	<b>Place of Meeting</b>
1913–14	H. C. Brown	Otto U. King	H. B. McFadden	1914	Rochester, NY
1914–15	D. M. Gallie	Otto U. King	A. R. Melendy	1915	San Francisco (H of D only)
1915–16	T. P. Hinman	Otto U. King	A. R. Melendy	1916	Louisville
1916–17	L. L. Barber	Otto U. King	A. R. Melendy	1917	New York
1917–18	W. H. G. Logan	Otto U. King	A. R. Melendy	1918	Chicago
1918–19	C. V. Vignes	Otto U. King	A. R. Melendy	1919	New Orleans
1919–20	J. V. Conzett	Otto U. King	A. R. Melendy	1920	Boston
1920–21	H. E. Friesell	Otto U. King	A. R. Melendy	1921	Milwaukee

**American Dental Association**

<b>Term</b>	<b>President</b>	<b>Secretary</b>	<b>Treasurer</b>	<b>Date of Meeting</b>	<b>Place of Meeting</b>
1921–22	T. B. Hartzell	Otto U. King	A. R. Melendy	1922	Los Angeles
1922–23	J. P. Buckley	Otto U. King	A. R. Melendy	1923	Cleveland
1923–24	W. A. Giffen	Otto U. King	A. R. Melendy	1924	Dallas
1924–25	C. N. Johnson	Otto U. King	A. R. Melendy	1925	Louisville
1925–26	Sheppard W. Foster	Otto U. King	A. R. Melendy	1926	Philadelphia
1926–27	Henry L. Banzhaf	Otto U. King	A. R. Melendy	1927	Detroit
1927–28	R. H. Volland	H. B. Pinney	A. R. Melendy	1928	Minneapolis
1928–29	Percy R. Howe	H. B. Pinney	R. H. Volland	1929	Washington, D.C.
1929–30	R. Boyd Bogle	H. B. Pinney	R. H. Volland	1930	Denver
1930–31	Robert T. Oliver	H. B. Pinney	R. H. Volland	1931	Memphis
1931–32	Martin Dewey	H. B. Pinney	R. H. Volland	1932	Buffalo
1932–33	G. Walter Dittmar	H. B. Pinney	R. H. Volland	1933	Chicago
1933–34	Arthur C. Wherry	H. B. Pinney	R. H. Volland	1934	St. Paul
1934–35	Frank M. Casto	H. B. Pinney	R. H. Volland	1935	New Orleans
1935–36	George B. Winter	H. B. Pinney	R. H. Volland	1936	San Francisco
1936–37	Leroy M.S. Miner	H. B. Pinney	R. H. Volland	1937	Atlantic City
1937–38	C. Willard Camalier	H. B. Pinney	R. H. Volland	1938	St. Louis



<b>Term</b>	<b>President</b>	<b>Secretary</b>	<b>Treasurer</b>	<b>Date of Meeting</b>	<b>Place of Meeting</b>
1938–39	Marcus L. Ward	H. B. Pinney	R. H. Volland	1939	Milwaukee
1939–40	Arthur H. Merritt	H. B. Pinney	R. H. Volland	1940	Cleveland
1940–41	Wilfred R. Robinson	H. B. Pinney	R. H. Volland	1941	Houston
1941–42	Oren A. Oliver	H. B. Pinney	R. H. Volland	1942	St. Louis (H of D only)
1942–43	J. Ben Robinson	H. B. Pinney	R. H. Volland	1943	Cincinnati (H of D only)
1943–44	C. Raymond Wells	H. B. Pinney	R. H. Volland	1944	Chicago (H of D only)
1944–45	Walter H. Scherer	H. B. Pinney	R. H. Volland		No meeting
1945–46	Walter H. Scherer	H. B. Pinney	R. H. Volland	1946	Miami (H of D only)
1946–47	Sterling V. Mead	H. Hillenbrand	R. H. Volland	1947	Boston
1947–48	H. B. Washburn	H. Hillenbrand	R. H. Volland	1948	Chicago
1948–49	C. F. Minges	H. Hillenbrand	H. B. Washburn	1949	San Francisco
1949–50	Philip E. Adams	H. Hillenbrand	H. B. Washburn	1950	Atlantic City
1950–51	Harold W. Oppice	H. Hillenbrand	H. B. Washburn	1951	Washington, D.C.
1951–52	LeRoy M. Ennis	H. Hillenbrand	H. B. Washburn	1952	St. Louis
1952–53	Otto W. Brandhorst	H. Hillenbrand	H. B. Washburn	1953	Cleveland
1953–54	Leslie M. Fitzgerald	H. Hillenbrand	H. B. Washburn	1954	Miami
1954–55	Daniel F. Lynch	H. Hillenbrand	H. B. Washburn	1955	San Francisco
1955–56	Bernard C. Kingsbury	H. Hillenbrand	H. B. Washburn	1956	Atlantic City
1956–57	Harry Lyons	H. Hillenbrand	H. B. Washburn	1957	Miami-Miami Beach
1957–58	William R. Alstadt	H. Hillenbrand	H. B. Washburn	1958	Dallas
1958–59	Percy T. Phillips	H. Hillenbrand	H. B. Washburn	1959	New York
1959–60	Paul H. Jeserich	H. Hillenbrand	H. B. Washburn	1960	Los Angeles
1960–61	Charles H. Patton	H. Hillenbrand	H. B. Washburn	1961	Philadelphia
1961–62	John R. Abel	H. Hillenbrand	P. H. Jeserich	1962	Miami Beach
1962–63	Gerald D. Timmons	H. Hillenbrand	P. H. Jeserich	1963	Atlantic City
1963–64	James P. Hollers	H. Hillenbrand	P. H. Jeserich	1964	San Francisco
1964–65	Fritz A. Pierson	H. Hillenbrand	E. Jeff Justis	1965	Las Vegas
1965–66	Maynard K. Hine	H. Hillenbrand	E. Jeff Justis	1966	Dallas
1966–67	William A. Garrett	H. Hillenbrand	E. Jeff Justis	1967	Washington, D.C.
1967–68	F. Darl Ostrander	H. Hillenbrand	R. K. Trueblood	1968	Miami Beach
1968–69	Hubert A. McGuirl	H. Hillenbrand	R. K. Trueblood	1969	New York
1969–70	Harry M. Klenda	C. G. Watson	R. K. Trueblood	1970	Las Vegas
1970–71	John M. Deines	C. G. Watson	H. S. Eberhardt	1971	Atlantic City
1971–72	Carl A. Laughlin	C. G. Watson	H. S. Eberhardt	1972	San Francisco
1972–73	Louis A. Saporito	C. G. Watson	H. S. Eberhardt	1973	Houston
1973–74	Carlton H. Williams	C. G. Watson	J. W. Etherington	1974	Washington, D.C.
1974–75	L. M. Kennedy	C. G. Watson	J. W. Etherington	1975	Chicago
1975–76	Robert B. Shira	C. G. Watson	J. W. Etherington	1976	Las Vegas
1976–77	Frank F. Shuler	C. G. Watson	J. H. Pfister	1977	Miami Beach
1977–78	Frank P. Bowyer	C. G. Watson	I. L. Kerr	1978	Anaheim
1978–79	Joseph P. Cappuccio	J. M. Coady	J. J. Houlihan	1979	Dallas
1979–80	I. Lawrence Kerr	J. M. Coady	R. H. Griffiths	1980	New Orleans
1980–81	John J. Houlihan	J. M. Coady	R. B. Dixon	1981	Kansas City, MO
1981–82	Robert H. Griffiths	J. M. Coady	D. E. Bentley	1982	Las Vegas
1982–83	Burton H. Press	J. M. Coady	J. L. Bomba	1983	Anaheim
1983–84	Donald E. Bentley	J. M. Coady	A. L. Ryan	1984	Atlanta
1984–85	John L. Bomba	J. M. Coady	A. Kobren	1985	San Francisco
1985–86	Abraham Kobren	T. J. Ginley	J. A. Devine	1986	Miami Beach
1986–87	Joseph A. Devine	T. J. Ginley	J. A. Sadoris	1987	Las Vegas
1987–88	James A. Sadoris	T. J. Ginley	A. A. Dugoni	1988	Washington, D.C.
1988–89	Arthur A. Dugoni	T. J. Ginley	R. M. Overbey	1989	Honolulu
1989–90	R. Malcolm Overbey	T. J. Ginley	E. J. Truono	1990	Boston
1990–91	Eugene J. Truono	T. J. Ginley	G. T. Morrow	1991	Seattle
1991–92	Geraldine T. Morrow	W. E. Allen	J. H. Harris	1992	Orlando

<b>Term</b>	<b>President</b>	<b>Secretary</b>	<b>Treasurer</b>	<b>Date of Meeting</b>	<b>Place of Meeting</b>
1992–93	Jack H. Harris	J. S. Zapp	J. F. Mercer	1993	San Francisco
1993–94	James H. Gaines	J. S. Zapp	J. F. Mercer	1994	New Orleans
1994–95	Richard D'Eustachio	J. S. Zapp	J. F. Mercer	1995	Las Vegas
1995–96	William S. Ten Pas	J. S. Zapp	J. F. Mercer	1996	Orlando
1996–97	Gary Rainwater	J. S. Zapp	R. M. Rosas	1997	Washington, D.C.
1997–98	David A. Whiston	J. S. Zapp	R. M. Rosas	1998	San Francisco
1998–99	S. Timothy Rose	J. S. Zapp	R. M. Rosas	1999	Honolulu
1999–2000	Richard F. Mascola	J. S. Zapp	R. M. Rosas	2000	Chicago
2000–01	Robert M. Anderton	J. B. Bramson	M. J. Feldman	2001	Kansas City, MO
2001–02	D. Gregory Chadwick	J. B. Bramson	M. J. Feldman	2002	New Orleans
2002–03	T. Howard Jones	J. B. Bramson	M. J. Feldman	2003	San Francisco
2003–04	Eugene Sekiguchi	J. B. Bramson	M. J. Feldman	2004	Orlando
2004–05	Richard Haught	J. B. Bramson	M. J. Feldman	2005	Philadelphia
2005–06	Robert M. Brandjord	J. B. Bramson	M. J. Feldman	2006	Las Vegas
2006–07	Kathleen Roth	J. B. Bramson	Edward Leone	2007	San Francisco
2007–08	Mark J. Feldman	J. B. Bramson	Edward Leone	2008	San Antonio
2008–09	John S. Findley	K. T. O'Loughlin	Edward Leone	2009	Honolulu
2009–10	Ronald L. Tankersley	K. T. O'Loughlin	Edward Leone	2010	Orlando
2010–11	Raymond F. Gist	K. T. O'Loughlin	Edward Leone	2011	Las Vegas
2011–12	William R. Calnon	K. T. O'Loughlin	Edward Leone	2012	San Francisco
2012–13	Robert A. Faiella	K. T. O'Loughlin	Ronald P. Lemmo	2013	New Orleans
2013–14	Charles H. Norman	K. T. O'Loughlin	Ronald P. Lemmo	2014	San Antonio
2014–15	Maxine Feinberg	K. T. O'Loughlin	Ronald P. Lemmo	2015	Washington, D.C.
2015–16	Carol Gomez Summerhays	K. T. O'Loughlin	Ronald P. Lemmo	2016	Denver
2016–17	Gary L. Roberts	K. T. O'Loughlin	Ronald P. Lemmo	2017	Atlanta

#### Living Former Presidents, American Dental Association

<b>Term</b>	<b>President</b>	<b>Term</b>	<b>President</b>
1986–1987	Joseph A. Devine	2005–2006	Robert M. Brandjord
1988–1989	Arthur A. Dugoni	2006–2007	Kathleen Roth
1993–1994	James H. Gaines	2007–2008	Mark J. Feldman
1994–1995	Richard W. D'Eustachio	2008–2009	John S. Findley
1995–1996	William S. Ten Pas	2009–2010	Ronald L. Tankersley
1996–1997	Gary Rainwater	2010–2011	Raymond F. Gist
1997–1998	David A. Whiston	2011–2012	William R. Calnon
1998–1999	S. Timothy Rose	2012–2013	Robert A. Faiella
2000–2001	Robert M. Anderton	2013–2014	Charles H. Norman
2001–2002	D. Gregory Chadwick	2014–2015	Maxine Feinberg
2002–2003	T. Howard Jones	2015–2016	Carol Gomez Summerhays
2003–2004	Eugene Sekiguchi	2016–2017	Gary L. Roberts
2004–2005	Richard Haught		

## 2017 House of Delegates Attendance Record

	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
<b>Air Force</b>					Olsen, Fred, III, Phoenix	•	•	•	•
<b>Delegates 2</b>					Robertson, Kirk, Flagstaff	•	•	•	•
Gantt, Benjamin, Montgomery, AL	•	•	•		Snyder, Randolph, Yuma	•	•	•	•
Henderson, Mark, Ocean Springs, MS	•		•		<b>Alternates</b>				
<b>Alternate</b>					Cobb, Regina, Kingman	•			
Nuttall, Christopher, Niceville, FL					House, Allison, Phoenix	•			
					Jones, Gary, Mesa	•			
<b>Alabama</b>					Pafford Gregory, Phoenix	•			
<b>Delegates 5</b>					Patel, Onika, Surprise	•			
Bishop, Deborah, Huntsville	•	•	•	•	Powley, W. Brian, Paradise Valley	•			
Browder, Larry, Montgomery	•	•	•	•	Roda, Robert, Scottsdale	•			
Gardner, Stacey, Huntsville	•	•	•	•	<b>Arkansas</b>				
Ingram, William, Huntsville	•		•	•	<b>Delegates 3</b>				
Kent, Leigh, Birmingham	•	•	•	•	Fiddler, Terry, Conway	•	•	•	•
<b>Alternates</b>					Skinner, Robert, Fort Smith	•	•	•	•
Isbell, Gordon, III, Gadsden	•				Whitis, H. Warren, Osceola	•	•	•	•
Jones, Robert, Montgomery	•				<b>Alternates</b>				
Marshall, Rodney, Tuscaloosa					Golden, Kristi, Hot Springs Village	•			
Myers, Gary, Birmingham	•				Pitts, John, Little Rock	•			
Summerford, Mark, Auburn	•				Vammen, David, Texarkana	•			
<b>Alaska</b>					<b>Army</b>				
<b>Delegates 2</b>					<b>Delegates 2</b>				
Robinson, Julie, Anchorage	•	•	•		Henson, Brett, McLean, VA	•		•	•
Willis, Heather, Fairbanks	•	•	•	•	Patterson, Craig, San Antonio, TX	•	•	•	•
<b>Alternate</b>					<b>Alternate</b>				
Young, Evan, Anchorage	•				Larsen, Stacy, Vass, NC	•			
<b>American Student Dental Association</b>					<b>California</b>				
<b>Delegates 5</b>					<b>Delegates 70</b>				
Aiken, Sean, Louisville, KY	•	•	•	•	Abeldt, Philip, Lodi	•	•	•	•
Conlon, Molly, Boston, MA	•	•	•	•	Ackerman, Gary, Carmichael	•	•	•	•
Fuentes, Walter, Los Angeles, CA	•	•	•	•	Adishian, Scott, Pasadena	•	•	•	•
Kerst, Jeffrey, Hot Springs National Park, AR	•	•	•	•	Aflatooni, Nima, Gold River	•	•	•	•
Mitchell, Alex, Philadelphia, PA	•	•	•	•	Alston, Pamela, Oakland	•	•	•	•
<b>Alternates</b>					Altrock, Christine, San Diego	•	•	•	•
Bednarski, Justine, Columbus, OH	•				Alvarez, Jorge, Tarzana	•	•	•	•
Casteel, David, Kansas City, MO	•				Banner, Wade, La Verne	•	•	•	•
Halpern, Abby, Augusta, GA	•				Barnes, Richard, Visalia	•	•	•	•
Marciniak, Danielle, South Jordan, UT	•				Blake, John, Long Beach	•	•	•	•
Rogers, Stephen, Kenmore, NY	•				Brattesani, Cynthia, San Francisco	•	•	•	•
<b>Arizona</b>					Brunner, Ralph, Ventura	•	•	•	•
<b>Delegates 7</b>					Calilung, Xerxez, Irvine	•	•	•	•
Curtis, Eric, Safford	•	•	•	•	Campbell, Matthew, Sacramento	•	•	•	•
Enos, Jennifer, Chandler	•	•	•	•	Carney, Kerry, Benicia	•	•	•	•
Hughes, Mark, Glendale	•	•	•	•	Cassat, D. Douglas, San Diego	•	•	•	•
Lear, Lisa, Tucson	•	•	•	•	Christiansen, Douglas, San Diego	•	•	•	•

• Delegate or alternate attended the meeting; + Delegate or alternate attended a portion of the meeting.

	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Clark, Alma, Hayward	•	•	•	•	Tippett-Whyte, Judee, Stockton	•	•	•	•
Creasey, Jean, Nevada City	•	•	•	•	Wallis, Kenneth, Santa Clara	•	•	•	•
Crowson, Steven, Chico	•	•	•	•	Weber, Walter, Campbell	•	•	•	•
De Tomasi, Dennis, Clearlake	•	•	•	•	Yarborough, Craig, Greenbrae	•	•	•	•
Demichelis, Elizabeth, Modesto	•	•	•	•	<b>Alternates</b>				
Dougan, Gary, Irvine	•	•	•	•	Beck, Tina, San Diego				
Ehrler, Clelan, Fontana	•	•	•	•	Bell, Brian, Visalia				
Felsenfeld, Alan, Los Angeles	•	•	•	•	Benedict, Nannette, Scotts Valley	•			
Gandola, Robert, San Diego	•	•	•	•	Chan, Raymond, San Lorenzo				
Gereis, Mahfouz, Panorama City	•	•	•	•	Davidson, Daniel, San Francisco				
Glasband, Gary, Long Beach	•	•	•	•	Drury, Gerald, Hermosa Beach	•			
Hanlon, Robert, Escondido	•	•	•	•	Ford, Jonathan, Huntington Beach				
Herman, Gary, Los Angeles	•	•	•	•	Gordon, Douglas, El Sobrante				
Hilton, Irene, San Francisco	•	•	•	•	Gowda, Ramesh, Anaheim				
Hughson-Otte, Virginia, Valencia	•	•	•	•	Habjan, Denise, Santa Ana	•			
Irani, Karin, Beverly Hills	•	•	•	•	Hirota, Misako, National City				
Jenkins, Daniel, Chino Hills	•	•	•	•	Hsiao, Shih-Yen, Fresno	•			
Jones, Jeffrey, Villa Park	•	•	•	•	Marongiu, Nicholas, La Jolla				
Keating, Kevin, Sacramento	•	•	•	•	Morarasu, George, Ukiah				
Kend, Steven, Torrance	•	•	•	•	Namazikhah, Sadegh, Encino				
Lebovics, Irving, Los Angeles	•	•	•	•	Nour, Noha, Tustin				
Lee, Natasha, San Francisco	•	•	•	•	Pelton, W. Thomas, Yuba City	•			
Lloyd, Jeffrey, Alta Loma	•	•	•	•	Rollofson, Donald, Elk Grove				
Lojeski, Stephen, Arcadia	•	•	•	•	Rothman, David, San Francisco				
Lyon, Cindy, San Francisco	•	•	•	•	Schneider, Michael, Brentwood	•			
Marcos, Carliza, San Carlos	•	•	•	•	Sciarra, Joseph, Woodland Hills				
Masouredis, Claudia, San Francisco	•	•	•	•	Strom, Joel, Beverly Hills				
McCutcheon, Carol, Campbell	•	•	•	•	Sugiyama, Janice, Carpinteria				
Menold, Geralyn, Hollister	•	•	•	•	Taylor, John, Ladera Ranch	•			
Middleton, Gerald, Riverside	•	•	•	•	Werner, Erich, Los Gatos	•			
Nadershahi, Nader, San Francisco	•	•	•	•	Wuesthoff, Thomas, Westlake Village				
Nagy, Richard, Santa Barbara	•	•	•	•	Zhao, Yige, San Francisco				
Olinger, Thomas, El Cajon	•	•	•	•	Zingler, Carl, San Clemente				
Patel, Sanjay, Pittsburg	•	•	•	•					
Pendurkar, Shakalpi, San Jose	•	•	•	•	<b>Colorado</b>				
Pisacane, John, San Jose	•	•	•	•	<b>Delegates 10</b>				
Reed, John, Stockton	•	•	•	•	Field, Gary, Colorado Springs	•	•	•	
Sandretti, Stephanie, Elk Grove	•	•	•	•	Foster, Karen, Aurora	•	•	•	•
Scott, Brian, Palo Alto	•		•	•	Jackson, David, Boulder	•	•	•	•
Senseny, Charlotte, Torrance	•	•	•	•	Kahl, Jeffrey, Colorado Springs	•	•	•	•
Shue, Brian, Brawley	•	•	•	•	Kessler, Brett, Denver	•	•	•	•
Soderstrom, Andrew, Modesto	•	•	•	•	Lurye, David, Ridgway	•	•	•	•
Stein, Alan, Northridge	•	•	•	•	Morrow, Carol, Walsh	•	•	•	•
Steiner, Ann, Yucaipa	•	•	•	•	Paisley, Ian, Brighton	•	•	•	•
Stephens, James, Palo Alto	•	•	•	•	Peters, Kenneth, Aurora	•	•	•	•
Szotko, Scott, La Jolla	•	•	•	•	Schoemaker, Jeane, Fort Morgan	•	•	•	•
Tai, Alice, San Ramon	•	•	•	•	<b>Alternates</b>				
Taira, Mark, Los Angeles	•	•	•	•	Compton, Lindsay, Arvada	•			
Terlet, Ariane, Berkeley	•	•	•	•	Cullum, Arnold, Colorado Springs				

• Delegate or alternate attended the meeting; + Delegate or alternate attended a portion of the meeting.

	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Ehtessabian, Jason, Castle Rock	•				Boden, David, Port Saint Lucie	•	•	•	•
Kaufmann, Stephenie, Woodland Park	•				Brown, Andrew, Orange Park	•	•	•	•
Mauterer, Carrie, Thornton	•				Bulnes, Christopher, Tampa	•	•	•	•
Murray, Rhett, Aurora	•				D'Aiuto, Charles, Port Orange	•	•	•	•
Pearson, Justin, Englewood	•				Eggnatz, Michael, Weston	•	•	•	•
Schoch, Sheena, Hayden	•				Hoffman, Charles, Jupiter	•	•	•	•
Sessa, Kevin, Boulder	•				Huot, Richard, Vero Beach	•	•	•	•
Varley, Michael, Highlands Ranch	•				Limosani, Mark, Weston	•		•	•
					Marshall, Bryan, Spring Hill	•	•	•	•
<b>Connecticut</b>					Miller, Paul, New Port Richey	•	•	•	•
<b>Delegates 7</b>					Pansick, Ethan, Delray Beach	•	•	•	•
Berkley, Jeffrey, West Haven	•	•	•	•	Paramore, Jolene, Panama City	•		•	•
Fried, David, Yalesville	•	•	•	•	Paul, John, Lakeland	•	•	•	•
Linker, Gary, New Britain	•	•	•	•	Pruett, Henry, Pensacola	•	•	•	•
Malon, Carolyn, Farmington	•	•	•	•	Stevenson, Richard, Jacksonville	•	•	•	•
Mooney, John, Putnam	•	•	•	•	Wunderlich, Hugh, Palm Harbor	•	•	•	•
Riddle, Richard, Southington	•	•	•	•	<b>Alternates</b>				
Ungerleider, Michael, Granby	•	•	•	•	Cochran, Stephen, Jacksonville	•			
<b>Alternates</b>					Cordoba, John, Lake Mary	•			
Barton, Tatiana, Stamford	•				Cowell, Christopher, Deland	•			
Brenner, Bethaney, Burlington	•				Gesek, Daniel, Jacksonville	•			
Desrosiers, Mark, Glastonbury					Glerum, Karen, Boynton Beach	•			
Knapp, Jonathan, Bethel	•				Hall, Jeannette, Miami	•			
Le, Tam, Hamden	•				Hughes, Bertram, Gainesville	•			
Natelli, Albert, Southington	•				Jernigan, Kim, Pensacola				
Tierney, Christine, Cos Cob	•				Kalarickal, Zacharias, Wesley Chapel	•			
					Liddell, Rudolph, Brandon	•			
<b>Delaware</b>					Marcus, Gina, Coral Gables	•			
<b>Delegates 2</b>					Nguyen, Robin, Trinity	•			
Calhoon, Charles, Wilmington	•	•	•		Niessen, Linda, Fort Lauderdale	•			
Gregory, Victor, Wilmington	•	•	•		Ottley, Jeffrey, Milton	•			
<b>Alternates</b>					Palo, Paul, Winter Haven	•			
Christian, Paul, Middletown					Payne, Robert, Marianna	•			
Williams, Erika, Wilmington	•				Romano, Rodrigo, South Miami	•			
					Thiems-Heflin, Suzanne, Ocala	•			
<b>District of Columbia</b>					Trotter, Linda, Jacksonville	•			
<b>Delegates 2</b>					Zuknick, Stephen, Brandon	•			
Grogan, Patrick, Washington	•	•	•						
Tigani, Stephen, Washington	•	•	•	•	<b>Georgia</b>				
<b>Alternates</b>					<b>Delegates 10</b>				
Cram, Sally, Washington	•				Carpenter, Robert, Columbus	•	•	•	•
Noguera, Angela, Washington	•				Hasty, Christopher, Tifton	•	•	•	•
					Lawson, Amber, Macon	•	•	•	•
<b>Florida</b>					Lopez, James, Columbus	•	•	•	•
<b>Delegates 20</b>					Rainge, Louvenia, Augusta	•	•	•	•
Ackley, Eva, Spring Hill	•	•	•	•	Reich, Robin, Smyrna	•	•	•	•
Antoon, James, Rockledge	•	•	•	•	Sample, Steven, Savannah	•	•	•	•
Attanasi, Ralph, Delray Beach	•	•	•	•	Thomas-Moses, Donna, Carrollton	•	•	•	•
Bird, Gerald, Cocoa	•	•	•	•	Weinman, Richard, Atlanta	•	•	•	•

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Wolff, Carol, Atlanta	•	•	•	•	Nicholas, Dean, Lombard	•	•	•	•
<b>Alternates</b>					Riggins, Ronald, Moline	•	•	•	•
Adkins, Chris, Stockbridge	•				Schefke, Philip, Downers Grove	•	•	•	•
Babo, Evis, Atlanta	•				Tiersky, Terri, Skokie	•	•	•	•
Benson, Henry, Atlanta	•				Unger, Joseph, Chicago	•	•	•	•
Bradberry, R. David, Marietta	•				Van Scoyoc, Stacey, Bloomington	•	•	•	•
Halpern, Stanley, Woodstock	•				Watson-Lowry, Cheryl, Chicago	•	•	•	•
Harrington, John, Milledgeville	•				<b>Alternates</b>				
Jernigan, Ben, Decatur	•				Benz, James, Chicago	•			
Mann, Marshall, Rome	•				Caraba, Brian, Chicago	•			
Shatz, Peter, Alpharetta	•				Maggio, Frank, Elgin	•			
Wells, Erik, Athens	•				Moore, John, Homewood	•			
<b>Hawaii</b>					Noraian, Kirk, Bloomington				
<b>Delegates 3</b>					Norten, Mistie, Crystal Lake	•			
Cassella, Edmund, Honolulu	•	•	•	•	Osmanski, Richard, Crystal Lake	•			
Fujimoto, Patsy, Hilo	•	•	•	•	Palliser, Paul, Cary	•			
Nunokawa, Neil, Wailuku	•	•	•	•	Pappas, Renee, Arlington Heights	•			
<b>Alternates</b>					Patel, Vishruti, Plainfield	•			
Fujimoto, Lynn, Aiea	•				Pavel, Ilie, Chicago	•			
Lee, Christopher, Honolulu	•				Richardson, Peggy, Tinley Park	•			
Shimizu, Curt, Honolulu	•				Satko, Cynthia, Western Springs	•			
<b>Idaho</b>					Schneider, Thomas, Chicago	•			
<b>Delegates 3</b>					Schwartz, Timmothy, Pekin	•			
Kido, Scott, Nampa	•	•	•	•	Starsiak, Mary, Chicago	•			
Newton, Joel, Twin Falls	•	•	•	•	Storniolo, Salvatore, Norridge	•			
Thompson, Geoffrey, Coeur D'Alene	•	•	•	•	Ursitti, Victoria, Arlington Heights	•			
<b>Alternates</b>					Zehak, George, Berwyn	•			
Fukuoka, Brooke, Twin Falls	•				<b>Indiana</b>				
Hisel, John, Boise	•				<b>Delegates 9</b>				
Penberthy, Timothy, Coeur D'Alene	•				Asdell, Jay, South Bend	•	•	•	•
<b>Illinois</b>					Burns, Jill, Richmond	•	•	•	•
<b>Delegates 20</b>					Ellinwood, Steven, Fort Wayne	•	•	•	•
Barnes, Bradley, Normal	•	•	•	•	Holm, Steven, Portage	•	•	•	•
Blew, Bryan, Moline	•	•	•	•	Leighty, Chad, Marion	•	•	•	•
Boghosian, Alice, Park Ridge	•	•	•	•	Maupin, Heather, Plainfield	•	•	•	•
Bordenave Bishop, Susan, Peoria	•	•	•	•	Phillips, Gregory, Columbus	•	•	•	•
Doroshov, Susan, Skokie	•	•	•	•	Platt, Jeffrey, Indianapolis	•	•	•	•
Frett, James, Mount Prospect	•	•	•	•	Wolf, David, Indianapolis	•	•	•	•
Hale, Denise, Palos Hills	•	•	•	•	<b>Alternates</b>				
Imburgia, Louis, Park Ridge	•	•	•	•	Bergdoll, Allison, Fort Wayne	•			
Kay, Douglas, Oakbrook Terrace	•	•	•	•	Celis, Lorraine, South Bend	•			
Larsen, Christopher, Moline	•	•	•	•	Holwager, David, Cambridge City	•			
Markarian, Randall, Swansea	•	•	•	•	Schechner, Terry, Valparaiso	•			
Mousel, Barbara, Chicago	•	•	•	•	Shupe, James, Fort Wayne	•			
Nelson, Kevin, Peoria	•	•	•	•	Stolarz, Jeffrey, Whiting	•			
					Treat, Timothy, Indianapolis	•			
					Valliere, Roger, Fort Wayne	•			

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Yoder, Benjamin, Fort Wayne	•				Hildebrandt, David, Slidell	•			
<b>Iowa</b>					Luminais, Kenneth, Thibodaux	•			
<b>Delegates 5</b>					Scott, King, West Monroe	•			
Bokemper, Richard, Sergeant Bluff	•	•	•	•	Weaver, Daniel, Lake Charles	•			
Fuller, Maria, Corning	•	•	•	•	<b>Maine</b>				
Gleason Martin, Fairfield	•	•	•	•	<b>Delegates 2</b>				
Peckosh, Valerie, Dubuque	•	•	•	•	Creisher, Gary, Kennebunk	•	•	•	
Stuntz, Ryan, Farley	•	•	•	•	Shenkin, Jonathan, Augusta	•	•	•	•
<b>Alternate</b>					<b>Alternates</b>				
Johnsen, David, Iowa City	•				Horutz, Kathryn, Portland	•			
<b>Kansas</b>					Tourigny, Dean, Biddeford	•			
<b>Delegates 4</b>					<b>Maryland</b>				
Herre, Craig, Leawood	•	•	•	•	<b>Delegates 8</b>				
Rogers, Paul, Arkansas City	•	•	•	•	a'Becket, Thomas, Millersville	•	•	•	•
Roufs, Brett, Newton	•	•	•	•	Brown, Wendy, Columbia	•	•	•	•
Sherwood, Cynthia, Independence	•	•	•	•	Doring, Charles, Rockville	•	•	•	•
<b>Alternates</b>					Liang, Christopher, Potomac	•	•	•	•
Armfield, Melodee, Augusta	•				Rogers, Rick, Frederick	•	•	•	
Fales, John, Olathe	•				Romaine, Diane, Frostburg	•	•	•	•
Hale, Hal, Wichita	•				Shepley, George, Baltimore	•	•	•	•
Siebrasse, Jon, Parsons					Wilson, Robert, Gaithersburg	•	•	•	•
<b>Kentucky</b>					<b>Alternates</b>				
<b>Delegates 5</b>					Allen, Gregory, Salisbury	•			
Elliott, O. Andy, II, Martin	•	•	•	•	Benavent, Vanessa, Clarksville	•			
Howard, H. Fred, Harlan	•	•	•	•	Christopher, Ann, Baltimore	•			•
Johnson, J. Michael, Owensboro	•	•	•	•	Horner, R. Mark, Owings Mills	•			
Lee, William, Lexington	•	•	•	•	Mancini, Ronald, Bethesda	•			
Price, Dennis, Louisville	•	•	•	•	Morris, Edwin, Kingsville	•			
<b>Alternates</b>					Nokkeo, Jay, Gaithersburg				
Collins, William, Pikeville					Ziara, Celeste, Princess Anne	•			
Curry, Barry, Owensboro	•				<b>Massachusetts</b>				
Depp, Ansley, Highland Heights	•				<b>Delegates 16</b>				
Wall, Kevin, Bellevue	•				Arrigo, Michael, Revere	•	•	•	
<b>Louisiana</b>					Boss, John, Lowell	•	•	•	•
<b>Delegates 6</b>					Doherty, Mark, Westborough	•	•	•	•
Basinger, Brian, Shreveport	•	•	•	•	Eddy, Arthur, Shirley	•	•	•	•
Chaney, Mark, New Orleans	•	•	•	•	Fisher, John, Salem	•	•	•	•
Garrett, Marty, Baton Rouge	•	•	•	•	Hanlon, Mary Jane, Boston	•	•	•	•
Ortego, L. Stephen, Ball	•	•	•	•	Leland, Robert, Hanover	•	•	•	•
Soileau, Kristi, New Orleans	•	•	•	•	Lustbader, David, Quincy	•	•	•	•
Weaver, Stephanie, Lake Charles	•	•	•	•	Marchand, Richard, Yarmouth Port	•	•	•	•
<b>Alternates</b>					Martin, Raymond, Mansfield	•	•	•	•
Daly, Nelson, Baton Rouge	•				Moriarty, Janis, Winchester	•	•	•	•
Foy, Charles, Madisonville	•				Paul, Mina, Roslindale	•	•	•	•
					Raayai, Tofigh, Everett	•	•	•	•

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Trowbridge, Thomas, Lowell	•	•	•	•	McDonnell, Stephen, Inver Grove Heights	•	•	•	•
Wise, R. Jay, Lee	•	•	•	•	Resch, R. David, Saint Paul	•	•	•	•
Zolot, Howard, North Andover	•	•	•	•	Taylor, Howard, New Brighton	•	•	•	•
<b>Alternates</b>					Williams, Douglas, Bemidji	•	•	•	•
Gusha, John, Holden	•				<b>Alternates</b>				
Maslowski, James, Springfield	•				Johnson, Kirby, Spicer	•			•
Richman, Andrea, Newton Center	•				Kurkowski, Michael, Shoreview	•			
Silvius, Charles, Revere					Nickman, James, Fridley	•			
					Sorensen, Maureen, Worthington	•			
<b>Michigan</b>					<b>Mississippi</b>				
<b>Delegates 17</b>					<b>Delegates 3</b>				
Benivegna, Vincent, East Lansing	•	•	•	•	Donald, W. Mark, Louisville	•	•	•	•
Christy, Todd, Berrien Springs	•	•	•	•	Hollingsworth, James, Newton	•	•	•	•
Conlon, Steven, Grand Rapids	•	•	•	•	Scarbrough, A. Roddy, Richton	•	•	•	•
DeGroat, Larry, Bingham Farms	•	•	•	•	<b>Alternates</b>				
Gingrich, Margaret, Big Rapids	•	•	•	•	Burns, H. Joe, Ridgeland	•			
Gorecki, Christopher, Warren	•	•	•	•	Gwin, Sherry, Pearl	•			
Hennessy, Rhonda, Holly	•	•	•	•	Holman, John, Tupelo	•			
Johnston, Mark, Lansing	•	•	•	•					
Knowles, Lisa, East Lansing	•	•	•	•	<b>Missouri</b>				
Knudsen, Eric, Escanaba	•	•	•	•	<b>Delegates 7</b>				
Kolling, Josef, Ann Arbor	•	•	•	•	Burke, Mary, Saint Louis	•	•	•	•
Makowski, Martin, Clinton Township	•	•	•	•	Butler, Robert, Webster Groves	•	•	•	•
Meraw, Stephen, Grosse Pointe Woods	•	•	•	•	Mattingly, Emily, Chillicothe	•	•	•	•
Peters, Debra, Grand Rapids	•	•	•	•	Patterson, Michael, Joplin	•	•	•	•
Shunk, Clayton, Sault Ste. Marie	•	•	•	•	Raman, Prabu, Kansas City	•	•	•	•
Tremblay, Robert, Huntington Woods	•	•	•	•	Rachin, Theodore, St. Louis	•	•	•	•
Tulak-Gorecki, Michele, Warren	•	•	•	•	Tait, Robert, Grandview	•	•	•	•
<b>Alternates</b>					<b>Alternates</b>				
Abed-Elahad, Joelle, Saint Clair Shores	•				Pyle, Marsha, Kansas City	•			
Barsamian, Mark, Garden City	•				Rapini, Vincent, Webster Groves	•			
Berns, Jonathan, West Branch	•				Roseman, Lori, Saint Peters	•			
Coleman, Robert, Livonia	•				Seyer, Nathan, Dexter	•			
DeHaan, David, Lake Orion					Sokolowski, Joseph, Florissant	•			
Dube, Nathalie, Mount Pleasant	•				White, Connie, Kansas City	•			
Farooq, Naila, Commerce Township	•				Zust, Mark, Saint Peters	•			
Kamar, John, Lathrup Village	•								
Maihofer, Michael, Roseville	•				<b>Montana</b>				
Palm, Norman, Grand Rapids	•				<b>Delegates 2</b>				
Smiley, Christopher, Grand Rapids	•				Gillette, Jane, Bozeman	•	•	•	•
Vitek-Hitchcock, Alexa, Dewitt	•				Hadnot, Douglas, Lolo	•	•	•	•
<b>Minnesota</b>					<b>Alternates</b>				
<b>Delegates 9</b>					Lindemann, Kurt, Kalispell	•			
Aguirre, Alejandro, North Oaks	•	•	•	•	Tanguay, Jason, Bozeman	•			
Andersen, David, Park Rapids	•	•	•	•					
Cannon, Peter, Saint Paul	•	•	•	•	<b>Navy</b>				
Cziok, Amber, Litchfield	•	•	•	•	<b>Delegates 2</b>				
Dens, Kevin, Baxter	•	•	•	•	Huber, Jayson, Rockville, MD	•	•	•	•

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Shaffer, Gayle, Rockville, MD	•	•	•	•	Gallucci, Lisa, Marlton	•			
<b>Alternate</b>					Ghisalberti, Luciano, North Bergen	•			
Molinaro, Joseph, Kensington, MD	•				Goldberg, David, North Plainfield				
<b>Nebraska</b>					Kahn, Richard, New Brunswick	•			
<b>Delegates 3</b>					LoMonaco, Carmine, Newark	•			
Hinrichs, R. Mark, Lincoln	•	•	•	•	Pomerantz, Kenneth, Union	•			
Morrison, Scott, Omaha	•	•	•	•	Riva, Richard, Chatham	•			
Wieting, Scott, York	•	•	•		Roshong, Bryon, Dumont	•			•
<b>Alternates</b>					Shah, Dipika, Holmdel	•			
Thomsen, Brett, Omaha	•				Sterritt, Frederic, Raritan	•			
Tusha, Kenneth, Bloomfield									
<b>Nevada</b>					<b>New Mexico</b>				
<b>Delegates 3</b>					<b>Delegates 2</b>				
McAlpine, George, Las Vegas	•	•	•	•	Goad, Jamie, Carrizozo	•	•	•	•
Saxe, Steven, Las Vegas	•	•	•	•	Manz, Julius, Farmington	•	•	•	•
White, David, Elko	•	•	•	•	<b>Alternates</b>				
<b>Alternates</b>					Powell, Julie, Clovis	•			
Dragon, Richard, Gardnerville	•				Valles, Joe, Albuquerque	•			
Heinen, Margaret, Sparks	•								
<b>New Hampshire</b>					<b>New York</b>				
<b>Delegates 2</b>					<b>Delegates 38</b>				
Rosato, Richard, Concord	•	•	•	•	Andolina, Richard, Hornell	•	•	•	•
Sousa, Manuel, Salem	•	•	•	•	Bauman, Mark, Scotia	•	•	•	•
<b>Alternates</b>					Busino, Lawrence, Albany	•	•	•	•
Hawkins, Hubert, Littleton	•				Cooperman, Kenneth, New York	•	•	•	•
Jackson, Lindsey, Gorham	•				Cuomo, Anthony, Carmel	•	•	•	•
<b>New Jersey</b>					Delaney, David, Albany	•	•	•	•
<b>Delegates 14</b>					Dowd, Brendan, Buffalo	•	•	•	•
Carotenuto, Frank, Roselle Park	•	•	•	•	Essig, Steven, Albany	•	•	•	•
Chenman, Alan, Linwood	•	•	•		Galati, James, Clifton Park	•	•	•	•
Chinoy, Walter, Scotch Plains	•	•	•	•	Gellert, Jonathan, Lowville	•	•	•	•
Clemente, Elizabeth, Morristown	•	•	•	•	Goudarzi, Payam, Johnson City	•	•	•	•
Di Vincenzo, Giorgio, Jersey City	•	•	•		Gounardes, Steven, Brooklyn	•	•	•	•
Dietz, Andrew, Haddon Heights	•	•	•	•	Hanley, Kevin, Buffalo	•	•	•	•
Galvis, Diana, Totowa	•	•	•	•	Hoddick, James, Tonawanda	•	•	•	•
Graham, Frank, Bronx	•	•	•		Jacobo, Amarilis, Bronx	•	•	•	
Hersh, Robert, Freehold	•	•	•		Jacobs, James, New York	•	•	•	•
Krantz, Daniel, Somerset	•	•	•	•	Jhaveri, Viren, Flushing	•	•	•	
Rothstein, Alan, Denville	•	•	•	•	Karp, William, Manlius	•	•	•	•
Shekitka, Robert, Newark	•	•	•		Lacey, Frederick, Binghamton	•	•	•	•
Vitale, Mark, Edison	•	•	•	•	Leary, Paul, Smithtown	•	•	•	•
Whitman Sidney, Hamilton Square	•	•	•		Ledner, Jay, Little Neck	•	•	•	•
<b>Alternates</b>					Levitt, Neal, Webster	•	•	•	•
Ambrosio, Maria, Wayne	•				Lewenson, Richard, Hastings-on-Hudson	•	•	•	•
Babinowich, Fredrick, Mercerville	•				Lukaswitz, Mary Ellen, Valhalla	•	•	•	•
					Maranga, Maria, Aquebogue	•	•	•	•
					Medrano-Saldana, Lauro, Brooklyn	•	•	•	•
					Miller, Raymond, Lancaster	•	•	•	•
					Mindlin, Mitchell, Brooklyn	•	•	•	•

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Palmaccio, Frank, Plainview	•	•	•	•	Scheiderich, Mark, Fletcher	•	•	•	•
Patella, Paul, Hartsdale	•	•	•	•	Williams, William, Greenville	•	•	•	•
Peskin, Robert, Garden City	•	•	•	•	<b>Alternates</b>				
Porcelli, Eugene, Garden City	•	•	•	•	Ahmad, Nazir, Raleigh	•			
Ratner, Craig, Staten Island	•	•	•	•	Bailey, L'Tanya, High Point	•			
Shipper, David, New York	•	•	•	•	Chadwick, D. Gregory, Greenville	•			
Silvestri, Mario, Vestal	•	•	•	•	Cunningham, Catherine, Durham	•			
Skolnick, Jay, Webster	•	•	•	•	DeRossi, Scott, Chapel Hill				
Snyder, Steven, Stony Brook	•	•	•	•	Hardesty, Willis, Raleigh	•			
Weinberger, Mark, Bordentown	•		•	•	Hollowell, Robert, Charlotte	•			
<b>Alternates</b>					King, Rebecca, Chapel Hill	•			
Ariola, Gabriel, Brooklyn					Olson, Shelley, Oxford	•			
Barnashuk, Frank, Buffalo	•	•			Porter, Royce, Winston Salem	•			
Comisi, John, Lansing	•								
Damelio, Steven, Penfield	•				<b>North Dakota</b>				
Donnarumma, Glen, Tonawanda	•				<b>Delegates 2</b>				
Fujimoto, Luis, New York	•				Erlandson, Steven, Grand Forks	•	•	•	•
Gehani, Rekha, Jackson Heights	•				Tronsgard, Paul, Fargo	•	•	•	•
Harrison, Wayne, Saratoga Springs	•				<b>Alternates</b>				
Henner, Kevin, Deer Park	•				Berg, Caron, Valley City	•			
Jonke, Guenter, Stony Brook	•				Olson, David, Minot	•			
Khurana, Irvind, New York	•								
Kilimitzoglou, Dimitrios, Smithtown	•				<b>Ohio</b>				
Kim, Paul, Suffern	•				<b>Delegates 17</b>				
Krishnan, Prabha, Forest Hills	•		•		Baytosh, Joseph, Girard	•	•	•	•
Mears, Ernest, Oswego	•				Bronson, Mark, Cincinnati	•	•	•	•
Mentzelopoulou, Ioanna, New York	•				Chopra, Manish, Cincinnati	•	•	•	•
Merryman, Jacob, Queensbury	•				Dunlap, Brian, Coshocton	•	•	•	•
Miller, David, East Meadow					Haid, Tara, Worthington	•	•	•	•
Patel, Minerva, White Plains	•				Halasz, Michael, Kettering	•	•	•	•
Quartey, Tricia, Brooklyn	•				Hering, Denise, Reynoldsburg	•	•	•	•
Rozenberg, Barry, Woodmere	•				Jerome, Jennifer, Akron	•	•	•	•
Scharoff, Gary, New Rochelle	•				Kelly, Thomas, Beachwood	•	•	•	•
Segelnick, Stuart, Brooklyn					Laing, Kevin, Van Wert	•	•	•	•
Shreck, Michael, New Hyde Park	•				Marcucci, Richard, Lorain	•	•	•	•
Stahl, Berry, Bronx					Mazzola, Robert, Miamisburg	•	•	•	•
Tibbetts, John, Williamsville					McCarthy, Brittany, Columbus	•	•	•	•
Viola, Joseph, Webster	•				Moore, Steven, West Chester	•	•	•	•
Weisfuse, Deborah, New York	•				Paumier, Thomas, Canton	•	•	•	•
					Pelok, Brett, Toledo	•	•	•	
<b>North Carolina</b>					Usman, Najia, Medina	•	•	•	•
<b>Delegates 10</b>					<b>Alternates</b>				
Buchanan, John, Lexington	•	•	•	•	Amini, Homa, Columbus	•			
Card, Rex, Raleigh	•	•	•	•	Barnes, Paul, Granville	•			
Cashion, Scott, Greensboro	•	•	•	•	Camman, Constance, Dublin	•			
Cheek, Daniel, Hillsborough	•	•	•	•	Connell, Christopher, Lyndhurst	•			
Davenport, C. Scott, Charlotte	•	•	•	•	Czerniak, Lauren, Sylvania	•			
Jewell, Wilson, Wilmington	•	•	•	•	Fitzgerald, Lori, Canfield	•			
Litaker, William, Hickory	•	•	•	•	Grbach, Bruce, Mentor	•			
Oyster, Gary, Raleigh	•	•	•	•	Guter, Hans, Circleville	•			

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Hanna, Adel, Springboro	•				Schimmel, David, State College	•	•	•	•
Jacob, Hubert, Cincinnati	•				Spruill, William, Carlisle	•	•	•	•
Khetarpal, Ruchika, Cincinnati	•				Tacelosky, Maria, Nuremberg	•	•	•	•
Kimberly, David, Akron	•				Tauberg, James, Pittsburgh	•	•	•	•
Kramer, John, Martins Ferry	•				Terry, Bruce, Wayne	•	•	•	•
Messina, Matthew, Upper Arlington	•				Zale, Matthew, Dickson City	•	•	•	•
Quereshy, Faisal, Medina	•				<b>Alternates</b>				
Williams, George, Canton	•				Daley, Daniel, Drexel Hill	•			
Wynn, Mary, Cincinnati	•				Fennell-Dempsey, Renee, Philadelphia	•			
<b>Oklahoma</b>					Goldberg, Jay, Philadelphia	•			
<b>Delegates 5</b>					Himmelberger, Linda, Devon	•			
Auld, Douglas, Mcalester	•	•	•	•	Iseman, Cynthia, Shanksville	•			
Fagan, Timothy, Enid	•	•	•	•	Kaffey, David, Lansdale	•			
Glenn, Stephen, Tulsa	•	•	•	•	Kotchick, Christopher, Scranton	•			
Jones, Krista, Edmond	•	•	•	•	McGann, Stephanie, Coatesville	•			
Lopez, Juan, Lawton	•	•	•	•	Olenwine, Cynthia, Wind Gap	•			
<b>Alternates</b>					Proctor, Ronald, New Kensington	•			
Berg, Tamara, Yukon	•				Schwartz, David, Wyomissing	•			
Cohlma, Matthew, Oklahoma City	•				Selcher, Samuel, Middletown	•			
Griffin, Shannon, Edmond	•				Thakkar, Nipa, Philadelphia	•			
Wood, C. Rieger, III, Tulsa	•				Wegman, Gary, Reading	•			
<b>Oregon</b>					Wells, Jay, III, Bethel Park	•			
<b>Delegates 6</b>					Zabelsky, Dennis, Munhall	•			
Burton, Bruce, Hood River	•	•	•	•	<b>Public Health Service</b>				
Chung, Kenneth, Portland	•	•	•	•	<b>Delegates 2</b>				
Jones, Greggery, Redmond	•	•	•	•	Makrides, Nicholas, Manassas, VA	•	•	•	•
McMahan, James, La Grande	•	•	•	•	Raghubar, Sharon, Suffolk, VA	•	•	•	•
Price, Jill, Portland	•	•	•	•	<b>Alternates</b>				
Taylor, Barry, Portland	•	•	•	•	Johnson, Michael, San Diego, CA	•			
<b>Alternates</b>					Joskow, Renee, Rockville, MD	•			
Lee, Ilkyu, Portland	•				<b>Puerto Rico</b>				
Oda, Nalani, Portland	•				<b>Delegate 1</b>				
Salathe, Olesya, Molalla	•				Del Valle Sepúlveda, Edwin, Ponce	•	•	•	•
Smith, James, Hillsboro	•				<b>Alternate</b>				
<b>Pennsylvania</b>					Reyes Martinez, Liselie, Barceloneta	•			
<b>Delegates 17</b>					<b>Rhode Island</b>				
Boyle, James, York	•	•	•	•	<b>Delegates 2</b>				
Coole, John, Mansfield	•	•	•	•	Brown, Steven, East Greenwich	•	•	•	•
Davis, Gary, Shippensburg	•	•	•	•	Gettinger, George, Cumberland	•	•	•	•
Freedman, I. Jay, Abington	•	•	•	•	<b>Alternates</b>				
Gamba, Thomas, Philadelphia	•	•	•	•	Elson, Martin, Cranston				
Incalcaterra, Charles, Bethlehem	•	•	•	•	Torbett, Jennifer, Westerly	•			
Limberakis, Cary, Abington	•	•	•	•	<b>South Carolina</b>				
Mansour, Sam, Erie	•	•	•	•	<b>Delegates 6</b>				
Markiewicz, Stanley, Blackwood	•	•	•	•	Chadwell, Rainey, Duncan	•	•	•	•
Rosenthal, Nancy, Jenkintown	•	•	•	•	Maxwell, Charles, Johnsonville	•	•	•	•
Ross, Joseph, New Castle	•	•	•	•					

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Mercer, James, West Columbia	•	•	•	•	Heinrich-Null, Lisa, Victoria	•	•	•	•
Moss, J. David, Florence	•	•	•	•	Henwood, Robbie, San Antonio	•	•	•	•
Watson, David, Greenville	•	•	•	•	Hopson, Jerry, Bonham	•	•	•	•
Wise, Edward, Beaufort	•	•	•	•	Ku, David, Lewisville	•	•	•	•
<b>Alternates</b>					May, Amos, Abilene	•	•	•	•
Cayouette, Scott, Charleston	•				McCauley, Dan, Mount Pleasant	•	•	•	•
Davis, Paul, Florence	•				Miller, Charles, Arlington	•	•	•	•
Griffin, Christopher, Greenwood	•				Moore, Alan, Austin	•	•	•	•
McDonald, Thomas, Florence	•				Morchat, Arthur, Kilgore	•	•	•	•
Mikell, Julia, Columbia	•				Peppard, Richard, Austin	•	•	•	•
Napier, Rocky, Aiken	•				Plemons, Jacqueline, Dallas	•	•	•	•
<b>South Dakota</b>					Poteet, Sarah, Dallas	•	•	•	•
<b>Delegates 2</b>					Purdy, John, El Paso	•	•	•	•
Bierschbach, Mark, Milbank	•	•	•	•	Sanders, Lance, Austin	•	•	•	•
Titze, Grant, Watertown	•	•	•	•	Walters, Karen, Houston	•	•	•	•
<b>Alternates</b>					Worsham, Debrah, Center	•	•	•	•
Frankman, Michael, Sioux Falls	•				<b>Alternates</b>				
Lynch, Edward, Rapid City					Bone, James, Kerrville	•			
<b>Tennessee</b>					Crump, Thomas, Dallas	•			
<b>Delegates 7</b>					Danna, Jodi, Plano	•			
Beauchamp, K. Jean, Clarksville	•	•	•	•	Ho, Duc, Katy	•			
Davis, Jay, Shelbyville	•	•	•	•	James, Laji, Houston	•			
McNeely David, Elizabethton	•	•	•	•	Kennedy, Paul, Corpus Christi	•			
Moore, R. Chris, Martin	•	•	•	•	King, Kyle, Lufkin	•			
Orwick-Barnes, Susan, Knoxville	•	•	•	•	Lee, Ronald, Colleyville	•			
Raum, Rhett, Lafayette	•	•	•	•	Najera, Michael, El Paso	•			
Switzer-Nadasdi, Rhonda, Nashville	•	•	•	•	Neal, Robert, Frisco	•			
<b>Alternates</b>					Roberts, Matthew, Crockett	•			
Avery, James, Memphis	•				Rodriguez, Victor, Houston	•			
Bryant, Kevin, Chattanooga	•				Shisler, Adam, Houston	•			
Bryant, Lanora, Jackson	•				Smith, Carmen, Dallas	•			
Dycus, Richard, Cookeville					Stokley, Rhonda, Austin	•			
Fain, Walter, Knoxville	•				Tillman, Michael, Fort Worth	•			
<b>Texas</b>					<b>Utah</b>				
<b>Delegates 27</b>					<b>Delegates 5</b>				
Armstrong, Craig, Houston	•	•	•	•	Cowley, Mark, Ogden	•	•	•	•
Bogan, Douglas, Houston	•	•	•	•	Faddis, Kelly, Draper	•	•	•	•
Cammarata, Rita, Houston	•	•	•	•	Larson, Brent, Salt Lake City	•	•	•	•
Cazares, Jose, McAllen	•	•	•	•	Skene, Larisse, Salt Lake City	•	•	•	•
Cooley, Ralph, Houston	•	•	•	•	Theurer, Scott, Logan	•	•	•	•
Duncan, David, Amarillo	•	•	•	•	<b>Alternates</b>				
Garcia, John, McAllen	•	•	•	•	Calderwood, Cody, Park City	•			
Gerlach, William, Plano	•	•	•	•	Chamberlain, Darren, springville	•			
Goulding, Michael, Fort Worth	•	•	•	•	Zeh, Glenn, Layton	•			
Graves, Cody, Goldthwaite	•	•	•	•	<b>Vermont</b>				
Harrison, Thomas, Katy	•	•	•	•	<b>Delegates 2</b>				
					Knippler, Arthur, Randolph Center	•	•	•	•

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Pitmon, Stephen, Colchester	•	•	•	•	Ogata, Gregory, Sammamish	•	•	•	•
<b>Alternates</b>					Pauley, Cynthia, Bellevue	•	•	•	
Coakley, Cassandra, Montpelier	•				Rekhi, Princy, Renton	•	•	•	•
					Russell, Nathan, Bainbridge Island	•	•	•	•
Opsahl, Thomas, Rutland	•				Shvartsur, Oleg, Issaquah	•	•	•	•
<b>Veterans Affairs</b>					Walker, Mark, Kent	•	•	•	•
<b>Delegates 2</b>					<b>Alternates</b>				
Arola, Patricia, Fredericksburg, VA	•	•	•		Baer, Theodore, Tacoma	•			
Gerngross, Peter, Pearland, TX	•	•	•	•	Delecki, Christopher, Seattle				
<b>Alternate</b>					Jennings, Mary, Seattle	•			•
Miranda, Gayle, New York, NY	•				Smith, Mary, Spokane	•			
					Williams, Laura, Wenatchee	•			•
<b>Virgin Islands</b>					<b>West Virginia</b>				
<b>Delegate 1</b>					<b>Delegates 2</b>				
Wechter, Stuart, St Thomas					Leslie, Thomas, Berkeley Springs	•	•	•	•
					Medovic, Michael, Wheeling	•	•	•	•
<b>Virginia</b>					<b>Alternates</b>				
<b>Delegates 11</b>					Majestro, Philip, Charleston	•			
Anderson, David, Burke	•	•	•	•	Smith, Jon, Charleston	•			
Bell, Alonzo, Alexandria	•	•	•	•					
Dougherty, William, Falls Church	•	•	•	•	<b>Wisconsin</b>				
Galstan, Samuel, Chester	•	•	•	•	<b>Delegates 9</b>				
Howell, Ralph, Suffolk	•	•	•	•	Chiera, Edward, Beloit	•	•	•	•
Hutchison, Bruce, Centreville	•	•	•	•	Clemens, David, Wisconsin Dells	•	•	•	•
Klima, Rodney, Burke	•	•	•	•	Crego, Mark, Wauwatosa	•	•	•	•
Link, Michael, Newport News	•	•	•	•	Hansen, Chris, Two Rivers	•	•	•	•
Reynolds, Elizabeth, Richmond	•	•	•	•	Moser, John, Milwaukee	•	•	•	•
Sherwin, Ted, Orange	•	•	•	•	Mueller, Rick, Marshfield	•	•	•	•
Wood, Roger, Midlothian	•	•	•	•	Murphy, Ned, Racine	•	•	•	•
<b>Alternates</b>					Reid, Thomas, Madison	•	•	•	•
Black, David, Vinton	•				Tepe, Patrick, Verona	•	•	•	•
Iuorno, Frank, Glen Allen	•				<b>Alternates</b>				
Norbo, Justin, Purcellville	•				Hebl, Monica, Milwaukee	•			
Olenyn, Paul, Burke	•				Holdredge, Daryl, Green Bay	•			
Ryan, Danielle, Fairfax	•				Johnson, Christopher, Eau Claire	•			
Sarrett, David, Richmond	•				Lobb, William, Milwaukee	•			
Southern, Cynthia, Pulaski	•				Meyers, Carl, West Bend	•			
Taliaferro, Richard, Stephens City	•				Rodriguez, Julio, Brodhead	•			
Thompson, Brian, Marion	•				Steele, Rachel, Black River Falls	•			
Vlahos, Stephanie, Salem	•				Uker, Joseph, La Crosse	•			
Young, Brenda, Fairfax	•				Vandelaar, Kent, Chippewa Falls	•			
<b>Washington</b>					<b>Wyoming</b>				
<b>Delegates 12</b>					<b>Delegates 2</b>				
Cook, Amy, Auburn	•	•	•	•	Hill, Rodney, Casper	•	•	•	•
Dahl, Ronald, Ferndale	•	•	•	•	Jeffries, Carl, Worland	•	•	•	•
Edgar, Bryan, Federal Way	•	•	•	•	<b>Alternates</b>				
Edgar, Linda, Federal Way	•	•	•	•	Clifford, Lynn, Lyman	•			
Larson, Bernard, Mount Vernon	•	•	•	•	Griggs, Lance, Torrington	•			
Minahan, David, Kenmore	•	•	•	•					

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