

# 2019

## Transactions

160th Annual Session  
San Francisco, California  
September 6–9, 2019

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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 17–19

May 15–16

June 23–24

July 13

August 11–13

August 20

September 10

October 14

October 31

November 22

December 15

## Notes

## Minutes of the Board of Trustees

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February 17–19, 2019

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. Jeffrey M. Cole, president, on Sunday, February 17, 2019, at 11:15 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: Jeffrey M. Cole, Chad P. Gehani, Richard A. Huot, Craig W. Herre, Glen D. Hall, Ted Sherwin, Kathleen T. O’Loughlin, Richard C. Black, Raymond A. Cohlma, Susan Becker Doroshov, Linda J. Edgar, Judith M. Fisch, Jay F. Harrington, Jr., Daniel J. Klemmedson, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Cesar R. Sabates, George R. Shepley, James D. Stephens, and Roy Thompson. Dr. Linda K. Himmelberger attended via telephone conference.

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

Dr. Kyger and Dr. Himmelberger were not in attendance at the meeting on Tuesday morning, February 19, 2019.

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; Jordan Baugh, chief technology officer; Jerome K. Bowman, chief, Governance and Strategy Management; J. Craig Busey, Esq., general counsel; Judith Fleeks, vice president, Human Resources, James Goodman, senior vice president, Business and Conferences; Michael A. Graham, senior vice president, Government and Public Affairs; Michelle Hoffman, vice president, Publishing; Catherin H. Mills, vice president, Conferences and Continuing Education; Stephanie Moritz, chief communications officer; David Preble, senior vice president, Practice Institute; Robert Quashie, vice president, Business Operations and Strategy; 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. Ray Jarvis, chair, New Dentist Committee; Dr. William Calnon, president and interim executive director, ADAF; Dr. William Robinson, chair, JCNDE; Dr. Cataldo Leone, vice chair, JCDNE; Mr. Jim Wiggett, chief executive officer, Jackson Hole Group; Dr. Suzanne Ebert, vice president, ADABIG, Dental Practice and Relationship Management; and Ms. Bree Simmers, manager, ADABIG, Projects Operations and Administration.

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; Kyle Smith, manager, House of Delegates and Wendy J. Wils, deputy general counsel. Other ADA staff members were in attendance for specific agenda items.

Before consideration of business, Dr. Cole 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. Cole asked if there were any items of new business. The following item of new business was identified:

- Update on Annual Session Logistics and Registration (Dr. Cole)

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

**B-2-2019. 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. Cole reviewed the list of proposed consent items; the following reports were removed from consent.

- ADA/FDI Delegation: 2019 FDI Council/Committee Candidates (Res. B-4 through B-7)
- Report from the FDI National Liaison Officer: 2018 FDI Annual World Dental Congress: Buenos Aires

**B-1-2019. 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 16, 2018, Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-3-2019. Resolved**, that the minutes of the December 16, 2018, Board of Trustees meeting be approved.

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

**Report of the Audit Committee:** On behalf of the Committee, Dr. Daniel J. Klemmedson, chair, presented the report of the Audit Committee's February 16, 2019, meeting. The report identified major topics discussed, reports received and actions taken.

*Report on Risk Management—Tracking the Past into the Future.* Dr. O'Loughlin provided a summary report on the status of enterprise risks that have been identified as significant governance, strategic, organizational, operational, financial, legal and compliance and reputational risks to the Association and discussed some of the mitigation strategies employed by the ADA to lower those risks.

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Richard Black, chair, presented the report of the Budget and Finance Committee's February 15, 2019, meeting. The report identified the major topics discussed, reports received and actions taken. The Committee presented its recommendations on the following resolutions for the Board of Trustees' consideration.

*Report of the Council on Dental Benefit Programs Board Contingent Funding Request—Comprehensive Clinical Data Warehouse/Registry.* Dr. Black moved Resolution B-8 with the Committee's recommendation to adopt; on vote Resolution B-8 was adopted by the Board of Trustees.

**B-8-2019. Resolved**, that the following appropriation be made from the 2019 Board Contingent fund to cover the staffing costs for a full-time employee (FTE) to manage the ADA comprehensive clinical data warehouse/registry as well as costs associated with travel by the advisory team for attendance at meetings held at the ADA.

Board Contingent Fund  
Cost Center: 090-1500-00 Amount: **Up to \$260,000**

*Report of the Division of Technology: Coveo Search Migration to Coveo Cloud Funding Request.* Dr. Black moved Resolution B-10 with the Committee's recommendation to adopt; on vote Resolution B-10 was adopted by the Board of Trustees.

**B-10-2019. 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 Coveo Cloud migration and implementation.

Division of Technology  
(Cost Center: 090-1450-000)  
Coveo Cloud Migration and Implementation – **Up to \$125,000**

Dr. Black moved Resolution B-14 with the Committee's recommendation to adopt; on vote Resolution B-14 was adopted by the Board of Trustees.

**B-14-2019. Resolved**, that the Board approves the transfer of the projected spending needs of \$5.59 million from reserves for the first two quarters of 2019, and be it further

**Resolved**, that the Budget and Finance Committee continue to review the reserve spending needs and rebalancing strategy in the second half of 2019.

**Report of the Business Innovation Committee:** On behalf of the Business Innovation Committee, Dr. Richard C. Black, chair, presented the report of the Committee's February 16, 2019, meeting. The report identified major topics discussed.

**Report of the Diversity and Inclusion Committee:** On behalf of the Diversity and Inclusion Committee, Dr. Judith M. Fisch, chair, presented the report of the Committee's February 16, 2019, meeting. The report identified major topics discussed and reports received.

**Report of the Compensation Committee:** This confidential report, presented by Dr. Ray Cohlma, Committee chair, was considered during a closed session of the Board of Trustees on Tuesday, February 19. In open session, the following resolutions were considered and adopted by the Board of Trustees.

**B-17-2019.** (Confidential Action)

**B-18-2019. Resolved**, that the Board approve the Executive Director's 2019 Goals attached to the February 2019 Compensation Report.

**B-19-2019.** (Confidential Action)

Note. The approved 2019 goals for the Executive Director are appended (see page 157).

**Report of the Governance Committee:** On behalf of the Governance Committee, Dr. Daniel J. Klemmedson, chair, presented the report of the Committee's February 15, 2019, meeting. The report identified major topics discussed, reports received and actions taken.

On behalf of the Board Rules Subcommittee, Dr. Ken McDougall presented proposed changes to the *Organization and Rules of the Board of Trustees* for the Board's consideration. Without objection, the following resolutions were adopted by the Board of Trustees.

**B-15-2019. Resolved,** that the section of the *Organization and Rules of the Board of Trustees* entitled "Honorary Membership" be amended as follows (additions underscored and deletions ~~stricken through~~):

**Honorary Membership:** The following guidelines and procedures will govern the nomination and selection process for the awarding of ADA Honorary Membership.

1. Honorary Membership in the American Dental Association is awarded by the Board of Trustees to individuals who have made outstanding contributions to the advancement of the art and science of dentistry. Honorary Membership can be awarded to dentists (who are not eligible for active, life or retired membership in the Association) or to individuals from outside the dental profession. Current tripartite (ADA, state, local) employees who have at least 20 years of service and have made outstanding contributions above and beyond expectations to the profession are eligible for nomination at a time that coincides with their retirement.
2. A nomination may be made by any active, life or retired member in good standing of the Association through the trustee of his or her district, or by any elective or appointive officer or trustee of the Association. The nominee's complete curriculum vitae and three letters of support should be mailed to the Executive Director by May 1 of a deadline established each year for submission to the Board of Trustees for consideration at the Board's June meeting. The deadline will be in the first half of the year and will be set to allow due diligence and preparation of reports to the Board and to allow appropriate notification to awardees. The deadline will be shared with the Board in the call for nominations.

The three letters of support, which should be from active, life or retired members in good standing of the Association, should specifically identify the nominee's contributions to the advancement of the art and science of dentistry.

3. Supporting documentation of a nominee's accomplishments should be provided from the appropriate international organization or state or local dental society and must accompany the nomination. Information will be verified by the appropriate Association agency.
4. Nominations received after the ~~May 1 deadline for consideration at the June Board meeting~~ will be placed on file along with the required curriculum vitae and three letters of support for consideration the next year's ~~June Board meeting~~.
5. There is a limitation of one nomination per year from any individual. Nominations for Honorary Membership will be considered by the Board of Trustees during a closed session and the report designated as confidential until appropriate action is taken.

**B-16-2019. Resolved,** that the section of the *Organization and Rules of the Board of Trustees* entitled "The Distinguished Service Award" be amended as follows (additions underscored and deletions ~~stricken through~~):

**The Distinguished Service Award:** The Distinguished Service Award is the highest honor conferred by the Association's Board of Trustees. Only members of the dental profession are eligible for the Distinguished Service Award. Each year the Board of Trustees may select one recipient for the Award ~~which will be presented at the first meeting of the House of Delegates.~~

As it is customary for the President to nominate the Distinguished Service Award recipient, nominations should be submitted to the President by ~~May 1 for consideration at the June Board of Trustees meeting~~ a deadline to be established each year and which will be in the first half of the year and will be set to allow due diligence and preparation of reports to the Board and to allow appropriate notification to awardees. The deadline will be shared with the Board in the call for nominations.

**Report of the Pension Committee:** On behalf of the Committee, Dr. Ted Sherwin, chair, presented the report of the Committee's February 15, 2019 meeting. The report identified major topics discussed and actions taken.

**Report of the Strategic Planning Committee Workgroup:** On behalf of the Strategic Planning Committee Workgroup, Dr. Daniel J. Klemmedson, chair, reported on the development of the next ADA strategic plan. Dr. Klemmedson presented Resolution B-9 for the Board's consideration. A motion was made to amend the mission statement by adding "support the advancement of" and striking "advance." On vote, the amendment was adopted. A subsequent motion was made to amend Objective 8 by striking "Percent completion of annual operation plans" and replacing it with the following bullet points:

- Subsidiary mission statements support ADA mission
- Sufficient resources provided by ADA annually to assure 85% completion of subsidiary annual operating plans
- Subsidiary service agreement performance measures are met by ADA

On vote, the amendment was adopted. On behalf of the Committee, Dr. Klemmedson moved B-9 as amended. On vote, Resolution B-9, as amended, was adopted by the Board of Trustees.

**B-9-2019. Resolved,** that the Board adopt "Common Ground 2025" attached as Appendix A to the February 2019 Report to the Board of the Strategic Planning Workgroup, as amended, as the next strategic plan of the Association, effective from January 1, 2020 until January 1, 2025.

Note. Common Ground 2025, ADA Strategic Plan, as amended, is appended on page 159.

## **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, reported on results from year two of the three-year campaign to increase dental visits for ADA dentists. The Council on Communications will report back to the 2019 House of Delegates.

### **Education/Professional Affairs**

**The Strategic Direction of the Joint Commission on National Dental Examinations:** Dr. William Robinson, chair, and Dr. Cataldo Leone, vice chair, reported on JCNDE's development of two separate self-assessment reports and the development of a draft strategic plan based on findings from a three-day strategic planning meeting held in May 2018. JCNDE will continue to apprise the Board of Trustees on progress related to these matters.

### **Joint Commission on National Dental Examinations: Report on 2018 Research and Development**

**Fund:** This informational report provided the required summary of Research and Development Fund activity (consent calendar item).

**Commission on Dental Accreditation: Informational Report on 2018 Research and Development Fund:** This informational report provided a summary (January through December) on the 2018 Research and Development Fund activity (consent calendar item).

**Report of the Dental Licensure Objective Structured Clinical Examination (DLOSCE) Steering Committee: DLOSCE Governance:** This informational report updated the Board of Trustees on progress concerning DLOSCE development efforts as they pertain to the identification of the DLOSCE's ultimate governing body. The Steering Committee identified the Joint Commission on National Dental Examinations (JCNDE) as an ideal candidate to serve as the DLOSCE governing body. Proposed revisions to governance documents will be presented in a future Board of Trustees meeting (consent calendar item).

## Finance and Operations

**Report of the Final Status of the 2018 Board Contingency:** A Board Contingency of \$750,000 was authorized in the 2018 budget. The Board of Trustees approved total requests in the amount of \$670,231, leaving a balance of \$79,769 (consent calendar item).

**Report on the Status of the 2019 Board Contingency:** A Board Contingency Fund of \$750,000 was authorized in the 2019 budget. The Board of Trustees approved total requests in the amount of \$385,000, leaving a balance of \$365,000 (consent calendar item).

**Update Report on Great-West and Annuity Pending Sale to Protective Life Corporation:** This informational report is a follow-up to the January 25 talking points which notified the ADA Board of the pending sale of Great-West Life & Annuity Insurance Company's (GWL&A) individual life insurance and annuity business, including the ADA Members Insurance Plans, to Protective Life Corporation (Protective) (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 and D.C. Property:** Mr. Graham provided an update on developments in Washington, D.C. The following key issues were identified in this report: Action for Dental Health bill, appropriations, McCarran-Ferguson, opioid abuse, OTC monograph reform, non-covered services, surgeon general report, CDHC, community water fluoridation, Medicaid, ED referral, workforce, third party reimbursement, state Medicaid programs, and ADPAC.

**ADA Coalition Participation: Definition of Medically Necessary Care:** Mr. Graham reported that the Medically Necessary Coalition, of which the ADA is a member, is interested in broadening the definition of medical necessity under Medicare to cover more dental procedures. CGA recently passed a resolution requesting that the ADA president transmit a letter to the coalition affirming ADA's current narrow policy regarding medical necessity.

**ADPAC Discussion:** Following a discussion related to ADPAC policy and guidelines for giving contributions to congressional incumbents and candidates, a confidential motion was considered and adopted by the Board of Trustees. Later in the meeting, Dr. Cohlma moved to reconsider the confidential motion. On vote, the motion to reconsider was adopted. Following discussion and on vote, the confidential motion was not adopted.

## Information Technology

**Report of the Division of Technology: 2018-2019 Major Technology Initiatives Update:** This informational report provided an update of major technology initiatives for Q4 2018 and to date (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.

## Member and Client Services

**Report of the Vice President, Business Operation and Strategy: Client Services Update:** This informational report provided a summary of 2018 membership growth among active license dentists. While total membership increased, dues revenue continued to decline slightly due to downward pressure on dues collection resulting from discounts (consent calendar item).

**Report of the Vice President, Business Operation and Strategy: Membership Dues Streaming Update:** This informational report provided a progress update of the Dues Streamlining Study conducted by the ADA Council on Membership and the Council's Subcommittee on Membership Policy & Trends (consent calendar item).

## Practice Institute

**Report of the Council on Dental Benefit Programs: Consultant Appointment:** This informational report updated the Board on the four individuals appointed as consultants to serve until the close of the 2019 House of Delegates (consent calendar action).

## ADA Business Innovation Group

**ADAPT Update:** The regular session of the Board of Trustees was adjourned for the purpose of convening the Member Meeting of the ADA Business Innovation Group. This update was presented by Dr. Suzanne Ebert, vice president, ADABIG, Dental Practice and Relationship Management and Ms. Bree Simmers, manager, ADABIG, Projects Operations and Administration. Following the adjournment of the Member Meeting of the ADA Business Innovation Group, the regular session of the Board of Trustees reconvened.  
**ADA Business Enterprises, Inc.**

**Report of ADA Business Enterprises:** This informational report provided a summary of 2018 activities through November. For 2018, the ADA royalties are still projected to be below plan compared to the 2018 Budget (consent calendar item).

## ADA Foundation

**Report of the ADA Foundation:** The regular session of the Board of Trustees was adjourned for the purpose of convening the Member Meeting of the ADA Foundation. This was presented by Dr. William Calnon, president and interim executive director, ADAF. Following the adjournment of the Member Meeting of the ADA Foundation, the regular session of the Board of Trustees reconvened.

## Organizational/Other

**Report of the New Dentist Committee:** Dr. Ray Jarvis, chair, New Dentist Committee, reported updates on leadership, licensure reform, proposed amendments to the New Dentist Committee charter, and 2019 plans. On behalf of the Committee, Dr. Norbo moved Resolution B-11 with a recommendation to adopt. On vote, Resolution B-11 was adopted by the Board of Trustees.

**B-11-2019. Resolved,** that the *Rules and Organization of the Board of Trustees*, be amended as follows (additions indicated by underlining; deletions by ~~strike-outs~~)

### Charter – New Dentist Committee

*Purpose.* As a committee of the Board, the primary purpose of the New Dentist Committee is to advise the Board of Trustees on matters relating to new dentists.

*Powers.* The Board of Trustees has delegated to the New Dentist Committee the power and authority necessary to discharge its duties, including creation of subcommittees needed to carry out its responsibilities.

*Composition and Selection.* The Committee shall consist of one (1) member from each trustee district who are active members selected by the Board of Trustees. 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.

*Chair and Vice Chair.* The New Dentist Committee shall nominate a chair and submit the name of that member to the Board of Trustees for consideration. One member of the New Dentist Committee may be elected annually by the affirmative vote of a majority of members present and voting to serve as vice chair.

There shall be a Board of Trustees liaison to the New Dentist Committee. This Board of Trustees' liaison shall be assigned by the President to serve as an observer and provider of information, consistent with the guidelines for Council Liaison set forth in these *Rules*.

*Electronic Recordings.* The New Dentist Committee may cause to be made an electronic record of its proceedings to assist in the preparation of accurate meeting minutes. No other recording is permitted unless authorized by the Board of Trustees. If an electronic recording is made, the time required to retain the recording before it is destroyed or erased shall be until the conclusion of the meeting of the House of Delegates or for a period of one year, whichever is longer.

*Subcommittees and consultants.* The New Dentist Committee shall have subcommittees as appropriate. The NDC shall have the ability to appoint consultants when expertise outside the NDC is needed, subject to budgeted funds being available. The chair may approve these appointments. The NDC shall report its use of consultants to the Board.

*Budget.* The New Dentist Committee chair and director shall submit, in writing, a proposed itemized budget of anticipated expenditures for the ensuing fiscal year through the Executive Director.

*Meetings.* The New Dentist Committee will meet a minimum of twice a year, with the expectation that additional meetings by conference call may be required 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 or by conference call. Additional in-person meetings are subject to funds being available. The Committee shall utilize ADA Connect to the extent practical to carry out its work.

Meeting agendas will be prepared for every meeting and provided to the New Dentist Committee members at least five days in advance of the scheduled meeting, along with the appropriate materials needed to make informed decisions. The New Dentist Committee shall act only on the affirmative vote of a majority of the members present and voting at a meeting or by unanimous consent. Minutes of these meetings are to be maintained on ADA Connect.

The Committee shall work to manage its schedule to allow one meeting to be scheduled in conjunction with a meeting of the Board so as to allow for interaction between the Board and the Committee. As appropriate, as determined by the President, a contingent of Committee members may be invited to participate in discussions at this Board meeting. In addition, at the discretion of the President, one or more Committee members will be given the opportunity to participate in other Board meetings based on action proposed by the Committee in reports to the Board or the presence on the Board agenda of items relevant to new dentists. Additionally, Committee members may attend meetings of other Board committees at the invitation of the chair of such committee.

*Areas of Responsibility:* The Committee shall:

- Review and advise the Board on member benefits and the member experience from a new dentist perspective.
- Review and advise the Board on policy affecting new dentists.
- Promote the role of new dentists and foster leadership development in national, state and local societies.
- ~~Provide a new dentist perspective to councils through a liaison relationship or as designated consultants. Recommend to the Board the names of new dentists from within or outside the NDC to serve as the new dentist member on ADA councils or committees.~~
- Work with the ~~Council on ADA Sessions~~ Advisory Committee on Annual Meetings on the successful implementation of a new dentist program at the ADA Annual Meeting.
- Advise on and assist in implementation of the ADA dental school strategy.
- Address other matters as assigned by the Board of Trustees.

Each Committee member shall be expected to communicate with state and local societies within his or her district, and to seek to work with those societies to promote the role of new dentists within them.

*Reports.* The New Dentist Committee shall provide written reports to the Board of Trustees on its work as necessary to keep the Board informed of conclusions or recommendations of the Committee. The Committee may also propose to the Board reports to be forwarded to the House of Delegates. The Committee may request to present a report to the Board of Trustees through one or more of its members, in addition to in writing, as necessary to communicate with the Board. The Committee may also propose amendments to this charter. For

~~the December Board meeting, first full meeting of the Board each year,~~ the Committee shall submit a written report to the Board outlining its anticipated areas of emphasis within its areas of responsibilities for the year.

**ADA/FDI Delegation: 2019 FDI Council/Committee Candidates:** The Board of Trustees adopted the following resolutions without objection.

**B-4-2019. Resolved,** that Dr. Greg Chadwick (North Carolina) be approved as the 2019 ADA candidate for FDI Treasurer, and appropriate materials be developed for his candidacy.

**B-5-2019. Resolved,** that Dr. Carol Gomez Summerhays (California) be approved as the 2019 ADA candidate for FDI Council, and appropriate materials be developed for her candidacy.

**B-6-2019. Resolved,** that Dr. Jim Zenk (Minnesota) be approved as the 2019 ADA candidate for re-election on the FDI Dental Practice Committee, and appropriate materials be developed for his candidacy.

**B-7-2019. Resolved,** that Dr. Roger Macias (Texas) be approved as the 2019 ADA candidate for the FDI Education (CE) Committee, and appropriate materials be developed for his candidacy.

**Report from the FDI National Liaison Officer: 2018 FDI Annual World Dental Congress – Buenos Aires, Argentina:** The Board approved a motion to return the Report from the FDI National Liaison Officer: 2018 FDI Annual World Dental Congress: Buenos Aires, to the FDI Delegation to modify statements related to attendance of ADA Delegates at meetings.

**Report of the Chief of Governance and Strategy Management: Reappointment of Dental Licensure Objective Structured Clinical Examination (DLOSCE) Steering Committee:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-12-2019. Resolved,** that a special committee be established for the 2019 term to oversee the development and validation of the ADA Dental Licensure Objective Structured Clinical Examination (DLOSCE), 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 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

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

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

**Report of the Executive Director:** Dr. Kathleen O'Loughlin reported on the state of the Association, including providing an update on ADA's relationship with CVS and 2020 priorities. Dr. O'Loughlin and Mr. Robert Quashie, vice president, Business Operations and Strategy, also presented the Board with a walkthrough of the Quarterly Management Report.

## **Liaison Reports**

**Report of Dr. George Shepley, Liaison to the American Student Dental Association:** This informational report summarized the January 19–20, 2019 ASDA meeting (consent calendar item).

**Report of Dr. Roy Thompson, Liaison to the Council on Scientific Affairs:** This information report summarized the January 31–February 1, 2019 CSA meeting (consent calendar item).

**Report of Dr. Julio Rodriguez, Liaison to the Council on Membership:** This informational report summarized the February 2–3, 2019 CM meeting (consent calendar item).

**Report of Dr. Daniel Klemmedson, Liaison to the Council on Government Affairs:** This informational report summarized the February 7–9, 2019 CGA meeting (consent calendar item).

**Report of Dr. Raymond Cohlma, Liaison to the Council on Dental Education and Licensure:** This informational report summarized the January 17–18, 2019 CDEL meeting.

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

**Presentation: Investor Boards:** Mr. Jim Wiggett, chief executive officer, Jackson Hole Group presented the Board with an overview of the relationship of a nonprofit parent and subsidiary and how those boards interact.

**Presentation: 2018 Highlights Presentation:** Ms. Stephanie Moritz presented the Board with the 2018 ADA Highlights Video which showcased ADA achievements on public education, community service, advocacy and helping members succeed. The video may be viewed online at [ADA.org](https://www.ada.org).

**Presentation: ADA.org Site Experience Update:** Ms. Jenn Sutherland, senior director, Digital Transformation and Visual Brand and Mr. Ken Zenger, director, Digital Member Experience, presented on how ADA is improving the digital member experience, including the ADA.org experience. The home page design will be simpler and cleaner. All changes will lead to greater personalization. New features will be rolled out over the coming months. In addition to ADA.org, web templates offered to state and local societies will be enhanced.

**Strategic Discussion—Consumerism:** Dr. Marko Vujicic, Chief Economist and Health Policy Institute, vice president, presented to the Board on the disruptive force of consumerism and how the dental profession is adapting. The Board discussed a need to do more than defend the status quo while also maintaining standards. There is also a need to educate members about new technologies and emerging trends so they can be prepared for the future.

## **New Business**

*Update on Annual Session Registration.* Ms. Catherine Mills, vice president, Conferences and Continuing Education, reported on the new registration structure for Annual Meeting. The zero-base registration includes

access to the exhibit hall and any CE on the exhibit floor. CE lectures will be available at \$25, \$50 or \$70, with workshops costing more. Various VIP packages range from \$350 to \$550 will also be available.

### **Closed Session**

A closed session of the Board of Trustees was held on Tuesday, February 19, 2019. The detailed minutes of the closed session are separately recorded; however, any non-confidential actions taken by the Board are reflected in the minutes of the open meeting.

- Report of the Compensation Committee

### **Attorney-Client Session**

An attorney-client session of the Board of Trustees was held on Monday, February 18, 2019 in the Board Room of the ADA Headquarters Building, Chicago.

### **Adjournment**

Without objection, the third regular meeting of the Board of Trustees adjourned sine die on Tuesday, February 19, 2019 at 11:06 a.m.

## 2019 ADA Goals

### Goal 1: Increase Member Value and Engagement

- Measure: Net member growth
  - Exceed 2018 Net Member Growth:1,832
  - Continue to increase Conversion Rate Percentage of New Dentists to Full Dues Tripartite membership
  - Increase the % of positive growth states: targeted client services
  - Continue to enhance member digital experience
    - Increase total web traffic to all ADA sites
    - Expand deployment of “easy button” strategy: online applications, online payments, online chat function, auto monthly payments, etc.
    - Increased utilization of member resources in key segments
  - Increase resources toward Recruitment
    - Key strategies for retention and recruitment targeting “all star” and “amicable achiever

### Goal 2: Financial Sustainability

- Measure: Liquid Reserves will be no less than 50% of annual operating expenses
  - Non dues revenue will be at least 65% of revenue
  - Net asset growth after non controllable events (non-capital reserve spending and unrealized investment gains and losses)
  - Develop plan to mitigate effect of recruitment and retention discounting strategy
  - Reduce cost of operations
  - Growth of non-dues revenue between 2-6% annually
  - Innovate new sources of non-dues revenue
    - ADAPT – Gain in # of matches \$ net revenue/loss=projections
    - Non Dues Revenue Team Pilots-Planned/Planned/Approved
    - Credentialing growth year over year
    - OSCE 2019 and ADAT growth year over year
    - Dental Hygiene Admissions Test Development
    - Monetizing HPI

### Goal 3: All levels of the ADA will have sufficient organizational capacity to achieve goals 1 & 2

- Client Services : Measure: State by State Increased Net Membership
  - Simplify member experience at national, state and local level
  - Deliver standardized self-service performance metrics reports to states and grow adoption among states
  - Standardize and personalize member and nonmember data across all tripartite levels
  - Disseminate actionable dentist market research to enhance non-member recruitment and member retention
  - Customize client services approaches for key growth potential states
  - Strengthen Governance, Strategic Planning, Membership Engagement, Membership Touch Points and Financial Sustainability at state and local levels

### Goal 3: All levels of the ADA will have sufficient organizational capacity to achieve goals 1 & 2

- ADA Capacity
  - Simplify and automate work flow processes
  - Eliminate redundancy
  - Improve reconciliation process for dues recognition-re-engineer the work to assure results while gaining efficiency
  - Develop/Recruit critical new skill sets needed among ADA workforce
  - Enhance speed of project management from ideation to completion
  - Continue effectively working across the divisions : Enhance capability of cross divisional work teams

- 1
- 2
- 3
- 4

# Common Ground 2025: ADA Strategic Plan

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

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

## Core values:

- |    |  |    |                          |
|----|--|----|--------------------------|
| 9  | • Commitment to members                        | 14 | • Science/Evidence-based |
| 10 | • Integrity                                    | 15 | • Diversity              |
| 11 | • Excellence                                   | 16 | • Inclusion              |
| 12 | • Commitment to the improvement of oral health |    |                          |
| 13 |  |    |                          |

**Membership Goal: The ADA will have sufficient members to be the premier voice for oral health.**

Objective 1: Increase membership market share of lagging demographics by 2% per year.

Objective 2: Maintain a net-positive gain in membership recruitment of all dentists within 70% or more of constituents.

Objective 3: Maintain an overall retention rate of 94%.

Objective 4: Increase overall average rates of conversion across membership categories by 1% per year.

**Finance Goal: The ADA will be financially sustainable.**

Objective 5: Total revenue, including dues and non-dues, will increase by 2-4% annually.

Objective 6: Total unrestricted reserves will be targeted at no less than 50% of annual operating expenses.

**Organizational Goal: All levels of the ADA will have sufficient organizational capacity necessary to achieve the goals of the strategic plan.**

Objective 7: Improve overall organizational effectiveness at the national and state levels.

- 75% of constituents perform at least adequately (3 out of a scale of 5) in each capacity area
- 75% of constituents have an average performance of more than adequate (4 out of a scale of 5) across all capacity areas
- 20-30% of ADA staff are trained annually in targeted skill-based offerings

Objective 8: Support organizational effectiveness and alignment of ADA subsidiaries.

- ~~Percent completion of annual operating plans~~
- Subsidiary mission statements support ADA mission
- Sufficient resources provided by ADA annually to assure 85% completion of subsidiary annual operating plans
- Subsidiary service agreement performance measures are met by ADA

**Public Goal: The ADA will help support the advancement of the health of the public and the success of the profession.**

Objective 9. The ADA will be the preeminent driver of trusted oral health information for the public and profession

- Improve ADA's ranking as a trusted source of information for the public and key stakeholders.

Objective 10: Dental benefit programs will be sufficiently funded and efficiently administered.

- 1
  - 2
  - 3
- Improve dentist satisfaction with dental benefit programs
  - Increase the number of dental visit

## Minutes of the Board of Trustees

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May 15–16, 2019

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. Jeffrey M. Cole, president, on Wednesday, May 15, 2019, at 8:00 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: Jeffrey M. Cole, Chad P. Gehani, Richard A. Huot, Craig W. Herre, Glen D. Hall, Ted Sherwin, Kathleen T. O’Loughlin, Richard C. Black, Raymond A. Cohlma, Susan Becker Doroshov, Linda J. Edgar, Judith M. Fisch, Jay F. Harrington, Jr., Linda K. Himmelberger, Daniel J. Klemmedson, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Cesar R. Sabates, George R. Shepley, James D. Stephens, 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; Judith Fleeks, vice president, Human Resources; James Goodman, senior vice president, Business Group; Michael A. Graham, senior vice president, Government and Public Affairs; Michelle Hoffman, vice president, Publishing; Catherine H. Mills, vice president, Conferences and Continuing Education; Stephanie Moritz, chief communications officer; David Preble, senior vice president, Practice Institute; Robert Quashie, vice president, Business Operations and Strategy; Paul Sholty, chief financial officer; Marko Vujcic, chief economist and vice president, Health Policy Institute; and Anthony Ziebert, senior vice president, Education/Professional Affairs.

Guests in attendance for a portion or portions of the meeting included: Dr. Ray Jarvis, chair, New Dentist Committee; Dr. William Calnon, president and interim executive director, ADAF; Dr. Suzanne Ebert, vice president, ADABIG, Dental Practice and Relationship Management; Bill Robinson, chief executive officer, ADABIG; Dr. James E. Mercer, chair, ADABEI; and Deborah Doherty, managing director, ADABEI

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; Paula Cozzi Goedert with the law firm, Barnes & Thornburg, LLP; Judith Jakush, editor, *ADA News*; April Kates-Ellison, senior director, Client Services; Michelle Kruse, director, Administrative Services; Chris Maag, senior director, Enterprise Services and Technology Architecture; Molly Potnick, coordinator, Board and House Matters; Kyle Smith, manager, House of Delegates and Wendy J. Wils, deputy general counsel. Other ADA staff members were in attendance for specific agenda items.

Before consideration of business, Dr. Cole 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. Cole asked if there were any items of new business. The following item of new business was identified:

- Additional ADA Honorary Membership Nomination (Dr. Klemmedson)

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

**B-28-2019. 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. Cole reviewed the list of proposed consent items; the following reports were removed from the consent calendar.

- Report on ADA-Dental Lifeline Network Relationship (Res. B-21)

Without objection, the following resolution was adopted.

**B-27-2019. 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 February 17–19, 2019, Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-30-2019. Resolved**, that the minutes of the February 17-19, 2019, meeting of the Board of Trustees meeting be approved.

**Report on Mail Ballot Actions:** In accordance with the *Organization and Rules of the Board of Trustees*, the following mail ballot action is required to be reported in the minutes of the next regular meeting of the Board of Trustees. The mail ballot resolution was unanimously adopted (consent calendar item).

*Mail Ballot No. 1— Approval of Distinguished Service Award Nomination*

**B-20-2019. Resolved**, that the 2019 Distinguished Service Award be presented to Congressman Michael K. Simpson.

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

**Report of the Audit Committee:** On behalf of the Committee, Dr. Daniel J. Klemmedson, chair, presented the report of the Audit Committee's May 13, 2019, meeting. The report identified major topics discussed and actions taken.

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Richard C. Black, chair, presented the report of the Budget and Finance Committee's May 14, 2019, meeting. The report identified the major topics discussed, reports received and actions taken.

*Report of the Council on Dental Practice: Board Contingent Funding Request - Comprehensive Resource on Managing Pregnancy.* Dr. Black moved Resolution B-29 with the Committee's recommendation to adopt; on vote Resolution B-29 was adopted by the Board of Trustees.

**B-29-2019. Resolved**, that the following appropriation be made from the 2019 Board Contingent Fund to finance costs associated with enabling the Council on Dental Practice to collaborate with content authorities to develop a comprehensive resource in 2019 that will provide guidance to dentists planning family additions.

Board Contingent Fund  
 Cost Center: 090-1500-000  
 Amount: Up to \$24,630

**Report of the Business Innovation Committee:** On behalf of the Business Innovation Committee, Dr. Richard C. Black, chair, presented the report of the Committee's May 13, 2019, meeting. The report identified major topics discussed. Dr. Black moved Resolution B-43 with the Committee's recommendation to adopt; on vote Resolution B-43 was adopted by the Board of Trustees.

**B-43-2019.** (Confidential Action)

**Report of the Diversity and Inclusion Committee:** On behalf of the Diversity and Inclusion Committee, Dr. Judith M. Fisch, chair, presented the report of the Committee's May 13, 2019, meeting. The report identified major topics discussed, reports received and actions taken. Dr. Fisch moved the following resolutions; on vote, Resolutions B-41 and B-42 were adopted by the Board of Trustees.

**B-41-2019.** (Confidential Action)

**B-42-2019.** (Confidential Action)

**Report of the Compensation Committee:** This confidential report, presented by Dr. Raymond A. Cohlma, Committee chair, was considered during a closed session of the Board of Trustees on Wednesday, May 15.

**Report of the Governance Committee:** On behalf of the Governance Committee, Dr. Daniel J. Klemmedson, chair, presented two reports: Report of the Governance committee on Four Items and the Report of the Committee's May 14, 2019, meeting. The reports identified proposed amendments to the *Organization and Rules of the Board of Trustees*, major topics discussed, reports received and actions taken. Dr. Klemmedson moved Resolution B-26; on vote Resolution B-26 was adopted by the Board of Trustees.

**B-26-2019. Resolved**, that the *Organization and Rules of the Board of Trustees* be amended as shown in Appendix A to the Report of the Governance Committee on Four Items, submitted for the May 2019 Board of Trustees meeting.

Dr. Klemmedson moved Resolution B-39 with the Committee's recommendation to adopt; on vote Resolution B-39 was adopted by the Board of Trustees.

**B-39-2019. Resolved**, that the *General Guidelines for Nominations to ADA Councils, Commissions and the New Dentist Committee* be amended by adding "Committee on Annual Meetings" to the title, and be it further

**Resolved**, that the *General Guidelines for Nominations to ADA Councils, Commissions and the New Dentist Committee* be amended at item 6 as follows (additions underscored):

6. except for direct members, all nominees be in good standing with their state dental association.

**Report of the Pension Committee:** On behalf of the Committee, Dr. Ted Sherwin, chair, presented the report of the Committee's May 14th, 2019 meeting.

## Reports and Resolutions to the Board of Trustees

### Communications and Marketing

**Report of the Council on Communications Resolution to Continue Utilization Campaign:** This informational report summarized the Council on Communications recommendation to continue funding the utilization program after it concludes and urged the Board to consider it a fixed appropriation within the operating budget (consent calendar item).

**Report of the Council on Communications: Update on Resolution 67H-2016: Drive Utilization of Dental Services for ADA Members:** This informational report summarized ongoing results from year two of the three-year campaign to increase dental visits for ADA dentists. The Council on Communications will report back to the 2019 House of Delegates.

### Finance and Operations

**Report on the Status of the 2019 Board Contingency:** A Board Contingency Fund of \$750,000 was authorized in the 2019 budget. The Board of Trustees approved total requests in the amount of \$409,630, leaving a balance of \$340,370 (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: Action for Dental Health, appropriations, McCarran-Ferguson, CDHC, community water fluoridation, ED referral, workforce, third party reimbursement, state Medicaid programs, and ADPAC. The report included a report of the SPA program expenditures as of April 4, 2019.

### Information Technology

**Report of the Division of Technology: 2019 Major Technology Initiatives Update:** This informational report provided an update of major technology initiatives for Q1 2019 (consent calendar item).

### Legal Affairs

**Report of the Division of Legal Affairs: Summary of Litigation and Other Matters:** This confidential report was presented in an Attorney-Client session.

### Practice Institute

**Update on Resolution 33H-2018: Presidentially-Appointed Elder Care Workgroup:** This informational report provided the Board with an update on the progress and upcoming meeting schedule of the newly-appointed Workgroup (consent calendar item).

## Science Institute

**Report of Minamata Convention and Conference of Parties 3 Update:** This informational report summarized the American Dental Association's support of the outcomes of the original Minamata Convention and the resulting obligations (consent calendar item).

## ADA Business Innovation Group

The regular session of the Board of Trustees was adjourned for the purpose of convening the Shareholder Meeting of the ADA Business Innovation Group. This update was presented by Mr. Bill Robinson, chief executive officer, ADABIG and Dr. Suzanne Ebert, vice president, Dental Practice and Relationship Management, ADABIG. The following resolutions were considered and adopted by the Board of Trustees during the Shareholder Meeting of the ADA Business Innovation Group.

**B-35-2019. Resolved,** that the ADA Board of Trustees allocate up to \$5 million from reserves to support the ongoing operations of ADA Practice Transitions™.

**B-36-2019. Resolved,** that ADA Business Innovation Group, Inc., is requested to provide a refined and updated business model to the ADA Board of Trustees at its first meeting in 2020 with a recommendation for the future of the company based on the financial results and market response to the pilot in Wisconsin and Maine.

Following the adjournment of the Shareholder Meeting of the ADA Business Innovation Group, the regular session of the Board of Trustees reconvened.

## ADA Business Enterprises, Inc.

The regular session of the Board of Trustees was adjourned for the purpose of convening the Shareholder Meeting of ADABEI. Following the adjournment of the Shareholder Meeting of ADABEI, the regular session of the Board of Trustees reconvened.

## ADA Foundation

**Revised Report of the ADA Foundation:** This informational report provided updates on matters of interest pertaining to the ADA Foundation (consent calendar item).

## Organizational/Other

**Report on ADA-Dental Lifeline Network Relationship:** Resolution B-21 was presented for the Board's consideration. The Board approved a motion to amend the report on the relationship between the ADA and Dental Lifeline Network indicating that ADA shall have the right to appoint *up to two* ADA Board members to serve on the DLN Board of Directors. On vote, Resolution B-21, as amended, was adopted by the Board of Trustees.

**B-21-2019. Resolved,** that a four-year (January 1, 2019 through December 31, 2022) strategic alliance between the ADA and Dental Lifeline Network as set forth in the Strategic Alliance Agreement, as amended, be approved.

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

**B-22-2019. Resolved**, that Honorary Membership to the American Dental Association be awarded to:

Ashok Dhoble, B.D.S., M.D.S.

**B-23-2019. Resolved**, that Honorary Membership to the American Dental Association be awarded to:

Ms. Nancy R. Honeycutt, CAE

**B-24-2019. Resolved**, that Honorary Membership to the American Dental Association be awarded to:

Mr. Steven W. Kess, M.B.A.

**B-25-2019. Resolved**, that Honorary Membership to the American Dental Association be awarded to:

Ms. Linda Miles, CSP, CMC

**Report of the New Dentist Committee:** Dr. Ray Jarvis, chair, New Dentist Committee, reported on new dentist related matters. On vote, the following resolutions were adopted by the Board of Trustees.

**B-31-2019. Resolved**, that Dr. Nathaniel Lawson be nominated to serve as the new dentist member of the Council on Scientific Affairs for the 2019-2020 term, and be if further

**Resolved**, that Dr. Lawson's nomination be transmitted to the 2019 House of Delegates.

**B-32-2019. Resolved**, that Dr. Emily Mattingly, Missouri, be appointed to serve as Chair of the New Dentist Committee for the 2019-2020 term.

**Report of Nominations to the Council on Scientific Affairs:** The Board of Trustees considered multiple nominations for the 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 nominees to present to the 2019 House of Delegates. On vote, the Board adopted the following resolution.

**B-33-2019. Resolved**, that the names and qualifications of the following individuals selected by the Board of Trustees, for terms as indicated, be transmitted to the 2019 House of Delegates as nominees for membership on the Council on Scientific Affairs.

Dr. Effie Ioannidou (2019-2023)  
Dr. Deepak Kademani (2019-2023)  
Dr. Sharukh S. Khajotia (2019-2023)  
Dr. Carol A. Lefebvre (2019-2023)  
Dr. Jacob Park (2019-2020)

**Approval of Amended 2020 Board of Trustees Meeting Dates:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-34-2019. Resolved**, that the following 2020 Board of Trustees meeting dates, as amended, be approved:

February 9 - 11 (Sunday – Tuesday)

April 5 - 7 (Sunday – Tuesday)  
 June 14-16 (Sunday – Tuesday)  
August 23 – 25 (Sunday – Tuesday)  
~~August 30 – September 1 (Sunday – Tuesday)~~  
 October 20 (New Board of Trustees Meeting, Orlando)  
 December 5 – 7 (Saturday – Monday) (Retreat and Board meeting)

and be it further,

**Resolved**, that Resolution B-56-2018, approving the previous 2020 meeting dates, be rescinded.

**Update on San Francisco Marriott Issues:** Ms. Catherine Mills, vice president, Conferences and Continuing Education, reported that because of construction, there was a question about the availability of the contracted suites at the headquarters hotel. These suites are used by the ADA, state associations and some affiliated groups. Ms. Mills reported that the suites will be available for annual meeting.

**Report of the Executive Director: ADA/ADAF/VRC:** This report took place during a closed session of the Board of Trustees. In open session, Resolution B-37 was considered and adopted by the Board.

**B-37-2019.** (Confidential Action Temporarily Embargoed)

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

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

**Report of the Executive Director:** Dr. Kathleen O’Loughlin reported on the state of the Association, including providing an update on The Dentists Supply Company and guidelines for liaison reports. Dr. O’Loughlin and Mr. Robert Quashie, vice president, Business Operations and Strategy, presented the Board with a walkthrough of the Quarterly Management Report.

### **Liaison Reports**

**Report of Dr. Kirk Norbo, Liaison to the New Dentist Committee:** This informational report summarized the February 17–19, 2019 New Dentist Committee meeting (consent calendar item).

**Report of Dr. Judith Fisch and Dr. Kirk Norbo, Liaisons to the Dental Lifeline Network:** This informational report summarized the February 22, 2019 Dental Lifeline Network meeting (consent calendar item).

**Report of Dr. Richard Huot, Liaison to Standards Committee on Dental Informatics:** This informational report summarized the February 24–26, 2019 Standards Committee on Dental Informatics meeting (consent calendar item).

**Report of Dr. Linda Edgar, Liaison to the National Commission on Recognition of Dental Specialties and Certifying Boards:** This report took place during a closed session of the Board of Trustees.

**Report of Dr. Cesar Sabates, Liaison to the Commission on Dental Accreditation:** This informational report summarized the February 7–8, 2019 CODA meeting (consent calendar item).

**Report of Dr. Kenneth McDougall, Liaison to the Committee on Annual Meetings:** This informational report summarized the April 10–12, 2019 CAM meeting (consent calendar item).

**Report of Dr. Paul Leary, Liaison to the Council on Ethics, Bylaws and Judicial Affairs:** This informational report summarized the April 4–5, 2019 CEBJA meeting (consent calendar item).

**Report of Dr. Cesar Sabates, Liaison to the Elder Care Workgroup Meeting:** This informational report summarized the April 10–12, 2019 CAM meeting (consent calendar item).

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

**Strategic Discussion—Student Debt:** Dr. Cole and Dr. Marko Vujicic, Chief Economist and Health Policy Institute, vice president, led a discussion on student debt. The Board reviewed the data on student debt. Based on anecdotal evidence, there does seem to be an impact on the number of applications nationwide to dental schools. The ADA has spent considerable resources and effort to address student debt. The Board decided to focus ADA's efforts on the goal of educating students and dentists on understanding and managing debt. The ADA has done a lot already, including the Laurel Road student loan consolidation/refinancing program endorsement and the financial literacy resource work, but more will need to be done. This will be an ongoing effort by the ADA.

### **New Business**

*Additional ADA Honorary Membership Nomination.* Dr. Klemmedson 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-38 was adopted by the Board of Trustees.

**B-38-2019. Resolved,** that Honorary Membership to the American Dental Association be awarded to:

Joe Menapace, B.S., M.S., Ph.D.

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

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

**Board of Trustees Resolution 1: Bylaws Amendment to Clarify Chair Voting:** The Board of Trustees voted to transmit Resolution 1 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Board of Trustees Resolution 2: Amendment to the ADA Conflict of Interest Disclosure:** The Board of Trustees voted to transmit Resolution 2 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Board of Trustees Resolution 3: Recorded Board Votes:** The Board of Trustees voted to transmit Resolution 3 to the House of Delegates with a recommendation to vote yes. (Vote: 17 Yes—Black, Cohlma, Doroshov, Edgar, Fisch, Harrington, Herre, Himmelberger, Huot, Kyger, Leary, McDougall, Norbo, Rodriguez, Shepley, Stephens, Thompson; 3 No—Gehani, Klemmedson, Sabates)

**Board of Trustees Resolution 4: Amendment to Eligibility Requirements for the Office of Treasurer:** The Board of Trustees voted to transmit Resolution 4 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**First Trustee District Resolution 70-2018: Election of the President-Elect:** The Board of Trustees voted to transmit Resolution 70-2018 to the House of Delegates with the following comment and recommendation to

vote no. (Vote: 2 Yes—Fisch, Stephens; 18 No—Black, Cohlma, Doroshow, Edgar, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Rodriguez, Sabates, Shepley, Thompson)

The Board appreciates the First District's efforts to further governance reform efforts within the ADA. The District's proposal contains several interesting aspects, including taking advantage of the Board's knowledge of the candidates. However, the Board believes that the House should retain the right to elect the President-elect while continuing to explore ways to reduce costs of campaigns and to improve ways to fully inform delegates about the candidates.

**Report 3 of the Board of Trustees to the House of Delegates: Common Ground 2025:** The Board of Trustees voted to transmit Report 3 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

### **Closed Session**

Closed sessions of the Board of Trustees were held at various times during the May 15–16, 2019 meeting of the Board of Trustees. The detailed minutes of the closed session are separately recorded; however, any non-confidential actions taken by the Board are reflected in the minutes of the open meeting.

- Report on ADA/ADAF/VRC
- Report of Dr. Linda Edgar, Liaison to the National Commission on Recognition of Dental Specialties and Certifying Boards
- Report of the Compensation Committee

### **Attorney-Client Session**

An attorney-client session of the Board of Trustees was held on Wednesday, May 15, 2019, in the Board Room of the ADA Headquarters Building, Chicago. The session began at 3:15 p.m. and adjourned at 4:45 p.m. Items discussed included:

- Report of the Division of Legal Affairs: Summary of Litigation and Other Matters
- Do-it-Yourself Orthodontics
- CVS

### **Adjournment**

Without objection, the fourth regular meeting of the Board of Trustees adjourned *sine die* on Thursday, May 16, 2019 at 12:50 p.m.

## Minutes of the Board of Trustees

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June 23–24, 2019

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. Jeffrey M. Cole, president, on Sunday, June 23, 2019, at 8:00 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: Jeffrey M. Cole, Chad P. Gehani, Richard A. Huot, Craig W. Herre, Glen D. Hall, Ted Sherwin, Kathleen T. O’Loughlin, Richard C. Black, Raymond A. Cohlma, Susan Becker Doroshov, Linda J. Edgar, Judith M. Fisch, Jay F. Harrington, Jr., Linda K. Himmelberger, Daniel J. Klemmedson, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Cesar R. Sabates, George R. Shepley, James D. Stephens, 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; Jordan Baugh, chief technology officer; Jerome K. Bowman, chief, Governance and Strategy Management; Judith Fleeks, vice president, Human Resources; James Goodman, senior vice president, Business Group; Michael A. Graham, senior vice president, Government and Public Affairs; Michelle Hoffman, vice president, Publishing; Catherine H. Mills, vice president, Conferences and Continuing Education; Stephanie Moritz, chief communications officer; David Preble, senior vice president, Practice Institute; Robert Quashie, vice president, Business Operations and Strategy; Paul Sholty, chief financial officer; Marko Vujicic, chief economist and vice president, Health Policy Institute; and Anthony Ziebert, senior vice president, Education/Professional Affairs.

Guests in attendance for a portion or portions of the meeting included: Dr. Ray Jarvis, chair, New Dentist Committee; Bill Robinson, chief executive officer, ADABIG; Dr. Steven Shepard, founder, Shepard Communications Group

Others in attendance for all or portions of the meeting were: Cathryn Albrecht, senior associate general counsel; Tomisena Cole, senior manager, Board and House Matters; Thomas C. Elliott, Jr., Esq., deputy general counsel; Paula Cozzi Goedert with the law firm, Barnes & Thornburg, LLP; Judith Jakush, editor, *ADA News*; April Kates-Ellison, senior director, Client Services; Michelle Kruse, director, Administrative Services; Molly Potnick, coordinator, Board and House Matters; Kyle Smith, manager, House of Delegates and Wendy J. Wils, deputy general counsel. Other ADA staff members were in attendance for specific agenda items.

Before consideration of business, Dr. Cole 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. Cole asked if there were any items of new business. No items of new business were proposed. On vote, the Board adopted the agenda.

**B-52-2019. 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. Cole reviewed the list of proposed consent items; the following reports were removed from the consent calendar.

- ADA Bylaws Amendment for the JCNDE (Res. 17)
- ADA Bylaws Amendment for the CCEPR (Res. 18)
- Amendments to Chapter IX, Section A of the ADA Governance Manual (Res. 19)
- Report 5 of the Board of Trustees to the House of Delegates: Governance Changes for ADA Commissions: Proposed Revisions to the ADA Bylaws and the *Governance and Organizational Manual*
- Minnesota Dental Association: Defining the Practice of Dentistry (Res. 26)

Without objection, the following resolution was adopted.

**B-51-2019. 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 May 15–16, 2019, Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-53-2019. Resolved,** that the minutes of the May 15-16, 2019, meeting of the Board of Trustees meeting be approved.

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

**Report of the Audit Committee:** On behalf of the Committee, Dr. Daniel J. Klemmedson, chair, presented the report of the Audit Committee's June 21, 2019, meeting. The report identified major topics discussed and actions taken.

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Richard C. Black, chair, presented the report of the Budget and Finance Committee's June 22, 2019, meeting. The report identified the major topics discussed, reports received and actions taken. Dr. Black moved Resolution B-65 with the Committee's recommendation to adopt; on vote Resolution B-65 was adopted by the Board of Trustees.

**B-65-2019. Resolved,** that up to \$50,000 be appropriated from the 2019 Board Contingency to provide a grant to the Pennsylvania Dental Association to partially fund the search for a new Executive Director, contingent upon PDA providing financial statements for the past three years acceptable to ADA.

*Informational Report Pursuant to Board Resolution B-58-2015 Regarding Budget and Finance Approval of Expenditures from Capital Replacement Reserve:* Pursuant to the Capital Reserve Spending Approval Process in the *Organization and Rules of the Board of Trustees*, because the total capital expenditure for this

request is over \$500,000, the expenditure was respectfully submitted to the Budget and Finance Committee with a recommendation for approval. The Budget and Finance Committee approved the following request on June 22, 2019.

- Up to \$540,677 from the Capital replacement reserve fund to cover leasing, early renewal, and tenant costs.

*Report on the Status of the 2019 Board Contingency:* A Board Contingency Fund of \$750,000 was authorized in the 2019 budget. The Board of Trustees approved total requests in the amount of \$ 414,630, leaving a balance of \$335,370.

**Report of the Business Innovation Committee:** On behalf of the Business Innovation Committee, Dr. Richard C. Black, chair, presented the report of the Committee's June 21, 2019, meeting. The report identified major topics discussed. Dr. Black moved Resolution B-66 with the Committee's recommendation to adopt; on vote Resolution B-66 was adopted by the Board of Trustees.

**B-66-2019.** (Confidential Action)

**Report of the Diversity and Inclusion Committee:** On behalf of the Diversity and Inclusion Committee, Dr. Judith M. Fisch, chair, presented the report of the Committee's June 22, 2019, meeting. The report identified major topics discussed, reports received and actions taken. Dr. Fisch moved Resolution 67; on vote, Resolutions B-67 was adopted by the Board of Trustees.

**B-67-2019.** The text of this resolution is currently embargoed.

**Report of the Compensation Committee:** On behalf of the Compensation Committee, Dr. Raymond A. Cohlma, chair, presented the report of the Committee's June 22, 2019, meeting. The report identified major topics discussed.

**Report of the Governance Committee:** On behalf of the Governance Committee, Dr. Daniel J. Klemmedson, chair, presented the report of the Committee's June 21, 2019, meeting. The report identified major topics discussed, reports received and actions taken.

Dr. McDougall moved Resolution B-60 with the Committee's recommendation to adopt. A motion was made to amend B-60 by inserting "all available" before "members of the FDI delegation." On vote, the motion to amend was adopted. On vote, Resolution B-60 as amended was adopted.

**B-60-2019. Resolved,** that the following changes be made to the *Organization and Rules of the Board of Trustees* with regard to the FDI delegation (additions underscored):

ADA Candidates for FDI Positions: The delegation shall make recommendations to the ADA Board, with appropriate background material, about support for particular ADA candidates for FDI positions. In making these recommendations, the delegation shall decide on the method of voting; if any delegate requests a written ballot or mail ballot (if voting occurs outside a delegation meeting), such request shall be honored. The ADA Board shall determine whether to support any ADA candidate for an open FDI position. Notwithstanding the foregoing, if an FDI position becomes available and in the opinion of the President, the ADA Board will not have time to evaluate, discuss, and approve a nominee prior to the announcement deadline, or in a reasonable time to mount a successful campaign, the President and the President-Elect, in consultation with the Executive Director and all available members of the FDI delegation, may approve a nomination and report the action taken at the next Board meeting. In the event the President and President-Elect are unavailable to decide on such an approval together, either of them may do so alone following the same consultation guidelines.

Dr. McDougall moved Resolution B-61 with the Committee's recommendation to adopt; on vote Resolution B-61 was adopted by the Board of Trustees.

**B-61-2019. Resolved**, that the following changes be made to the *Organization and Rules of the Board of Trustees* with regard to the conflict of interest guidelines for members of the Board of Trustees (additions underscored):

No member of the Board of Trustees shall serve simultaneously as an officer, director, employee, agent or consultant of any insurance company offering dental coverage, any medical or dental service corporation, any third-party payer of dental benefits, any dental manufacturer or distributor, any company that has a product in the ADA Seal Program, any company that advertises in any ADA publication, or any company that exhibits at the annual session or other conference of the Association. In addition, no member of the Board of Trustees shall serve simultaneously as an officer, director or trustee of a constituent dental society, specialty organization or other entity as determined by the Board of Trustees. Any proposals for speaking engagements shall be disclosed in writing to the General Counsel, with a copy to the President and the President-elect.

Dr. McDougall moved Resolution B-62 with the Committee's recommendation to adopt; on vote Resolution B-62 was adopted by the Board of Trustees.

**B-62-2019. Resolved**, that the *Organization and Rules of the Board of Trustees* revisions to the Advisory Committee on Annual Meetings (CAM) charter as shown in Appendix B be approved.

Appendix B is appended on page 182.

Dr. McDougall moved Resolution B-63 with the Committee's recommendation to adopt; on vote Resolution B-63 was adopted by the Board of Trustees.

**B-63-2019. Resolved**, that the following changes be made to the *Organization and Rules of the Board of Trustees* (additions underscored):

**Board Rules Amendments:** Amendments to the Board Rules can be adopted at any meeting of the Board of Trustees. Except as provided below, amendments to the Board Rules will be made and published once per year, prior to the first Board of Trustees meeting following the adjournment *sine die* of the annual meeting of the House of Delegates, with such amendments becoming effective when the Board Rules containing the amendments are published. Notwithstanding the foregoing, should it be determined that a Board Rules amendment should be adopted sooner, the Governance Committee can recommend, by a two-thirds affirmative vote of the committee members present and voting, that the amendment be immediately effective and that a revised version of the Board Rules be prepared and published as soon as possible.

Dr. McDougall moved Resolution B-64 with the Committee's recommendation to adopt; on vote Resolution B-64 was adopted by the Board of Trustees.

**B-64-2019. Resolved**, that the Speaker of the House of Delegates and ADA staff are asked to share with ADABEI the foregoing suggested revisions as shown in Appendix D for review and comment, and be it further

**Resolved**, that ADABEI and ADA staff collaborate on further revisions to the ADABEI Bylaws which will thereafter be presented to the ADABEI Board of Directors and the ADA as ADABEI stockholder for adoption.

Appendix D is appended on page 187.

## 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 summarized ongoing campaign results for 2019 through April (consent calendar item).

### Conferences and Continuing Education

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

**B-44-2019. Resolved,** that Dr. Brad Wilbur, Nevada, be appointed to serve as the Committee on Annual Meetings Local Arrangements Member for a two-year term (2020-2021), to take effect immediately following the ADA House of Delegates meeting in September 2019.

### Finance and Operations

**Informational Report Regarding Officer Approval of Expenditures from Capital Replacement Reserve Spending:** This informational report summarized Officers approval(s) of spending from the Capital Replacement Reserves (consent calendar item).

### Member and Client Services

**Report of the New Dentist Member Council and Committee Appointment Recommendations:** The Board of Trustees adopted the following resolutions (consent calendar actions).

**B-46-2019. Resolved,** that the following individuals be nominated to serve as new dentist members for the 2019-2020 term and be transmitted to the 2019 House of Delegates in Board Report 1:

Council on Dental Benefit Programs (CDBP), Dr. Sara Stuefen (reappointment)  
Council on Members Insurance and Retirement Programs (CMIRP), Dr. Brittany Matin (reappointment)  
Council on Advocacy for Access and Prevention (CAAP), Dr. Andrew Welles (reappointment)  
Council on Dental Education and Licensure (CDEL), Dr. Daniel Hammer (reappointment)  
Council on Communications (CC), Dr. Kavin Kai  
Council on Ethics, Bylaws and Judicial Affairs (CEBJA), Dr. Daniel Hall  
Committee on Membership (CM), Dr. Benjamin Youel  
Council on Dental Practice (CDP), Dr. Lindsay Compton  
Council on Government Affairs (CGA), Dr. Adam Shisler

**B-47-2019. Resolved,** that Dr. Colleen Greene be approved as the new dentist member to the American Dental Politician Action Committee (ADPAC).

**B-48-2019. Resolved,** that Dr. Lauren Vitkus be approved as the new dentist member to the Advisory Committee on Annual Meetings (CAM) (reappointment).

**Multi-State Group Dues Collection Pilot Program:** This informational report provided an update on the dues collection pilot. The pilot goals are to identify opportunities to streamline the member application process at the state society level, as well as to provide administrative simplification for dues payments paid for by Great Expressions Dental Centers as a benefit to employee dentists who practice in multiple practice locations and in various states (consent calendar item).

## Practice Institute

**Report of the Council on Dental Practice: Consultants for 2019-2020:** This informational report provided a list of the 57 consultants appointed to serve on CDP until the close of the 2020 House of Delegates (consent calendar item).

**Report of the Council on Dental Benefit Programs: ADA Representative Skills-Based Appointment to the DQA:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-45-2019. Resolved,** that the President may appoint the five ADA representatives to the Dental Quality Alliance (DQA) as follows:

- Three seats be allocated to ADA members-at-large, nominated by the Council on Dental Benefit Programs through an application process, who have subject matter expertise to support DQA activities.
- Two seats be allocated to representatives from amongst members of the Councils on Dental Practice, Dental Benefit Programs, Government Affairs or the Council on Advocacy for Access and Prevention, nominated by the Council on Dental Benefit Programs after soliciting input from these Councils.
- In the event the President does not approve any or all of the Council's nominations, the Council will produce additional nominations for consideration.

## ADA Business Innovation Group

**ADABIG Update:** Mr. Bill Robinson, chief executive officer, ADABIG, provided the board with a brief update summarizing activities completed since the May Board meeting.

## ADA Business Enterprises, Inc.

**Report of ADA Business Enterprises:** This informational report provided a summary of 2019 activities through April (consent calendar item).

## ADA Foundation

**Confidential Report on the Status of the ADA Foundation:** This confidential report was discussed in closed session on Sunday, June 23, 2019. In open session, the following resolution was adopted by the Board of Trustees.

**B-68-2019. Resolved,** that the ADA Board directs ADA Senior Executive Management to formulate a plan to transition philanthropic operations and refocus the current ADAF 501(c)(3) to house the new ADA Research Foundation in a manner that mitigates reputational risk and achieves the aims of the recent ADA Report on the Research Center and to report back to the Board with a preliminary plan at its August 2019 meeting.

**Closed Session Meeting of the ADA Foundation Member:** The regular session of the Board of Trustees was adjourned for the purpose of convening the Member Meeting of ADAF. Following the adjournment of the Member Meeting of ADAF, the regular session of the Board of Trustees reconvened.

## Organizational/Other

**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-56-2019. Resolved,** that the following nominees to the American Dental Political Action Committee Board of Directors be approved:

Dr. Steven A. Brown, Rhode Island  
Dr. Naila S. Farooq, Michigan  
Dr. Cynthia Sherwood, Kansas  
Dr. Julian Hal Fair, South Carolina

**Report of Nominations to the New Dentist Committee:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-57-2019. Resolved,** that the following individuals be appointed to serve as members of the New Dentist Committee for the 2019-23 term.

Dr. James E. Lee, Massachusetts  
Dr. Alex T. Mellion, Ohio  
Dr. Daryn Lu, Oklahoma  
Dr. Ernesto R. Perez

**Report of Nominations to the National Commission on Recognition of Dental Specialties and Certifying Boards:** The Board of Trustees considered multiple nominations for the open positions on the National Commission. 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 three nominees to present to the 2019 House of Delegates. On vote, Resolution B-58 was adopted by the Board of Trustees.

**B-58-2019. Resolved,** that the following general dentist commissioners be appointed to serve on the National Commission on Recognition of Dental Specialties and Certifying Boards for the 2019-2023 term.

Dr. Anthony S. Carroccia, Tennessee  
Dr. Mara Catey-Williams, Indiana  
Dr. Brian S. McAllister, Delaware

**Report of Nominations of Advisory Committee on Annual Meetings General Members:** The Board of Trustees considered multiple nominations for the open positions on the Committee on Annual Meetings. 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 two members to fill the general member positions on the Committee. On vote, Resolution B-54 was adopted by the Board of Trustees.

**B-54-2019. Resolved,** that the following two individuals be appointed to serve as general members of the Advisory Committee on Annual Meetings for the 2019-2024 term.

Dr. David A. Schimmel, Pennsylvania  
Dr. Peter C. Shatz, Georgia

**Addendum to Report of Nominations to Councils and Commissions:** The Board of Trustees adopted the following resolution.

**B-55-2019.** (Confidential Action)

**Report of the New Dentist Committee:** Dr. Ray Jarvis, chair, New Dentist Committee, reported on new dentist related matters. On vote, the following resolutions were adopted by the Board of Trustees.

**B-49-2019. Resolved,** that the ADA Committee on Diversity and Inclusion consider how the ADA can better stress practice model choice in its diversity and inclusion efforts.

**B-50-2019. Resolved**, that the Board recommends that ADA councils consider appointing consultants from the DSO setting as needed to include this valuable perspective to further their work.

**Report of the Face-to-Face meeting between CVS and ADA:** Dr. O'Loughlin updated the Board of Trustees on the recent face-to-face meeting with CVS. The stated purpose of the meeting was to educate and inform CVS. Resolution B-59 was presented for the Board's consideration. On vote, Resolution B-59 was not adopted.

**B-59.** (Confidential Action)

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

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

**Report of the Executive Director:** Dr. Kathleen O'Loughlin reported on positive developments with the states on the membership side and provided an update on how the Association is meeting initiatives and what strategies will be used for the future.

*Senior Staff Report on Strategies Under Common Ground 2025:* Dr. O'Loughlin reviewed the strategies the Association will pursue to achieve the new goals and objectives contained in Common Ground 2025. These strategies will form the backbone of Quarterly Management Reports starting next year. The new plan will better allow for better movement from one strategy to another based on results.

## Liaison Reports

**Report of Dr. Richard A. Huot, Liaison to the Council on Members Insurance and Retirement Programs:** This informational report summarized the March 29, 2019 CMIRP meeting (consent calendar item).

**Report of Dr. Susan Becker Doroshow, Liaison to the Commission on Continuing Education Provider Recognition:** This informational report summarized the April 25–26, 2019 CCEPR meeting (consent calendar item).

**Report of Dr. Billie Sue Kyger, Liaison to the Council on Dental Benefit Programs:** This informational report summarized the May 9–10, 2019 CDBP meeting (consent calendar item).

**Report of Dr. Judith M. Fisch, Liaison to the Council on Dental Practice:** This informational report summarized the May 2–4, 2019 CDP meeting (consent calendar item).

**Report of Dr. Roy Thompson, Liaison to the Council on Scientific Affairs:** This informational report summarized the June 6–7, 2019 CSA meeting (consent calendar item).

**Report of Dr. Judith M. Fisch and Dr. Kirk M. Norbo, Liaisons to the Dental Lifeline Network Board of Directors Meeting Report:** This informational report summarized the June 4, 2019 DLN meeting (consent calendar item).

**Report of Dr. Roy Thompson, chair, Update on Fighting Insurance Intrusion Task Force (FIIST) Activities:** Dr. Thompson reported the Task Force is leveraging the existing SPA program to implement a series of pilot projects in a few states. The pilot projects support select state advocacy efforts on identified initiatives in support of the charge to the Task Force. Results are very good so far. Based on these pilot projects, the Task Force believes the initiative can be scaled up to reach even more states next year. The Task Force is developing a full report to the House of Delegates, which will address 2020 funding needs.

## Special Orders of Business/Special Appearances

**Board of Trustees Diversity and Inclusion Forum:** Dr. Steven Shepard, founder, Shepard Communications Group, facilitated a presentation on the inner workings on generational theory that provided insights about how to manage, attract, motivate, inspire, lead, and influence—with a focus on millennials and plurals.

**ADA 160th Anniversary Celebration:** Ms. Stephanie Moritz provided an update on communication efforts as part of this milestone.

**Strategic Discussion—Inclusion:** The Board participated in a discussion on inclusion efforts. The Board talked about intentional efforts that can be made and what those efforts would look like. April Kates-Ellison commented that in terms of inclusion best practices across industry when you talk about the word intentional it means it shows up in policies and governing processes. Ms. Kates-Ellison also commented on leadership diversity. In the past, the thought was that as demographics change, so will ADA leadership. However, ADA leadership, to date, has not changed in alignment with the change in the market or the membership. Discussion ensued and, subsequently, the Board encouraged further discussion on updating or drafting new policies on diversity and inclusion, Dr. Fisch, chair, Committee on Diversity and Inclusion, stated that she would take this conversation back to the Committee and report back to the August Board.

**State and National Membership Dashboards:** Mr. Jordan Baugh, chief technology officer, and Ms. Kelly Bentley, business intelligence analyst, provided a demonstration of the membership dashboards state societies can now access. These dashboards provide states as well as the Board with valuable, real-time data on membership to support key future decisions. The data includes current data as well as five-year trends.

**Employment Discrimination Presentation:** Ms. Cathryn Albrecht, senior associate general counsel, provided the Board with an overview on employment discrimination and the costs associated with litigation and settlement.

## New Business

*SPA Update.* Dr. Shepley reported on a SPA request from Massachusetts to fund a state PR campaign about negative aspects of DIY dentistry. Dr. Shepley reported the SPA Oversight Committee felt the request was premature and declined the request.

## Reports and Resolutions to the House of Delegates

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

**Council on Membership Report 1 to the House of Delegates: Proposal to Streamline the Current Dues Structure and Positively Impact Dues Revenue** (*Worksheet:2000*). The Board of Trustees voted to transmit Report 5 to the House of Delegates. (Vote: Unanimous) The Board of Trustees transmitted the following resolutions to the House of Delegates.

*Resolution 14—Amendment of ADA Policy: Long-Term Financial Strategy of Dues Stabilization* (*Worksheet:2010*) The Board of Trustees voted to transmit Resolution 14 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

*Resolution 15—Amendment of the ADA Governance and Organizational Manual: Section on Special Assessments and Related Financial Matters* (*Worksheet:2011*) The Board of Trustees voted to transmit Resolution 15 to the House of Delegates with a recommendation to vote yes. (Vote: 17 Yes—Drs. Cohlmiya, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, McDougall,

Norbo, Rodriguez, Shepley, Stephens, Thompson; 3 No: Drs. Black, Leary, Sabates)

**Report 4 of the Board of Trustees to the House of Delegates: Compensation and Contract Relating to the Executive Director** (*Worksheet:2014*) The Board of Trustees voted to transmit Report 4 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

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

**Council on Dental Practice Resolution 5: Amendment to the ADA Statement Regarding Employment of a Dentist** (*Worksheet:3000*) 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 Dental Practice Resolution 7: Amendment of Policy, Regulating Non-Dentist Owners of Dental Practices** (*Worksheet:3003*) The Board of Trustees voted to transmit Resolution 7 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Practice Resolution 8: Amendment to the ADA Statement on Dentists' Choice of Practice Settings** (*Worksheet:3004*) 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 Benefit Programs Resolution 9: Statement on Programs Limiting Dental Benefit to Network Providers** (*Worksheet:3005*) 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 Benefit Programs Resolution 10: Proposed New Policy, Patients' Rights to Receive a Benefit for Dental Procedures from their Medical Plan** (*Worksheet:3009*) 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 Benefit Programs Resolution 11: Revision of Policy, Medical Loss Ratio** (*Worksheet:3010*) 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)

**Council on Dental Practice Resolution 12: Proposed ADA Policy Statement on the Use of Silver Diamine Fluoride** (*Worksheet:3012*) 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: Revision of Policy, Alteration of Dental Treatment Plans by Third Party Claims Analysis** (*Worksheet:3014*) 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)

**Minnesota Dental Association Resolution 26: Defining the Practice of Dentistry** (*Worksheet:3015*). The Board of Trustees voted to transmit Resolution 26 to the House of Delegates with the following comment and recommendation to vote yes on referral. (Vote: 19 Yes—Drs. Black, Cohlma, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Kyger, Leary, McDougall, Norbo, Rodriguez, Sabates, Shepley, Stephens, Thompson; 1 No: Dr. Klemmedson)

Current ADA policies include Ownership of Dental Practices (*Trans.2000:462*), Regulating Non-

Dentist Owners of Dental Practices (*Trans.*2011:491) and Dentistry (*Trans.*1997:687; 2015:254). Amendments to the ownership policies have been submitted to the 2019 House of Delegates by the Council on Dental Practice.

While current policies do not specifically define either dental practice or ownership of a dental practice, these concepts are intertwined. Given the submission of amendments to existing policies, the Board of Trustees recommends referral of this resolution to the appropriate ADA agency so this resolution can be assessed with all related, and possibly amended, policies.

**Minnesota Dental Association Resolution 27: Resources for Member Dentists** (*Worksheet:*3017) The Board of Trustees voted to transmit Resolution 27 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)**

**Report 5 of the Board of Trustees to the House of Delegates: Governance Changes for ADA Commissions: Proposed Revisions to the ADA Bylaws and the Governance and Organizational Manual** (*Worksheet:*4000) The Board of Trustees voted to transmit Report 5 to the House of Delegates. (Vote: Unanimous) The Board of Trustees transmitted the following resolutions to the House of Delegates.

*Resolution 17—ADA Bylaws Amendment for the JCNDE* (*Worksheet:*4008) The Board of Trustees voted to transmit Resolution 17 to the House of Delegates with recommendation to vote yes. (Vote: 18 Yes—Drs. Black, Cohlmiia, Doroshow, Edgar, Fisch, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Rodriguez, Shepley, Stephens, Thompson; 1 No: Drs. Gehani, Sabates).

*Resolution 18—ADA Bylaws Amendment for the CCEPR* (*Worksheet:*4010) The Board of Trustees voted to transmit Resolution 18 to the House of Delegates with recommendation to vote yes. (Vote: 19 Yes—Drs. Black, Cohlmiia, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Rodriguez, Shepley, Stephens, Thompson; 1 No: Dr. Sabates).

*Resolution 19—Amendments to Chapter IX, Section A of the ADA Governance Manual* (*Worksheet:*4012) The Board of Trustees voted to transmit Resolution 19 to the House of Delegates with recommendation to vote yes. (Vote: 19 Yes—Drs. Black, Cohlmiia, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Rodriguez, Shepley, Stephens, Thompson; 1 No: Dr. Sabates).

*Resolution 20—Amendments to Chapter IX, Section B of the ADA Governance Manual* (*Worksheet:*4015) The Board of Trustees voted to transmit Resolution 20 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion).

*Resolution 21—Amendments to Chapter IX, Section C of the ADA Governance Manual* (*Worksheet:*4016) 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).

*Resolution 22—Amendments to Chapter IX, Section E of the ADA Governance Manual* (*Worksheet:*4018) The Board of Trustees voted to transmit Resolution 22 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion).

*Resolution 23—Amendments to Chapter IX, Section H of the ADA Governance Manual* (*Worksheet:*4020) The Board of Trustees voted to transmit Resolution 23 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion).

*Resolution 24—Amendments to Chapter IX, Section I of the ADA Governance Manual* (*Worksheet:*4021) The Board of Trustees voted to transmit Resolution 24 to the House of Delegates with a

recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion).

*Resolution 25—Amendments to Chapter IX, Section L of the ADA Governance Manual (Worksheet:4022)* The Board of Trustees voted to transmit Resolution 25 to the House of Delegates with recommendation to vote yes. (Vote: 19 Yes—Drs. Black, Cohlma, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Rodriguez, Shepley, Stephens, Thompson; 1 No: Dr. Sabates).

**Report 6 of the Board of Trustees to the House of Delegates: Assessment of the Effectiveness of the Commission for Continuing Education Provider Recognition Resolutions by the Board of Trustees Pursuant to Resolution 6H-2014** (*Worksheet:4024*) The Board of Trustees voted to transmit Report 6 to the House of Delegates (Vote: Unanimous).

### 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) Following discussion, the Board of Trustees transmitted the following resolution to the House of Delegates.

*Resolution 16—Nominations to Councils and Commissions (Worksheet:1024)* The Board of Trustees voted to transmit Resolution 16 to the House of Delegates with recommendation to vote yes (Vote: Unanimous).

### Closed Session

Closed sessions of the Board of Trustees were held at various times during the June 23–24, 2019, meeting of the Board of Trustees. The minutes of the closed session are separately recorded; however, any non-confidential actions taken by the Board are reflected in the minutes of the open meeting.

- Confidential Report on the Status of the ADA Foundation
- Board of Trustees Closed Session

### Adjournment

Without objection, the fifth regular meeting of the Board of Trustees adjourned *sine die* on Monday, June 24, 2019 at 2:37 p.m.

## **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 fourteen (14) members: nine (9) general members, two (2) Local Arrangements members, and two (2) trustees or vice presidents; and one (1) New Dentist Member.

**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

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.
- 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 in leadership on any constituent, component or significant domestic private meetings 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.

*New Dentist Member:* The Board shall approve one (1) New Dentist Member nominated by the New Dentist Committee to serve a one (1) year term. The New Dentist Member shall be eligible to serve up to four (4) one (1) year terms as a New Dentist Member.

*Liaisons:* The Committee shall have one (1) non-voting liaison selected by the American Student Dental Association (ASDA) 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 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 five-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 five-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.

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

*Duties of Committee Chair:* In collaboration with the Meeting 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 Meeting Chair of the [year] Meeting:* The Meeting Chair of the [year] Meeting shall collaborate with the Committee Chair on operations of the Committee. The Meeting Chair shall oversee the carrying out of the Committee's duties with respect to the meeting for which he or she serves as Meeting Chair. The Meeting 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 Meeting Chair may make appointments from among CAM members to carry out these duties.

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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; 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.

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.

Selection of Meeting Chairs of the Meetings: The Committee shall elect the Meeting Chair of the [year] Meeting three years prior to the year meeting for which he or she will serve as Meeting 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>2</sup>

*CE Chair.* The Meeting Chair of each Meeting may select the 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,

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<sup>2</sup> *The chair for the 2018 Meeting shall be the Meeting Chair of the 2018 Meeting. The Board shall select the Meeting Chair of the 2019 Meeting. The Committee shall elect the Meeting Chair of the 2020 Meeting in accordance with this charter. This footnote shall expire at the end of the 2020 House of Delegates*

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>i</sup>*: The Meeting Chair of the current Meeting shall appoint 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.
- Approve and report to the Board on the registration, exhibit booth, and other specific fees related to the ADA annual session.

Additionally, CAM will assist staff and local volunteers with the onsite management and execution of the annual meeting.

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

**APPENDIX D**

**PROPOSED AMENDED ADABEI BYLAWS**

The suggested revisions are:

- As a general comment, for the sake of gender neutrality, the term “Chairman” should be replaced with “Chair”.
- **Article II, Section 2:** It is suggested that the ADABEI Bylaws should allow the annual stockholder meeting to occur at a location other than the stockholder’s principal executive offices. This revision would allow the stockholder the flexibility to hold the annual ADABEI shareholder meeting, for example, in conjunction with the ADA’s New Board Meeting, wherever the ADA House of Delegates Annual Session is held.
- **Article III, Section 2:** It is believed to be simpler and less confusing for the Bylaws to state the exact number of directors that shall make up the ADABEI Board of Directors, rather than a range. If it is later determined that the Board of Directors needs to expand or contract, a Bylaws amendment adjusting the size of the Board can be proposed. It is also suggested that the Bylaws should specify that a majority of the ADABEI Board of Directors be composed of directors who are not trustees, officers or employees of the ADA (hereafter referred to as “independent directors”). “ADA-Related Directors,” as used herein, means directors who are current officers, trustees or employees of ADA.

It is suggested that the Board consist of 9 directors, classified as follows:

<b>Class of Director</b>	<b>Board of 9 Members</b>
Elected Independent Directors	5
Elected ADA-Related Directors	3
Ex Officio ADA-Related Director	1 (Executive Director)

Additionally, it is suggested that it be specified that any ADA-related director shall cease to be eligible to serve as a director if their tenure as an ADA officer, trustee or employee terminates.

While not necessarily needing to be codified in the Bylaws, the ADA believes it important for the selection of independent directors to serve on the ADABEI Board to have product, business or financial skills that would be useful to the Board of Directors and ADABEI. One way this could be accomplished is for a nominating committee to identify skill sets that would be of use to ADABEI and then perform a search to identify possible candidates for the independent director positions. Once potential directors are identified, the nominating committee could assemble a slate of candidates having the identified skills to the stockholder for election.

- Also in Section 2, to guard against too broad a grant of authority being delegated, it is suggested that the authority to delegate powers and duties be limited to those powers and duties that can be lawfully delegated, such as:  
 All powers and duties of the Board that can be lawfully delegated may be delegated to one or more committees of the Board.

- **Potential Additional Provisions:** To assist with aligning with the overall strategic plan of the ADA, the stockholder suggests that a provision allowing the President (or other ADA officer designated by the President) and the ADA Chief Financial Officer be given the right to participate fully in discussions and deliberations of the ADABEI Board of Directors, but without the right to vote. An example of such a provision follows:
 

The President and the Chief Financial Officer of the American Dental Association shall have the right to participate fully in all Board of Directors discussions and deliberations but shall not possess voting rights. Neither the President nor the Chief Financial Officer of the American Dental Association shall be a Director.
- The ADA as the sole stockholder also suggests that the ADABEI Board of Directors consider naming the ADA Chief Financial Officer as the Treasurer of ADABEI. This would allow ADABEI and its Board to take advantage of the considerable financial, budgeting and treasury expertise that exists within the ADA.
- **Article II, Section 4:** It is suggested that the independent directors should hold office for four years, and be eligible to serve one additional four year term so that the independent directors could serve a total of eight years. ADA-related directors who are officers or trustees of the ADA should, as noted above, serve on the ADABEI Board until their ADA positions expire. Should an ADA employee other than the Executive Director, serve on the Board, their term should be four years, with eligibility for one additional four year term. As stated above, an employee's position on the ADABEI Board would terminate upon separation as an employee with the ADA.  
As a note, it is expected that all incumbent directors would finish out their current terms of service.
- **Article III, Section 4:** It is suggested that the provision of this Section of the Bylaws that allows incumbent directors as of the date of adoption of the amended Bylaws to serve an additional four year term at the expiration of their present terms should be removed.
- **Article III, Section 6:** The stockholder believes that all vacancies on the ADABEI Board should be filled by the stockholder.
- **Article IV, Section 1:** The stockholder believes that any director except for the ex officio ADA- related director should be eligible to serve as chair. If the ADABEI Board has a different view, the stockholder requests an explanation of the reasoning behind the prohibition against a trustee or an elective officer of the stockholder serving as chair of the Board of Directors.
- **Article IV, Section 3:** Revise the term "President" to "Chair" to align with the revision of Article IV, Section 1 and general comment above.
- **Article IV, Section IV:** It is believed that removal of a member of the BOD should be solely the province of the stockholder.
- **Article VI, General Provisions:** The stockholder suggests that the then current edition of the American Institute of Parliamentarians Standard Code of Parliamentary Procedure be identified as the parliamentary authority to the extent that it is not contrary to the ADABEI Bylaws.

- Finally, as a general note, it is noted that there is no mention of the process for appointment of the ADABEI CEO. The stockholder suggests that consideration be given to including that process in the appropriate section of the Bylaws.

## Minutes of the Board of Trustees

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July 13, 2019

Headquarters Building, Chicago

**Call to Order:** A special session of the ADA Board of Trustees was called to order by Dr. Jeffrey M. Cole, president, on Saturday, July 13, 2019, at 7:30 a.m. in the Board Room of the ADA Headquarters Building, Chicago. The purpose of the special meeting, as stated in the meeting notice, was to consider Board Report 2 to the 2019 House of Delegates.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Jeffrey M. Cole, Chad P. Gehani, Richard A. Huot, Craig W. Herre, Glen D. Hall, Ted Sherwin, Kathleen T. O'Loughlin, Richard C. Black, Raymond A. Cohlma, Susan Becker Doroshov, Linda J. Edgar, Judith M. Fisch, Jay F. Harrington, Jr., Linda K. Himmelberger, Daniel J. Klemmedson, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Cesar R. Sabates, George R. Shepley, James D. Stephens, and Roy Thompson. Dr. Julio H. Rodriguez attended 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; Jordan Baugh, chief technology officer; Jerome K. Bowman, chief, Governance and Strategy Management; Judith Fleeks, vice president, Human Resources; James Goodman, senior vice president, Business Group; Michael A. Graham, senior vice president, Government and Public Affairs; Michelle Hoffman, vice president, Publishing; Stephanie Moritz, chief communications officer; David Preble, senior vice president, Practice Institute; Robert Quashie, vice president, Business Operations and Strategy; Paul Sholty, chief financial officer; 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; Gary Grzesiak, manager, Budget and Financial Analysis; Michelle Kruse, director, Administrative Services; Tom Parcella, director, Financial Planning and Analysis; Molly Potnick, coordinator, Board and House Matters; Wendy J. Wils, deputy general counsel; and Robert Zinn, director, Accounting and Reporting.

Before consideration of business, Dr. Cole 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.

**Board of Trustees Budget Review:** Dr. Ted Sherwin reviewed the changes made to the 2020 budget and Board Report 2.

### Reports and Resolutions to the House of Delegates

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

**Report 2 of the Board of Trustees to the House of Delegates: 2020 Budget** (*Worksheet.2016*): Following discussion of the proposed 2020 budget, the Board of Trustees voted to transmit Board Report 2 and the following resolutions to the House of Delegates. (Vote: Unanimous)

*Resolution 33—Approval of 2020 Budget (Worksheet:2095)* The Board of Trustees voted to transmit Resolution 33 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**33. Resolved**, that the 2020 Annual Budget of revenues and expenses, including net capital requirements be approved.

*Resolution 34—Establishment of Dues Effective January 1, 2020 (Worksheet:2096)* The Board of Trustees voted to transmit Resolution 34 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**34. Resolved**, that the dues of ADA active members shall be \$565.00, effective January 1, 2020.

### **Adjournment**

Without objection, the special meeting of the Board of Trustees adjourned *sine die* on Saturday, July 13, 2019 at 1:09 p.m.

## Minutes of the Board of Trustees

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August 11–13, 2019

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. Jeffrey M. Cole, president, on Sunday, August 11, 2019, at 8:00 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: Jeffrey M. Cole, Chad P. Gehani, Richard A. Huot, Craig W. Herre, Glen D. Hall, Ted Sherwin, Kathleen T. O’Loughlin, Richard C. Black, Raymond A. Cohlma, Susan Becker Doroshov, Linda J. Edgar, Judith M. Fisch, Jay F. Harrington, Jr., Linda K. Himmelberger, Daniel J. Klemmedson, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Cesar R. Sabates, George R. Shepley, James D. Stephens, 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; Jordan Baugh, chief technology officer; Jerome K. Bowman, chief, Governance and Strategy Management; Scott W. Fowkes, general counsel; Judith Fleeks, vice president, Human Resources; James Goodman, senior vice president, Business Group; Michael A. Graham, senior vice president, Government and Public Affairs; Michelle Hoffman, vice president, Publishing; Catherine H. Mills, vice president, Conferences and Continuing Education; Stephanie Moritz, chief communications officer; David Preble, senior vice president, Practice Institute; Robert Quashie, vice president, Business Operations and Strategy; Paul Sholty, chief financial officer; Marko Vujicic, chief economist and vice president, Health Policy 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. Ray Jarvis, chair, New Dentist Committee; Bill Robinson, chief executive officer, ADABIG; and Mr. Craig McKenzie, president, ASDA.

Others in attendance for all or portions of the meeting were: Tomisena Cole, senior manager, Board and House Matters; Thomas C. Elliott, Jr., deputy general counsel; Judith Jakush, editor, *ADA News*; April Kates-Ellison, senior director, Client Services; Michelle Kruse, director, Administrative Services; Nancy Livingston, senior associate general counsel; Molly Potnick, coordinator, Board and House Matters; Kyle Smith, manager, House of Delegates and Wendy J. Wils, deputy general counsel. Other ADA staff members were in attendance for specific agenda items.

Before consideration of business, Dr. Cole 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. Cole asked if there were any items of new business. The following items of new business were identified:

- Report of the Speaker (Dr. Cole)
- Legal Matters (Dr. Sabates)
- Fourteenth District Cannabis Use (Res. 79)
- Fourteenth District Vaping Policy (Res. 80)
- Fourteenth District Student Loan Repayment Strategies (Res 81)
- Fourteenth District New Dental Educators (Res 82)
- First District Availability of Fluoridation Facts (Res. 83)

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

**B-75-2019. 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. Cole reviewed the list of proposed consent items; the following reports were removed from the consent calendar.

- Report of the Workgroup on ADA/CODA Relationship
- Report of the ADA/FDI Delegation: 2019 FDI Science Committee Candidate (Res. B-69)
- Confidential Report of Dr. Linda Himmelberger, Liaison to the Joint Commission on National Dental Examinations
- Report 14 of the Board of Trustees to the House of Delegates: ADA Pension Plans
- Council on Dental Education and Licensure: Response to Resolution 83-2018 – Geriatric Dentistry (Res. 69)
- Report 10 of the Board of Trustees to the House of Delegates: Refocusing the Work of the ADA Foundation
- Dr. James Nickman, delegate, Minnesota: Dental Specialties Representation in the House of Delegates (Res. 77)
- Council on Advocacy for Access and Prevention: Response to Resolution 55H-2018: Developing a Culture of Safety Workgroup Update (Res. 78)

Without objection, the following resolution was adopted.

**B-72-2019. 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 June 23–24, 2019, Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-79-2019. Resolved**, that the minutes of the June 23-24, 2019, meeting of the Board of Trustees meeting be approved.

*Minutes of the July 13, 2019, Special Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-80-2019. Resolved**, that the minutes of the July 13, 2019, special 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. Daniel J. Klemmedson, chair, presented the report of the Audit Committee's August 10, 2019, meeting. The report identified major topics discussed and actions taken. Dr. Klemmedson moved Resolution B-88 with the Committee's recommendation to adopt; on vote Resolution B-88 was adopted by the Board of Trustees.

**B-88-2019. Resolved**, that the audited consolidated 2018 financial statements be accepted and forwarded to the ADA House of Delegates.

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Richard C. Black, chair, presented the report of the Budget and Finance Committee's August 9, 2019, meeting. The report identified the major topics discussed, and recommendations or actions taken. Dr. Black moved Resolution B-84 with the Committee's recommendation to adopt; on vote Resolution B-84 was adopted by the Board of Trustees.

**B-84-2019. Resolved**, that the Board approves the transfer of the projected spending needs of \$4.42 million from reserves for the remainder of 2019, and it be further

**Resolved**, that the Budget and Finance Committee continue to review the reserve spending needs and rebalancing strategy in the first half of 2020.

Dr. Black moved Resolution B-86 with the Committee's recommendation to adopt; on vote Resolution B-86 was adopted by the Board of Trustees.

**B-86-2019. Resolved**, that the ADA quarterly financial statements as of December 31, 2018 and March 31, 2019 be filed and posted in the appropriate delegates section.

*Request for Funding in Support of New Mexico Dental Association's Member Growth.* Dr. Black moved Resolution B-70 with the Committee's recommendation to adopt as amended; on vote Resolution B-70 was adopted by the Board of Trustees (additions underlined; deletions ~~stricken~~).

**B-70-2019. Resolved**, that up to \$~~40~~50,000 for a ~~two~~ one-year period that commences July 1, 2019 be allocated from Board Contingency to support a membership staff position for the New Mexico Dental Association, and be it further

**Resolved**, that the New Mexico Dental Association submit its request for additional funding of up to \$50,000 along with a report to ADA on the status of the membership staff position search and its membership growth initiative no later than March 1, 2020.

*Report of the Elder Care Workgroup: Update on ADA Elder Care Strategy and Funding Request:* Dr. Black moved Resolution B-74 with the Committee's recommendation to adopt as amended; on vote Resolution B-70 was adopted by the Board of Trustees.

**B-74-2019. Resolved**, that the following appropriation be made from the 2019 Board Contingent Fund to finance the costs associated with a second, in-person meeting of the Elder Care Workgroup

in order to continue the development of an updated elder care strategy, which will include a strategy on financing oral healthcare.

Board Contingent Fund  
Cost Center: 090-1500-000  
Amount: up to \$24,270

*Report of the Committee on Annual Meetings: Request for Additional Funding for Consultant Firm: Future Annual Meeting Strategy:* Ms. Catherine Mills reported that for a number of years, the annual meeting has been experiencing declines in attendance and exhibitor participation, although still being profitable. Recognizing this, the Board's Committee on Annual Meetings (CAM) has initiated a project to examine all aspects of the meeting to deliver new and more engaging experiences and to enhance profitability. Dr. Thompson moved Resolution B-85. A motion was made to amend B-85 by striking "Reserves between 2019 and 2020 up to \$600,000" and replacing it with "contingency up to \$200,000 in 2019 and the balance in 2020 from reserves, up to a total spend of \$600,000." On vote, the proposed amendment was adopted. On vote, the Board of Trustees adopted Resolution B-85 as amended.

**B-85-2019. Resolved**, that the Board of Trustees approves the funding of the annual meeting strategy project from Board ~~Reserves between 2019 and 2020 up to \$600,000~~ contingency up to \$200,000 in 2019 and the balance in 2020 from reserves, up to a total spend of \$600,000.

**Report of the Business Innovation Committee:** On behalf of the Business Innovation Committee, Dr. Richard C. Black, chair, presented the confidential report of the Committee's August 10, 2019, meeting. The report identified major topics discussed and actions taken.

**Report of the Diversity and Inclusion Committee:** On behalf of the Diversity and Inclusion Committee, Dr. Judith M. Fisch, chair, presented the report of the Committee's August 10, 2019, meeting. The report identified major topics discussed, reports received and actions taken. Dr. Fisch moved Resolution 89; on vote, Resolution B-89 was adopted by the Board of Trustees.

**B-89-2019. Resolved**, the Diversity and Inclusion Plan (2020-2025) be approved by the Board of Trustees.

**Report of the Compensation Committee:** On behalf of the Compensation Committee, Dr. Raymond A. Cohlma, chair, presented the report of the Committee's August 9, 2019, meeting. The report identified major topics discussed.

**Report of the Governance Committee:** On behalf of the Governance Committee, Dr. Daniel J. Klemmedson, chair, presented the report of the Committee's August 9, 2019, meeting. The report identified major topics discussed, and proposals or actions taken. Dr. Klemmedson moved Resolution B-87; on vote Resolution B-87 was adopted by the Board of Trustees.

**B-87-2019. Resolved**, that the following changes be made to the *Organization and Rules of the Board of Trustees* page 41 with regard to the Humanitarian Award (additions underscored and deletions ~~stricken~~):

**ADA Humanitarian Award:** The ADA Humanitarian Award recognizes dentist members who have distinguished themselves by outstanding, unselfish leadership and contributions to their fellow human beings in the field of dentistry, through the dedication of extraordinary time and professional skills to improve the oral health of underserved populations in the United States or abroad.

The Award is conferred by the Association upon the recommendation of a selection committee composed of six individuals: a member of the Council on Advocacy for Access

and Prevention (CAAP) selected by the Council; two ADA members with at least ten years of humanitarian experience or past Humanitarian Award winners, to be appointed by the President upon recommendation of the manager of international relations of the ADA-International Development Subcommittee who are appointed by their chair; the Association's president-elect, the director of CAAP and the manager, international development and outreach or, in the absence of the manager, international development and outreach, the manager, international relations. The Association's Executive Director will chair the Committee and will be an active participant with the right to vote only in the case of a tie vote. The Board of Trustees will be notified by the committee of the identity of the award recipient in a report designated as confidential until appropriate action is taken.

The criteria and process for this Award is available from ADA International Relations.

**Report of the Pension Committee:** On behalf of the Committee, Dr. Ted Sherwin, chair, presented the report of the Committee's August 9, 2019 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:** This informational report summarized ongoing campaign results for 2019 through June 30 (consent calendar item).

### Conferences and Continuing Education

**Report of the Committee on Annual Meetings: Future Site Selections for the 2026 and 2027 Annual Meetings:** The Board of Trustees adopted the following resolutions.

**B-76-2019.** (Confidential Action)

**B-77-2019.** (Confidential Action)

### Education and Professional Affairs

**Report of the Council on Dental Education and Licensure: Appointment of Consultants:** This informational report listed the consultants appointed to serve until the close of the 2020 House of Delegates (consent calendar item).

**Report of the Workgroup on ADA/CODA Relationship:** This report took place during a closed session of the Board of Trustees on Monday, August 12.

### Finance and Operations

**Report on the Status of the 2019 Board Contingent Fund and Approval of Supplemental Appropriation Requests:** A Board Contingent Fund of \$750,000 was authorized in the 2019 budget. The Board of Trustees approved total requests in the amount of \$464,630, leaving a balance of \$285,370 (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. Michael Graham, senior vice president, Government and Public Affairs, provided a report on advocacy efforts. Mr. Graham reported ADA will withdraw from the ad hoc

coalition advocating for medically necessary dental treatment covered under Medicare. The coalition has taken positions outside of ADA policy. For that reason CGA recommended withdrawal from that coalition. On McCarran Ferguson repeal, work continues and there is hope of success in the House of Representatives this fall. Outreach continues on the Senate side. Mr. Graham reported that the American Hospital Association has joined the coalition in support of this effort.

### 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).

### Information Technology

**Report of the Division of Technology: 2019 Major Technology Initiatives Update:** This informational report provided an update of major Technology initiatives for Q2 2019 (consent calendar item).

### Member and Client Services

**Report of the Division of Membership and Client Services: Laurel Road Update:** Mr. Robert Quashie, vice president, Business Operations and Strategy, and Ms. Tera Lavick, director, New Dentist Committee, provided an overview of ADA's relationship with Laurel Road and how the program is a member benefit. The presentation included a proposal to shift the refinancing program with Laurel Road, or some future provider, to ADABEI. Following the presentation, Dr. Norbo moved Resolution B-71. Dr. Norbo then moved to amend Resolution B-71 by adding a second resolving clause:

**Resolved**, that the ADA Board urges the ADABEI Board to maintain the refinancing program strictly as a member benefit.

The pending amendment was adopted without objection. Another motion was made to amend B-71 by striking "Laurel Road endorsement to" in the first clause and replacing it with "student loan refinancing" and adding "student loan" before "refinancing" in the second clause. Without objection, the proposed amendment was adopted. A subsequent motion was made to strike "strictly" from the second clause. Without objection, the proposed amendment was adopted. On vote, the Board of Trustees adopted Resolution B-71 as amended.

**B-71-2019. Resolved**, that the Board of Trustees authorizes the transition of the program management of the ~~Laurel Road endorsement to~~ student loan refinancing endorsement to ADABEI, and be further

**Resolved**, that the ADA Board urges the ADABEI Board to maintain the student loan refinancing program strictly as a member benefit.

**Report of the Office of Student Affairs: ASDA Consultant Program Approval of Consultants:** The Board of Trustees adopted the following resolution (consent calendar action).

**B-73-2019. Resolved**, that the following nominations for the 2019-2020 ASDA Consultant Program be approved:

- New Dentist Committee – Kai Huag, University of Alabama School of Dentistry, 2020
- Advisory Committee on Annual Meetings - Letitia Edwards, University of the Pacific, 2020
- Council on Advocacy for Access and Prevention – Sydney Shapiro, Columbia University, 2021
- Council on Communications – Leslie Tay, University of Pennsylvania, 2020
- Council on Dental Benefit Programs – Jared Ricks, University of Texas – San Antonio, 2020
- Council on Dental Education and Licensure – Craig McKenzie, University of Pennsylvania, 2021
- Council on Dental Practice – James Vegrzyn, Boston University, 2021

- Council on Ethics, Bylaws and Judicial Affairs – Anisha Pandya, Boston, University, 2020
- Council on Government Affairs - Kate McPherson, North Carolina Dental School, 2020
- Council on Members Insurance and Retirement Programs – Grace Eichler, Univ. of Pennsylvania 2020
- Council on Membership – Stephanie Sforza, Ohio State University, 2020
- Council on Scientific Affairs – Julia Cheung, University of Pennsylvania, 2021
- American Dental Political Action Committee – Gerald Scannell, Louisiana State, 2021
- Joint Commission on National Dental Examinations – Brandon Rensch, Creighton, 2020
- Joint Commission on National Dental Examinations – Laura Jean Binder, University of Texas, at Houston 2021

## Publishing

**Report of the Publishing Division: Update on Key Business Initiatives:** Ms. Michelle Hoffman, vice president, Publishing, presented the Board with an overview of JADA Open, which will use a revenue model where the cost of publication is borne by the authors or the funding agencies, who pay article-processing charges, rather than by readers and subscribing institutions. The articles themselves are freely available. JADA Open will allow ADA to focus on evolving areas of research, in addition to research which is required to be published in open access journals. It is important to note that JADA Open will be rigorously peer reviewed, as JADA is. Further, JADA Open will be an additional journal and JADA itself will remain. Next steps will to begin a search for an editor in chief and an editorial board. Following the presentation, Resolution B-78 was moved and adopted by the Board of Trustees.

**B-78-2019. Resolved,** that the Board of Trustees authorizes the launch of JADA Open, a new open access journal, as described in the August 2019 Update on Key Publishing Business Initiatives report.

## Science Institute

**Report of the Council on Scientific Affairs: Notification of Consultant Appointments for 2019-2020:** This informational report identified CSA-appointed consultants for 2019-2020 (consent calendar item).

## ADA Business Innovation Group

**Report of ADABIG: ADA Practice Transitions Update:** Mr. Bill Robinson, chief executive officer, ADABIG, reported the ADAPT board is planning on aggressively pursuing expansion of the pilot. Currently, the pilot is operating in Wisconsin and Maine. When this expansion occurs, it will require changes to ADAPT's technology platform and additional staff support. ADAPT will return to us with updates as this work progresses.

## ADA Business Enterprises, Inc.

**Report of ADA Business Enterprises:** This informational report provided a summary of 2019 activities through May (consent calendar item).

**Stockholder Meeting of ADABEI:** The regular session of the Board of Trustees was adjourned for the purpose of convening the Stockholder Meeting of ADABEI. Following the adjournment of the Stockholder Meeting of ADABEI, the regular session of the Board of Trustees reconvened.

## Organizational/Other

**Report of the Foundation Board on the Transition of ADA Foundation Philanthropy:** Dr. Kathleen O'Loughlin provided an update on the transition of ADA Foundation philanthropy. The Foundation will continue to exist and be a stronger, more focused Foundation. Some major philanthropic activities will shift to the ADA, although the endowed funds will remain housed in the Foundation. The ADA will manage Give Kids a Smile, Tiny Smiles and the charitable assistance grants through a services agreement between the ADA

and the Foundation. The transition Board is working toward refocusing the Foundation and seeking to ascertain during the next year, what the financial commitment of the ADA will be in future years.

**ADA Science and Research Transition Report:** Dr. Marcelo Araujo, vice president, Science Institute, reported the Science Institute will be moved into the recently refocused Foundation beginning next year. The Foundation will likely change its name to better reflect its renewed focus. The change in focus of the Foundation will maximize efforts in science both at our Chicago office and at the Foundation's research center in Maryland. The Council on Scientific Affairs will continue as an agency of the ADA and will work closely with the new Board of the Foundation. The work to complete this transition is moving forward. The Foundation is currently being overseen by a transition board made up of the ADA President, President-elect, Executive Director and one trustee, Dr. Klemmedson. The plan is to have the new Board of Directors appointed by the ADA Board in the coming months when the bylaws are approved, with the goal to make them effective January 1, 2020.

**Report of the Alliance of the American Dental Association:** This informational report provided a summary of the activities of the Alliance of the American Dental Association (consent calendar item).

**Report of the ADA/FDI Delegation: 2019 FDI Science Committee Candidate:** Resolution B-69 was moved and adopted by the Board of Trustees.

**B-69-2019. Resolved,** that Dr. Jeff Platt (Indiana) be approved as the 2019 ADA candidate for the FDI Science Committee, and appropriate materials be developed for his candidacy.

**Amended Report from the FDI NLO on the 2018 FDI Annual World Dental Congress – Buenos Aires, Argentina:** This amended report included the specific edits requested by the Board during its February meeting. (consent calendar item).

**Approval of Proposed 2022-2023 Board of Trustees Meeting Dates: Addition of a One-Day Special Meeting in 2021:** The Board of Trustees adopted the following resolutions (consent calendar action).

**B-81-2019. Resolved,** that the addition of a one-day meeting in August 2021 to approve the 2022 Budget be approved.

February 7-9 (Sunday – Tuesday)  
April 11-13 (Sunday – Tuesday)  
July 18-20 (Sunday – Tuesday)  
**August 28 Special One-Day Meeting to Review the 2022 Budget (Saturday)**  
September 12-14 (Sunday – Tuesday)  
October 16 (New Board of Trustees Meeting, Las Vegas)  
December 11-13 (Saturday – Monday) (Retreat and Board meeting—Location TBD)

**B-82-2019. Resolved,** that the following 2022 Board of Trustees meeting dates be adopted.

February 6-8 (Sunday – Tuesday)  
April 10-12 (Sunday – Tuesday)  
June 12-14 (Sunday – Tuesday)  
August 14-16 (Sunday – Tuesday)  
October 18 (New Board of Trustees Meeting)  
December 10-12 (Saturday – Monday) (Retreat and Board Meeting—Location TBD)

**B-83-2019. Resolved,** that the following 2023 Board of Trustees meeting dates be adopted.

February 5-7 (Sunday – Tuesday)  
April 2-4 (Sunday – Tuesday)  
June 11-13 (Sunday – Tuesday)  
July 30-August 1 (Sunday – Tuesday)

New Board of Trustees Meeting (October 10)  
December 2-4 (Saturday – Monday) (Retreat and Board meeting—Location TBD)

**Report of the President:** Dr. Jeffrey M. Cole presented an oral report that summarized his activities since the June Board meeting.

**Report of the President-elect:** Dr. Chad P. Gehani gave an oral report of meetings attended and trips taken since the June Board meeting.

**Report of the Executive Director:** Dr. Kathleen O’Loughlin presented the latest Quarterly Management Report and reported she expects to finish the year and the term of the current strategic plan in a strong position. A challenge the ADA is facing is that a large cohort of members is retiring. Despite this, net membership numbers are improving. State-specific membership data is now available to state societies. The key is the effort to better collaborate with the states since most membership decisions are made at the state and local levels. Decreasing dues revenues are an additional stressor and is largely attributable to dues discounting. The dues streamlining proposal going to the House will help in this regard.

### **Liaison Reports**

**Report of Dr. Raymond A. Cohlma, Liaison to the Council on Dental Education and Licensure:** This informational report summarized the June 27–28, 2019 CDEL meeting (consent calendar item).

**Report of Dr. Kenneth McDougall, chair, Council on Advocacy for Access and Prevention:** This informational report summarized the July 25, 2019 CAAP meeting (consent calendar item).

**Confidential Report of Dr. Linda K. Himmelberger, Liaison to the Joint Commission on National Dental Examinations:** This confidential report took place during a closed session of the Board of Trustees on Monday, August 12.

**Report of Dr. Richard C. Black, Chair to the Dental Licensure Objective Structured Clinical Examination (DLOSCE) Steering Committee:** This informational report provided an update on the progress the Steering Committee has made in each area of its charge, with a focus on key actions taken during the Steering Committee’s July 2019 meeting.

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

**Report of the New Dentist Committee:** Dr. Ray Jarvis, chair, New Dentist Committee, reported on new dentist related matters.

**CVS Update:** Mr. Jim Goodman, senior vice president, Business Group, provided a confidential update on ADA’s relationship and communications with CVS since the July Board meeting.

**ASDA Presentation:** Mr. Craig McKenzie, president, ASDA, presented the Board with ASDA’s strategic plan. ASDA is focusing on leadership development, financial stability, member value and increasing dental school support of student involvement with ASDA. A high percentage of ASDA members see value in their membership. Levels of engagement and recognition that ASDA promotes wellness were particularly high. ASDA’s advocacy efforts align with ADA efforts. Priorities are licensure reform, student debt, mid-level providers and fluoride.

### **New Business**

*Report of the Speaker.* Dr. Hall provided an overview of the role of a trustee during the annual meeting. Later in the meeting, the Board participated in a discussion on budget strategy during the House of Delegates.

## Reports and Resolutions to the House of Delegates

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

**Report 11 of the Board of Trustees to the House of Delegates: Response to Resolution 49-2018: The Dentist's Prayer** (*Worksheet:2097*) The Board of Trustees voted to transmit Report 11 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion) The Board of Trustees transmitted the following resolutions to the House of Delegates.

*Resolution 74—Rescission of ADA Policy, The Dentist's Prayer (Worksheet:2100)* The Board of Trustees voted to transmit Resolution 74 to the House of Delegates with recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

*Resolution 75—Amendment of ADA Policy, Recognition Of Religious Diversity (Worksheet:2102)* The Board of Trustees voted to transmit Resolution 75 to the House of Delegates with recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Board of Trustees Resolution 85: American Dental Association's Definition of Diversity** (*Worksheet:2103*) The Board of Trustees voted to transmit Resolution 85 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Council on Membership Report 2 to the House of Delegates: Update on Post-Doctoral Pilot Program** (*Worksheet:2105*) The Board of Trustees voted to transmit Report 2 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: Technology Initiatives, Expenditures and Estimated Future Projects** (*Worksheet:2108*). The Board of Trustees voted to transmit Report 8 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: Multi-State Group Dues Collection Pilot Program** (*Worksheet:2112*) 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: ADA Pension Plans** (*Worksheet:2122*) The Board of Trustees voted to transmit Report 14 to the House of Delegates. (Vote: 19 Yes—Drs. Black, Cohlmiia, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

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

**Third Trustee District Substitute Resolution 13S-1: Amendment to Resolution 13: Revision of Policy, Alteration of Dental Treatment Plans by Third-Party Claims Analysis** (*Worksheet:3015a*) The Board of Trustees voted to transmit Resolution 13S-1 to the House of Delegates with a recommendation to vote yes. (Vote: 19 Yes—Drs. Black, Cohlmiia, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

**Second Trustee District Resolution 28: Pediatric Screening for Sleep-Related Breathing Disorders** (*Worksheet:3019*) The Board of Trustees voted to transmit Resolution 28 to the House of Delegates with a recommendation to vote yes. (Vote: Unanimous)

**Council on Dental Practice Resolution 35: Amendment of Policy, Infection Control in the Practice of Dentistry** (*Worksheet:3021*) 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)

**Elder Care Workgroup Report 1 to the House of Delegates: Elder Care Strategy** (*Worksheet:3022*) The Board of Trustees transmitted the Elder Care Workgroup Report 1 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion) The Board of Trustees transmitted the following resolution to the House of Delegates.

*Resolution 72—Elder Care Strategy (Worksheet:3022)* The Board of Trustees voted to transmit Resolution 72 to the House of Delegates with recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Dental Practice Resolution 76: Amendment of Policy Statement on the Role of Dentistry in the Treatment of Sleep-Related Breathing Disorders** (*Worksheet:3024*) The Board of Trustees voted to transmit Resolution 76 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Report 9 of the Board of Trustees to the House of Delegates: Response to Resolution 75H-2018: Data Collection Parameters for Dental Practice Delivery Models** (*Worksheet:3027*) The Board of Trustees voted to transmit Report 9 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 65: Proposed Amendment of the ADA Policy On Early Detection and Prevention of Oral Cancer** (*Worksheet:4037*) The Board of Trustees voted to transmit Resolution 65 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 66: Amendment of Policy: Criteria for Recognition of a Certification Board for Dental Assistants** (*Worksheet:4040*) The Board of Trustees voted to transmit Resolution 66 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 67: Amendment of Policy: Criteria for Recognition of a Certification Board for Dental Laboratory Technicians** (*Worksheet:4043*) The Board of Trustees voted to transmit Resolution 67 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 68: Rescind Policy on Admissions Criteria for Dental Hygiene Programs** (*Worksheet:4046*) The Board of Trustees voted to transmit Resolution 68 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 69: Response to Resolution 83-2018: Geriatric Dentistry** (*Worksheet:4048*) The Board of Trustees voted to transmit Resolution 69 to the House of Delegates with a recommendation to vote yes. (Vote: 17 Yes—Drs. Black, Cohlmiia, Doroshov, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Klemmedson, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens; 2 No: Drs. Huot, Thompson; 1 Absent: Dr. Rodriguez)

**Fourteenth Trustee District Resolution 79: Response to Resolution 83-2018 - Geriatric Dentistry** (*Worksheet:4073*) The Board of Trustees voted to transmit Resolution 79 to the House of Delegates with a recommendation to vote yes. (Vote: 18 Yes—Drs. Black, Doroshov, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 No: Dr. Cohlmiia; 1 Absent: Dr. Rodriguez)

**Council on Dental Education and Licensure Report 1 to the House of Delegates: Self-Assessment** (*Worksheet:4074*) The Board of Trustees voted to transmit Report 1 to the House of Delegates (Board of Trustees consent calendar action—no Board discussion)

**Report 7 of the Board of Trustees to the House of Delegates: ADA Library and Archives Advisory Board Annual Report** (*Worksheet:4075*) The Board of Trustees voted to transmit Report 7 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 Government Affairs Resolution 36: Proposed Policy, Federal Student Loan Programs** (*Worksheet:5018*) The Board of Trustees voted to transmit Resolution 36 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 37: Proposed Policy, Federal Student Loan Repayment Incentives** (*Worksheet:5021*) The Board of Trustees voted to transmit Resolution 37 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 38: Proposed Policy, Tax Treatment of Student Loan Interest, Scholarships and Stipends** (*Worksheet:5023*) The Board of Trustees voted to transmit Resolution 38 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 39: Proposed Policy, General, Pediatric and Public Health Dental Residency Programs** (*Worksheet:5025*) 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 Government Affairs Resolution 40: Proposed Policy, National Pretreatment Standard for Dental Office Wastewater** (*Worksheet:5027*) 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 Government Affairs Resolution 41: Proposed Policy, Tax Treatment of Employer-Paid Fringe Health Benefits** (*Worksheet:5030*) 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 Government Affairs Resolution 42: Proposed Policy, Tax Treatment of Professional Dues** (*Worksheet:5032*) 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 Government Affairs Resolution 43: Amendment of the Policy, Legislative Assistance by the Association** (*Worksheet:5034*) 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)

**Council on Government Affairs Resolution 44: Amendment of the Policy, Inclusion of Members of Congress in Health Care Legislation** (*Worksheet:5035*) 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)

**Council on Government Affairs Resolution 45: Rescission of the Policy, Legislative Delegations**

(*Worksheet:5036*) The Board of Trustees voted to transmit Resolution 45 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 46: Rescission of the Policy, Enforcement of State Dental Practice Acts**

(*Worksheet:5038*) The Board of Trustees voted to transmit Resolution 46 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 47: Rescission of the Policy, Funding and Authority for Patient Protection**

(*Worksheet:5040*) The Board of Trustees voted to transmit Resolution 47 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 48: Rescission of the Policy, State Regulation of Advertising**

(*Worksheet:5042*) The Board of Trustees voted to transmit Resolution 48 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 49: Rescission of the Policy, Use of Dentist-to-Population Ratios**

(*Worksheet:5044*) The Board of Trustees voted to transmit Resolution 49 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 50: Rescission of the Policy, Use of Expert Witnesses in Liability Cases**

(*Worksheet:5046*) The Board of Trustees voted to transmit Resolution 50 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 51: Rescission of the Policy, Compensation of Dental Specialists in the Federal Dental Services**

(*Worksheet:5048*) The Board of Trustees voted to transmit Resolution 51 to the House of Delegates with the following comment and recommendation to vote yes on referral. (Vote: Unanimous)

The Board thanks the Council for its diligence in its regular comprehensive policy review. However, the Board feels that there is policy that can be created and retained within the language of this House directive. The Board urges the Council to review the directive and, if possible, bring forth a policy to the 2020 House of Delegates. For these reasons, the Board recommends referral of Resolution 51 back to the Council on Government Affairs for further consideration with a report back to the 2020 House of Delegates.

**Council on Government Affairs Resolution 52: Rescission of the Policy, Legislation Prohibiting Waiver of Patient Copayment/Overbilling**

(*Worksheet:5050*) The Board of Trustees voted to transmit Resolution 52 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 53: Rescission of the Policy, Deployed Dentists and Mandatory Continuing Education Requirements**

(*Worksheet:5052*) The Board of Trustees voted to transmit Resolution 53 to the House of Delegates with the following comment and recommendation to vote yes on referral. (Vote: Unanimous)

The Board thanks the Council for its diligence in its regular comprehensive policy review. However, the Board feels that there is policy that can be created and retained within the language of this House directive. The Board urges the Council to review the directive and, if possible, bring forth a policy to the 2020 House of Delegates. For these reasons, the Board recommends referral of Resolution 53 back to the Council on Government Affairs for further consideration with a report back to the 2020 House of Delegates.

**Council on Government Affairs Resolution 54: Rescission of the Policy, Exemption From Unemployment Insurance Liability for Active Duty Dentists** (*Worksheet:5054*) The Board of Trustees voted to transmit Resolution 54 to the House of Delegates with the following comment and recommendation to vote yes on referral. (Vote: Unanimous)

The Board thanks the Council for its diligence in its regular comprehensive policy review. However, the Board feels that there is policy that can be created and retained within the language of this House directive. The Board urges the Council to review the directive and, if possible, bring forth a policy to the 2020 House of Delegates. For these reasons, the Board recommends referral of Resolution 54 back to the Council on Government Affairs for further consideration with a report back to the 2020 House of Delegates.

**Council on Government Affairs Resolution 55: Rescission of the Policy, Support for Dentists Temporarily Called to Active Service** (*Worksheet:5056*) The Board of Trustees voted to transmit Resolution 55 to the House of Delegates with the following comment and recommendation to vote yes on referral. (Vote: Unanimous)

The Board thanks the Council for its diligence in its regular comprehensive policy review. However, the Board feels that there is policy that can be created and retained within the language of this House directive. The Board urges the Council to review the directive and, if possible, bring forth a policy to the 2020 House of Delegates. For these reasons, the Board recommends referral of Resolution 55 back to the Council on Government Affairs for further consideration with a report back to the 2020 House of Delegates

**Council on Government Affairs Resolution 56: Rescission of the Policy, Dentists as Providers in All Public and Private Health Care Programs and Discrimination in Payment for Services Performed by a Licensed Dentist** (*Worksheet:5058*) The Board of Trustees voted to transmit Resolution 56 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 57: Rescission of the Policy, Standard Benefit Package** (*Worksheet:5060*) The Board of Trustees voted to transmit Resolution 57 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 58: Rescission of the Policy, Dental Focus in Federal Health Agencies** (*Worksheet:5062*) The Board of Trustees voted to transmit Resolution 58 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 59: Rescission of the Policy, State Responsibility for Health, Safety and Welfare** (*Worksheet:5064*) The Board of Trustees voted to transmit Resolution 59 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 60: Rescission of the Policy, Suggested Dental Practice Acts** (*Worksheet:5066*) The Board of Trustees voted to transmit Resolution 60 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 61: Rescission of the Policy, Testimony by Component and Constituent Societies** (*Worksheet:6068*) The Board of Trustees voted to transmit Resolution 61 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 62: Rescission of the Policy, ADA Assistance in Legislative Initiatives** (*Worksheet:5070*) The Board of Trustees voted to transmit Resolution 62 to the House

of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Government Affairs Resolution 63: Rescission of the Policy, Cooperation of ADA and Constituent Societies in Development of State Health Care Reform** (*Worksheet:5072*) The Board of Trustees voted to transmit Resolution 63 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Bylaws, Ethics and Judicial Affairs Resolution 70: Report on the Referral of Resolution 21H-2018: Amendment of Policy: Use of the Term “Specialty”** (*Worksheet:5074*) The Board of Trustees voted to transmit Resolution 70 to the House of Delegates with a recommendation to vote yes. (Vote: 19 Yes—Drs. Black, Cohlma, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Rodriguez, Sabates, Shepley, Stephens, Thompson; 1 No: Dr. Doroshov)

**Council on Bylaws, Ethics and Judicial Affairs Resolution 71: Amendment of Chapter V., Section E.2. of the Governance Manual – Pilot Programs** (*Worksheet:5076*) The Board of Trustees voted to transmit Resolution 71 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Council on Bylaws, Ethics and Judicial Affairs Resolution 73: Amendment of the ADA Bylaws and Governance Manual to Revise the Committee Structure of the ADA** (*Worksheet:5078*) The Board of Trustees voted to transmit Resolution 73 to the House of Delegates with a recommendation to vote yes. (Board of Trustees consent calendar action—no Board discussion)

**Dr. James D. Nickman, Delegate, Minnesota, Resolution 77: Dental Specialties Representation in House of Delegates** (*Worksheet:5083*) The Board of Trustees voted to transmit Resolution 77 to the House of Delegates with the following comment and recommendation to vote no. (Vote: 19 No—Drs. Black, Cohlma, Doroshov, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

The Board thanks the delegate for submitting the resolution, but the Board does not support expanding the size of the House.

Dental specialists already have a robust presence in the ADA House of Delegates. In the 2018 House of Delegates, 100 out of 483 delegates, or 20.70% were identified as specialists. ADA data shows that the current participation by specialists in the House of Delegates virtually precisely matches the proportion of specialists in the universe of licensed dentists (42,615 specialists out of 201,049 licensed dentists, or 20.78%). Moreover, each of the nine specialties recognized in 2018 had at least one member of their specialty participating as a delegate to the 2018 House of Delegates and all 17 trustee district delegations included specialist delegates.

The Board notes that representation in the House for students and the federal dentist services represent a very different situation as compared to specialists. Specialists are able to, and do, serve as delegates. But absent the provisions of the *Bylaws* that provide for five delegates from the American Student Dental Association and at least one delegate from each federal dental service, students and federal service dentists would have no representation in the House of Delegates. Students are not active members of the Association and are, therefore, ineligible to serve as delegates but for the *Bylaws* provision providing for the five ASDA delegates. Federal dentists are, by and large, direct members of the Association; because they are not members of constituent societies, federal service dentists are unable to be selected as delegates by the 53 constituent societies.

The Board Rules require ADA to meet with specialty group leadership at least once a year to maintain open lines of communication regarding issues of mutual concern. The Board welcomes ongoing input from dental specialists as regular delegates to the House of Delegates but recommends a No vote on this resolution.

**Council on Advocacy for Access and Prevention Resolution 78: Response to Resolution 55H-2018: Establishing a Culture Of Safety in Dentistry** (*Worksheet:5087*) The Board of Trustees voted to transmit Resolution 78 to the House of Delegates with a recommendation to vote yes. (Vote: 19 Yes—Drs. Black, Cohlmlia, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

**Fourteenth Trustee District Resolution 80: ADA Policy on Vaping** (*Worksheet:5094*) The Board of Trustees voted to transmit Resolution 80 to the House of Delegates with the following comment and recommendation to vote no. (Vote: 2 Yes—Drs. Edgar, Klemmedson; 17 No—Drs. Black, Cohlmlia, Doroshow, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

The Board applauds District 14 for calling attention to the oral health risks associated with electronic nicotine delivery systems (ENDS), sometimes called “e-cigarettes,” “vapes,” “e hookahs” and “vape pens.” The Board shares the concern about the effect of these products may have on oral health.

The policy titled Policies and Recommendations on Tobacco Use (*Trans.2016:323*) already calls on the Association to lobby for additional research on the effects of these products on oral health. Additionally, the Food and Drug Administration (FDA) already has a mechanism in place to enable dentists to report injuries that result from vaping. The ADA has also embarked on the creation of a data warehouse for dentistry.

The Board believes that the Council on Advocacy for Access and Prevention is currently considering updating this policy, and that this new policy would not add to the Association’s ongoing efforts and therefore recommends that Resolution 80 not be adopted.

**Fourteenth Trustee District Resolution 81: Study Innovations for Alternate Student Loan Repayment Strategies** (*Worksheet:5096*) The Board of Trustees voted to transmit Resolution 81 to the House of Delegates with the following comment and recommendation to vote no. (Vote: 1 Yes—Dr. Klemmedson; 18 No—Drs. Black, Cohlmlia, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

The Board recognizes that dental student debt is a very serious issue. However, the Board notes that since 2010 there have been thirteen resolutions calling for actions on student debt, including the formation of several task forces. The work of these task forces has resulted in new programs, debt management tools, accreditation standards and ongoing advocacy and research. The Board estimates that between 2010 and 2017, the ADA spent approximately \$500,000 studying, addressing and advocating for change on this matter. In addition, this year the ADA and ASDA Boards met jointly to discuss student debt and the ADA Board had strategic discussions on the issue. Both Boards will continue to work in collaboration.

Moreover, the policy titled Advocacy for Student Loan Forgiveness and Other Educational Debt Reduction Programs (*Trans.2014:502*) already calls on the ADA to support pioneering ways to reduce the burden of dental student debt, including loan repayment incentives to practice in underserved areas. Recently, the ADA has been leading a coalition to reform the Public Service Loan Forgiveness program, which has been under scrutiny for being so poorly managed.

The Board believes another task force would not add to the Association’s ongoing efforts and therefore recommends that Resolution 81 not be adopted.

**Fourteenth Trustee District Resolution 82: Attracting New Dental Educators** (*Worksheet:5098*) The Board of Trustees voted to transmit Resolution 82 to the House of Delegates with the following comment and recommendation to vote no. (Vote: 1 Yes—Dr. Klemmedson; 18 No—Drs. Black, Cohlmlia, Doroshow, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

The Board applauds District 14 for calling attention to dental school faculty shortages across the United States. The Board also is alarmed by the shortage of dental school instructors.

The policy titled Advocacy for Student Loan Forgiveness and Other Educational Debt Reduction Programs (*Trans.2014:502*) already calls on the ADA to support pioneering incentives to encourage dentists to enter and remain in academic teaching and research positions. In fact, the ADA is currently leading a coalition to lobby for legislation to enhance the Dental Faculty Loan Repayment Program, which was created to use student loan forgiveness as an incentive to recruit dental school faculty.

The Board believes a new policy would not add to the Association's ongoing efforts and therefore recommends that Resolution 82 not be adopted.

**First Trustee District Resolution 83: Availability of ADA Publication Fluoridation Facts**

(*Worksheet:5100*) The Board of Trustees voted to transmit Resolution 83 to the House of Delegates with the following comment and recommendation to vote no. (Vote: 1 Yes—Dr. Fisch; 18 No—Drs. Black, Cohlmlia, Doroshov, Edgar, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

The Board applauds the efforts of the First District to educate the public on the value of community water Fluoridation but has concerns regarding the result of an electronic version of Fluoridation Facts available to the public at no cost.

The content of the book is highly scientific in nature and presents discussion of complicated subject matter which could be confusing to the general public.

The Board recommends instead that the Fluoridation website of MouthHealth.org have an increase of consumer friendly materials developed by the National Fluoridation Advisory Committee within the Council on Advocacy for Access and Prevention, including one page documents which members could utilize in their community education efforts.

**Virginia Dental Association Resolution 84: Clarification of ADA Policy Regarding Tobacco Products**

(*Worksheet:5102*) The Board of Trustees voted to transmit Resolution 84 to the House of Delegates with a recommendation to vote yes. (Vote: 11 Yes—Drs. Black, Doroshov, Edgar, Fisch, Gehani, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo; 8 No: Drs. Cohlmlia, Harrington, Herre, Himmelberger, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

**Report 10 of the Board of Trustees to the House of Delegates: Refocusing the Work of the ADA Foundation**

(*Worksheet:5103*) The Board of Trustees voted to transmit Report 10 to the House of Delegates (Vote: 19 Yes—Drs. Black, Cohlmlia, Doroshov, Edgar, Fisch, Gehani, Harrington, Herre, Himmelberger, Huot, Klemmedson, Kyger, Leary, McDougall, Norbo, Sabates, Shepley, Stephens, Thompson; 1 Absent: Dr. Rodriguez)

**Council on Government Affairs Report 1 to the House of Delegates: ADA Policy Review**

(*Worksheet:5105*) The Board of Trustees voted to transmit Council on Government Affairs Report 1 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

**Council on Communications Report 1 to the House of Delegates: Request to Provide Additional Funding for the Utilization Campaign**

(*Worksheet:5106*) The Board of Trustees voted to transmit Council on Communications Report 1 to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

**Report of the Fight Insurer Interference Strategic Taskforce to the House of Delegates: Response to Resolution 32H-2018** (*Worksheet:5109*) The Board of Trustees voted to transmit the Task Force Report to the House of Delegates. (Board of Trustees consent calendar action—no Board discussion)

**Report of the Election Commission: Response to Resolution 89-2018** (*Worksheet:5113*) The Board of Trustees voted to transmit the Report of the Election Commission 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 Business Innovation Group  
ADA Foundation  
Commission for Continuing Education Provider Recognition  
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  
National Commission on Recognition of Dental Specialties and Certifying Boards

### **Closed Session**

Closed sessions of the Board of Trustees were held at various times during the August 11–13, 2019, meeting of the Board of Trustees. The minutes of the closed session are separately recorded; however, any non-confidential actions taken by the Board are reflected in the minutes of the open meeting.

- Report of the Workgroup on ADA/CODA Relationship
- Confidential Report of Dr. Linda Himmelberger, Liaison to the Joint Commission on National Dental Examinations
- Board of Trustees Closed Session Discussion: Henry Schein Request

### **Attorney-Client Session**

An attorney-client session of the Board of Trustees was held on Sunday, August 11, 2019, in the Board Room of the ADA Headquarters Building, Chicago. The session began at 3:30 p.m. and adjourned at 4:45 p.m. Items discussed included:

- Report of the Division of Legal Affairs: Summary of Litigation and Other Matters
- Legal Matters Discussion

### **Adjournment**

Without objection, the sixth regular meeting of the Board of Trustees adjourned *sine die* on Tuesday, August 13, 2019 at 9:38 a.m.

## Minutes of the Board of Trustees

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August 20, 2019

### Special Telephonic Meeting of the Board of Trustees

**Call to Order:** A special session of the ADA Board of Trustees was called to order on Tuesday, August 20, 2019 at 5:00 p.m., Central Daylight Savings Time. The telephonic 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 present were: Drs. Jeffrey M. Cole, Chad P. Gehani, Richard Huot, Craig W. Herre, Glen D. Hall, Ted Sherwin, Kathleen T. O'Loughlin, Richard C. Black, Susan Becker Doroshow, Linda J. Edgar, Judith M. Fisch, Jay F. Harrington, Daniel J. Klemmedson, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Cesar R. Sabates, George R. Shepley, James D. Stephens, Roy Thompson

Dr. Raymond Cohlma and Dr. Linda Himmelberger were not present at the telephonic meeting.

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

**Staff:** ADA staff present were: Jerry Bowman, chief, Governance and Strategy Management; Stephanie Moritz, chief communications officer; Wendy Wils, deputy general counsel; Thomas Elliott, deputy general counsel; Leslee Williams, senior director, Communications; Janine MacLachlan, director, Council on Communications; Michelle Kruse, director, Administrative Services; Tomisena Cole, senior manager, Board and House Matters

Before consideration of business Dr. Cole called attention to the ADA Disclosure Policy included on the meeting agenda and the requirement to disclose any conflicts of interest. Dr. Doroshow disclosed that she knew several of the proposed spokespersons proposed for approval. Dr. Cole acknowledged her comments, but said she was no conflict with that. No other disclosures were made.

**Approval of ADA Spokespersons:** Dr. Cole moved Resolution B-90 for the Board's consideration. On vote, the Board of Trustees adopted Resolution B-90.

### Resolution

**B-90-2019. Resolved,** that the following individuals be approved as national ADA spokespersons through the conclusion of the 2020 annual meeting.

#### *New Spokespersons*

Anita Aminoshariae, D.D.S., M.S., Cleveland, OH, District 7 (Opioids)  
 Jeffrey M. Cole, D.D.S., M.B.A., Wilmington, DE, District 4 (Business of dentistry)  
 Angelo Mariotti, B.S., D.D.S., Ph.D., Columbus, OH, District 7 (Home oral care)  
 Alessandro Villa, D.D.S., Ph.D., M.P.H., Boston, MA, District 1 (HPV/oral cancer)

#### *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)  
 Edmond R. Hewlett, D.D.S., Los Angeles, CA (Action for Dental Health, safety net)

Julius Manz D.D.S., Farmington, NM  
Matthew Messina, D.D.S., Fairview Park, OH  
Richard Price, D.M.D., Waban, MA  
Tricia Quartey, D.M.D., Brooklyn, NY  
Tyrone Rodriguez, D.D.S., New Haven, CT (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)  
Anthony C. Caputo, D.D.S., Tucson, AZ (Anesthesia)  
Gregory N. Connolly, D.M.D., Boston, MA (Tobacco)  
Terry Dickinson, D.D.S., Richmond, VA (Access, Action for Dental Health, Missions of Mercy)  
Terence E. Donovan, D.D.S., Chapel Hill, NC (Dental Materials)  
E. Jane Gillette, D.D.S., Bozeman, MT (Science/EBD)  
Jane Grover, D.D.S., M.P.H., Chicago, IL (Action for Dental Health)  
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., Detroit, MI (Action for Dental Health, Eldercare)  
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, PhD., Northville, MI (Infection Control/Dental Unit Water Lines)  
Robert M. Pick, D.D.S., Chicago, IL (Dental Implants)  
Howard F. Pollick, D.D.S., M.P.H., San Francisco, CA (Action for Dental Health, Fluoridation)  
Louis Rafetto, D.M.D., Wilmington, DE (Oral Surgery and Anesthesia)  
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, (Action for Dental Health, Pediatric Dentistry, Prevention)  
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)  
Cheryl Watson-Lowry, D.D.S., Chicago, IL (Action for Dental Health)  
Joel Weaver, D.D.S., Ph.D., Columbus, OH (Anesthesia)

**Adjournment:** The special session of the Board of Trustees adjourned at 5:04 p.m.

## Minutes of the Board of Trustees

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September 10, 2019

San Francisco, California

**Call to Order:** The first session of the new Board of Trustees was called to order by President Chad P. Gehani on Tuesday, September 10, at 7:55 a.m., at the Marriott Marquis, Golden Gate C1, in San Francisco, California.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Chad P. Gehani, Daniel J. Klemmedson, Craig W. Herre, Vincent U. Rapini, W. Mark Donald, Ted Sherwin, Kathleen T. O'Loughlin, Craig S. Armstrong, Susan Becker Doroshov, Linda J. Edgar, Terry Fiddler, Jay F. Harrington, Jr., Linda K. Himmelberger, Brett Kessler, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Richard J. Rosato, Cesar R. Sabates, George R. Shepley, James D. Stephens, and Roy Thompson.

Following the roll call, Dr. Donald 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; Jordan Baugh, chief technology officer; Jerome K. Bowman, chief, Governance and Strategy Management; Scott Fowkes, general counsel; James S. Goodman, senior vice president, Business Group; Michael A. Graham, senior vice president, Government and Public Affairs; Michelle Hoffman, vice president, Publishing; Catherine H. Mills, vice president, Conferences and Continuing Education; Stephanie Moritz, chief communications officer; David Preble, senior vice president, Practice Institute; Robert Quashie, vice president, Business Operations and Strategy; Paul Sholty, chief financial officer; Marko Vujcic, chief economist and vice president, Health Policy Institute; and Anthony Ziebert, senior vice president, Education/Professional Affairs.

Guests in attendance for a portion or portions of the meeting included: Mr. Bill Robinson, chief executive officer, ADA Business Innovation Group.

Others in attendance for all or portions of the meeting were: Tomisena Cole, senior manager, Board and House Matters; Thomas C. Elliott, Jr., deputy general counsel; 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, deputy general counsel.

Before consideration of business, Dr. Gehani 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:** The Board of Trustees adopted the following resolution.

**B-92-2019. Resolved**, that the agenda on page 1 of the Board Agenda Book be approved as the official order of business for the current meeting.

**Approval of Minutes of Previous Sessions:** The following resolutions were adopted by the Board of Trustees.

**B-93-2019. Resolved**, that the minutes of the August 11-13, 2019, meeting of the Board of Trustees be approved.

**B-94-2019. Resolved**, that the minutes of the August 20, 2019, special meeting of the Board of Trustees be approved.

### **Structure and Operation of the 2019–20 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 August 2019.

**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. Accordingly, President Gehani reported the following liaison assignments to ADA councils and commissions:

Advocacy for Access and Prevention	Dr. Billie Sue Kyger
Communications	Dr. Julio Rodriguez
Continuing Education Provider Recognition	Dr. Paul Leary
Dental Accreditation	Dr. Roy Thompson
Dental Benefit Programs	Dr. Cesar Sabates
Dental Education and Licensure	Dr. Jay Harrington
Dental Practice	Dr. Kirk Norbo
Ethics, Bylaws and Judicial Affairs	Dr. Linda Himmelberger
Government Affairs	Dr. George Shepley
Membership	Dr. Linda Edgar
Members Insurance and Retirement Programs	Dr. Kenneth McDougall
National Dental Examinations	Dr. James Stephens
New Dentist Committee	Dr. Susan Becker Doroshov
Recognition of Dental Specialties and Certifying Boards	Dr. Richard Rosato
Scientific Affairs	Dr. Craig Armstrong

**Report on Appointment of ADA Council Chairs, 2019-20:** The Board received an informational report identifying council, commission and committee chairs for the 2019-20 term.

**Appointment of Delegation to the FDI World Dental Federation Delegation:** Dr. Gehani reported that the following individuals were appointed to serve as the delegation to the 2020 World Dental Congress to be held in Shanghai, China.

#### **Delegates**

Dr. Maxine Feinberg, USA National Liaison Officer, *ex officio*  
Dr. Chad Gehani, president, *ex officio*  
Dr. Daniel Klemmedson, president-elect, *ex officio*  
Dr. Jeffrey Cole, immediate past president, *ex officio*  
Dr. Joseph Crowley, previous immediate past president, *ex officio*  
Dr. Ken McDougall, fourth-year trustee  
Dr. Julio Rodriguez, third-year trustee  
Dr. Linda Edgar, second-year trustee  
Dr. Craig Armstrong, first-year trustee  
Dr. Rekha Gehani, presidential appointee

*Note:* There is no funding in 2020 for alternate delegates

**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. Selection of members for the Committee on Annual Meetings and the New Dentist Committee are made in accordance with the selection criteria and process set forth in the charters of these Committees.

Accordingly, President Gehani reported that he made the following appointments to the standing committees of the Board of Trustees for 2019–20.

Audit Committee

Dr. Billie Sue Kyger, fourth year trustee, chair  
 Dr. Chad Gehani, president, non-voting member  
 Dr. Daniel Klemmedson, president-elect, non-voting member  
 Dr. Jay Harrington, third year trustee  
 Dr. Susan Becker Doroshow, second year trustee  
 Dr. Brett Kessler, first year trustee  
 Dr. Brendan Dowd, member, House of Delegates  
 Dr. Dean Nicholas, member, House of Delegates  
 Independent Financial Consultant

Budget and Finance

Dr. Cesar Sabates, fourth-year trustee, chair  
 Dr. Ted Sherwin, treasurer  
 Dr. Daniel Klemmedson, president-elect  
 Dr. Craig Herre, first vice president  
 Dr. George Shepley, third-year trustee  
 Dr. Linda Edgar, second-year trustee  
 Dr. Craig Armstrong, first-year trustee  
 Dr. Tom Paumier, member, House of Delegates  
 Dr. Howard Zolot, member, House of Delegates

Business Innovation

Dr. Kirk Norbo, fourth-year trustee, chair  
 Dr. Jay Harrington, third-year trustee  
 Dr. Linda Edgar, second-year trustee  
 Dr. Craig Armstrong, first-year trustee  
 Dr. Emily Mattingly, New Dentist Committee  
 Dr. Chad Gehani, president, non-voting member  
 Dr. Daniel Klemmedson, president-elect, non-voting member  
 Dr. Ted Sherwin, consultant

Compensation

Dr. Kirk Norbo, fourth-year trustee, chair  
 Dr. Chad Gehani, president  
 Dr. Daniel Klemmedson, president-elect  
 Dr. Linda Himmelberger, third-year trustee  
 Dr. Paul Leary, second-year trustee  
 Dr. Richard Rosato, first-year trustee  
 Dr. Ted Sherwin, treasurer, non-voting member

**Appointment of Standing Committees  
(continued):**

Diversity and Inclusion

Dr. Roy Thompson, fourth-year trustee, chair  
Dr. Julio Rodriguez, third-year trustee  
Dr. Susan Becker Doroshow, second-year trustee  
Dr. Brett Kessler, first-year trustee  
Dr. Craig Herre, first vice president  
Dr. Tawana Ware, alumni member  
Dr. Maritza Morell, alumni member  
Dr. Michelle Thompson, alumni member  
Dr. Mina Kim, at-large member

Governance

Dr. Kenneth McDougall, fourth-year trustee, chair  
Dr. Linda Himmelferber, third-year trustee  
Dr. James Stephens, second-year trustee  
Dr. Terry Fiddler, first-year trustee  
Dr. Vincent Rapini, second vice president  
Dr. Chad Gehani, president, non-voting member  
Dr. Daniel Klemmedson, president-elect, non-voting member  
Dr. Kathleen O'Loughlin, executive director, non-voting member  
Dr. W. Mark Donald, speaker, consultant

Pension

Dr. Ted Sherwin, treasurer, chair  
Dr. Chad Gehani, president  
Dr. Daniel Klemmedson, president-elect  
Dr. Kathleen O'Loughlin, executive director  
Mr. Paul Sholty, chief financial officer  
Ms. Judi Fleeks, vice president, Human Resource  
Mr. Scott Fowkes, general counsel  
Dr. Cesar Sabates, member, Budget and Finance Committee  
Dr. Paul Leary, member, Compensation Committee  
Dr. Rita Cammarata, member, House of Delegates  
Dr. Sanjay Patel, member, House of Delegates

Without objection, the following resolution was adopted.

**B-95-2019. 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 Committee on Annual Meetings (CAM) consists of 14 members: nine general members, two Local Arrangements members, two trustees or vice presidents, without the power to vote, appointed by the President, and one New Dentist Member. Resolution 96 was presented to approve the appointment of Dr. George Shepley as vice chair. Without objection, Resolution 96 was adopted.

**B-96-2019. Resolved**, that the appointment of vice chair to the Committee on Annual Meetings as made by the President be approved.

Dr. George Shepley, vice chair, non-voting member

All other Committee members listed below were approved through previous actions of the Board.

Dr. James Stephens, chair, non-voting member  
Dr. George Shepley, vice chair, non-voting member  
Dr. Nanette C. Tertel, Ohio, 2020, general member and 2020 meeting chair  
Dr. H. Charles McKelvey, California, 2022, general member and 2021 meeting chair  
Dr. Robert Blackwell, Illinois, 2021, general member  
Dr. Paul Kirkegaard, Minnesota, 2020, general member and 2020 continuing education chair

Dr. Melanie R. Love, Virginia, 2023, general member  
 Dr. David A. Schimmel, Pennsylvania, 2024, general member  
 Dr. Peter C. Shatz, Georgia, 2024, general member  
 Dr. Robert L. Skinner, Arkansas, 2023, general member, 2021 continuing education chair and 2022 meeting chair  
 Dr. Debra Weisfuse, New York, 2021, general member  
 Dr. Lauren Vitkus, New York, 2020, new dentist member  
 Dr. Bertram Hughes, Florida, 2020, local arrangements member  
 Dr. Brad Wilbur, Nevada, 2021 local arrangements member

**New Dentist Committee:** The Board received an informational report identifying New Dentist Committee members for the 2019-20 term.

**Appointment of Representatives to Other Organizations and Activities:** The following appointments of representatives and members of other committees were also made by President Gehani.

Liaison to the American Student Dental Association	Dr. Linda Edgar
Liaison to the Alliance of the American Dental Association	Dr. Vincent Rapini
Dental Lifeline Network Board of Directors	Dr. Brett Kessler Dr. Kirk Norbo ( <i>continuing member through 2020</i> )

**Other Committees, Task Forces, and Activities:**

American Dental Political Action Committee Board of Directors	Dr. Cesar Sabates
Presenter of Board Reports to the House of Delegates	Dr. Billie Sue Kyger
Liaison to Standards Committee on Dental Informatics	Dr. Kirk Norbo
Publishing Liaison	Dr. Terry Fiddler
Norton Ross Selection Committee	Dr. Paul Leary
D.C. Townhouse Oversight Group	Dr. Cesar Sabates, chair Dr. George Shepley Dr. Daniel Klemmedson Dr. Philip Fijal, chair, CGA Dr. David Watson, chair, ADPAC

**Other Committees, Task Forces, and Activities (continued):**

CODA Standing Committee on International Accreditation

Dr. George Shepley, chair  
Dr. Bryan Edgar, at-large member  
Dr. Lawrence Wolinski, CODA representative  
Dr. Perry Tuneberg, at-large member  
Dr. Marsha Pyle, CODA representative  
Dr. Chad Gehani, president, non-voting member  
Dr. Arthur Chen-Shu Jee, CODA chair, non-voting member

SPA Oversight Committee

Dr. George Shepley (*continuing member*)  
Dr. Craig Armstrong  
Dr. Philip Fijal, CGA Rep  
Dr. David White, CGA Rep  
Dr. Frank Luorno, CC Rep

Dental Quality Alliance Committee

Dr. Yvonne Maldonado, CDBP  
Dr. Cary Limberakis, CDP  
Dr. Deborah Bishop, at-large member  
Dr. Mark Koday, at-large member  
Dr. Jim Crall, at-large member

Dental Content Committee

Dr. Paul Leary, chair  
Dr. Richard Rosato, vice chair  
Dr. James Hollingsworth, CDBP  
Dr. Cynthia Olenwine, CDBP  
Dr. King Scott, CDBP  
Dr. Jonathan Knapp, CDP  
Dr. Doug Wolff, CDP

Alternates:

Dr. Christopher Bulnes, CDBP  
Dr. Cary Limberakis, CDP

ADA Library and Archives Advisory Board

Dr. Jay Harrington, chair  
Dr. Susan Becker Doroshov  
Dr. Linda Niessen, CDEL  
Dr. Jun Lim, CDEL  
Dr. Raymond Dionne, CSA  
Dr. Carol Lefebvre, CSA  
Dr. Annette Masters, at-large member  
Dr. Viren Jhaveri, at-large member  
Ms. Amanda Nevius, public member, special librarian

**Other Committees, Task Forces, and Activities (continued):**

Workgroup on ADA/CODA Relationship

Dr. Roy Thompson, BOT, co-chair  
Dr. Arthur Chen-Shu Jee, CODA,  
co-chair  
Dr. Cesar Sabates, BOT  
Dr. Paul Leary, BOT  
Dr. George Shepley, BOT  
Dr. Terry Fiddler, BOT  
Dr. Monica Hebl, CODA  
\*Dr. Kevin Haubrick, CODA  
Dr. Jeffery Hicks, CODA  
\*Dr. Bruce Rotter, CODA

Coalition for Modernizing Dental Licensure

Dr. Joseph Crowley (*continuing member*)  
Dr. Kirk Norbo (*continuing member*)

Elder Care Workgroup

Dr. Cesar Sabates, chair  
\*\*Dr. Craig Armstrong  
Dr. Joseph Battaglia  
Dr. Michael Eggnatz  
Dr. William Gerlach  
Dr. Judith Jones  
Dr. Matthew Messina  
Dr. Paul Mulhausen  
Dr. Richard Nagy  
Dr. Marsha Pyle  
Dr. Diane Romaine  
Dr. Ronald Riggins  
Dr. Thomas Sollecito

\*Subsequent to the September Board meeting, Dr. Kevin Haubrick and Dr. Bruce Rotter were selected to serve as CODA representatives on the Workgroup on ADA/CODA Relationship in place of Dr. Steven Friedrichsen and Dr. David Cushing.

\*\*Subsequent to the September Board meeting, the President appointed Dr. Craig Armstrong to serve on the Elder Care Workgroup.

**Dental Licensure Objective Structured Clinical Examination (DLOSCE):** The members of the Dental Licensure Objective Structured Clinical Examination (DLOSCE) are appointed by the President and approved by the Board of Trustees. Without objection, Resolution B-97 was adopted.

**B-97-2019. Resolved,** that the Dental Licensure Objective Structured Clinical Examination (DLOSCE) Steering Committee be established for the 2020 term to oversee the continued development, pilot and validation of the DLOSCE, and be it further

**Resolved,** that the following appointments to the DLOSCE Steering Committee, as made by the President, be approved:

Dr. Roy Thompson (chair)  
Dr. Craig Armstrong  
Dr. Eddie Hebert  
Dr. Prabu Raman  
Dr. Frank Licari  
Dr. Michael Kanellis  
Dr. David Carsten  
Dr. Mark Stetzel

**Nomination of ADA Trustee to Serve on the ADA Foundation Board:** The directors of the ADA Foundation Board are the ADA President, President-elect, Executive Director, and one ADA Trustee selected by the Member. The appointment of Dr. Craig Armstrong to serve as ADA Trustee representative on the ADA Foundation Board has been made by President Gehani and is subject to the approval of the Board of Trustees at the next ADA Foundation Meeting of the Member.

Dr. Chad Gehani, president  
Dr. Daniel Klemmedson, president-elect  
Dr. Kathleen O'Loughlin, executive director  
Dr. Craig Armstrong, trustee

**Meetings of the Board of Trustees, 2019–20:** 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-98 was adopted.

**B-98-2019. Resolved,** that the meetings of the 2018-19 Board of Trustees be as follows:

December 12-15, 2019 (Retreat and Board Meeting, if needed)  
February 9-11, 2020 (Sunday – Tuesday)  
April 5-7, 2020 (Sunday – Tuesday)  
June 14-16, 2020 (Sunday – Tuesday)  
August 23-25, 2020 (Sunday – Tuesday)  
October 20, 2020 (New Board Meeting, Orlando)  
December 5-7, 2020 (Retreat and Board Meeting, if needed)

**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-99 and B-100 were adopted.

**B-99-2019. Resolved,** that the 2019-20 President Corporate Officer Agreement be approved and adopted.

**B-100-2019. Resolved,** that the 2019-20 President-elect Corporate Officer Agreement be approved and adopted.

**Confidential Report of the Council on Members Insurance and Retirement Programs: ADA Members Insurance Plans Proposed 2020 Premium Credits and Royalties:** Without objection, Resolutions B-101 and B-102 were adopted.

**B-101-2019. Resolved,** that the following premium credits under the ADA Members Insurance Plans, as recommended by the Protective Insurance Company, are hereby approved:

- a 46% premium credit effective January 1, 2020 for the Life Plans,
- a 36% premium credit effective May 1, 2020 for the Disability Income Protection Plan,
- a 45% premium credit effective February 1, 2020 for the Office Overhead Expense Plan, and
- a 45% premium credit effective April 1, 2020 for the Supplemental Medical Plans (former MedCASH Plan, Hospital Indemnity and Critical Illness Plans.)

**B-102-2019. Resolved,** that the following estimated ADA royalties under the ADA Members Insurance Plans, as recommended by the Protective Insurance Company are hereby approved for payment to ADA in 2020:

- an estimated \$5.5 million from the Life Plans,
- an estimated \$1.12 million from the Office Overhead Expense Insurance Plan, and
- an estimated \$136,000 from the Supplemental Medical Plans (former MedCASH Plan, Hospital Indemnity and Critical Illness Plans.)
- no royalty from the Disability Income Protection Insurance Plan.

**Update on Annual Session:** Ms. Catherine Mills, vice president, Conferences and Continuing Education, provided an update on events of ADA/FDI2019. Ms. Mills reported a preliminary number of registrants at 31,101 and that she expects to make and achieve the forecasted budget of about \$1.7 million. Ms. Mills also reported positive feedback from FDI's executive director and president in regard to the joint meeting.

**Adjournment:** Without objection, the first meeting of the Board of Trustees adjourned *sine die* at 9:21 a.m. on Tuesday, September 10, 2019.

## Minutes of the Board of Trustees

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October 14, 2019

### Special Telephonic Meeting of the Board of Trustees

**Call to Order:** A special session of the ADA Board of Trustees was called to order on Monday, October 14, 2019 at 5:02 p.m., Central Daylight Savings Time. The telephonic 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 in attendance were: Chad P. Gehani, Daniel J. Klemmedson, Vincent U. Rapini, W. Mark Donald, Ted Sherwin, Craig S. Armstrong, Susan Becker Doroshov, Linda J. Edgar, Terry Fiddler, Jay F. Harrington, Jr., Linda K. Himmelberger, Brett Kessler, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Richard J. Rosato, George R. Shepley, James D. Stephens, and Roy Thompson.

Dr. Craig W. Herre, Dr. Brett Kessler, Dr. Cesar R. Sabates and Dr. Kathleen T. O'Loughlin were not present at the telephonic meeting.

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

**Staff:** ADA staff present were: Dr. David Preble, senior vice president, Practice Institute; Wendy Wils, deputy general counsel; Thomas Elliott, deputy general counsel; Michael Kendall, senior associate general counsel; Michelle Kruse, director, Administrative Services; Tomisena Cole, senior manager, Board and House Matters; and Molly Potnick, coordinator, Publications and Projects.

Before consideration of business Dr. Gehani called attention to the ADA Disclosure Policy included on the meeting agenda and the requirement to disclose any conflicts of interest. No disclosures were made.

**Discussion: CVS Opioid to OTC Program:** Dr. Dave Preble reported as background that Aetna's Chief Dental Officer contacted the ADA detailing a CVS opioid prescription to OTC switch program. CVS will be launching the program on a more widespread basis and are in the process of developing a press release. CVS is requesting a quote from the ADA.

During discussion, the Board expressed various concerns with having a pharmacist counseling dental patients without contacting the prescribing dentist. Following discussion, Dr. Gehani stated that ADA will politely decline this offer.

**Adjournment:** The special session of the Board of Trustees adjourned at 5:37 p.m.

## Minutes of the Board of Trustees

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October 31, 2019

### Special Telephonic Meeting of the Board of Trustees

**Call to Order:** A special session of the ADA Board of Trustees was called to order on Thursday, October 31, 2019 at 5:02 p.m., Central Daylight Savings Time. The telephonic meeting was called in accordance with the provisions of the ADA Bylaws and *Governance Manual* and the *Organization and Rules of the Board of Trustees*.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Chad P. Gehani, Daniel J. Klemmedson, Craig W. Herre, Vincent U. Rapini, W. Mark Donald, Ted Sherwin, Kathleen T. O'Loughlin, Craig S. Armstrong, Susan Becker Doroshov, Linda J. Edgar, Terry Fiddler, Jay F. Harrington, Jr., Linda K. Himmelberger, Brett Kessler, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Richard J. Rosato, Cesar R. Sabates, George R. Shepley, James D. Stephens, and Roy Thompson.

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

**Staff:** ADA staff present were: Marcelo Araujo, vice president, Science Institute; Jerry Bowman, chief, Governance and Strategy Management; Scott Fowkes, general counsel; Paul Sholty, chief financial officer; Nancy Livingston, senior associate general counsel; Wendy Wils, deputy general counsel; Thomas Elliott, deputy general counsel; Jim Lyznicki, senior manager, Council on Scientific Affairs; Michelle Kruse, director, Administrative Services; Tomisena Cole, senior manager, Board and House Matters; and Molly Potnick, coordinator, Publications and Projects.

Before consideration of business Dr. Gehani called attention to the ADA Disclosure Policy included on the meeting agenda and the requirement to disclose any conflicts of interest. No disclosures were made.

**Proposed Structure of the ADA Science and Research Institute:** Dr. Marcelo Araujo and Mr. Scott Fowkes reported that the process to create the ADA Science & Research Institute (ADASRI) continues, including getting additional advice from external legal counsel, specializing in 501(c)(3) work. Based on the information received, a defined plan to move forward has been created. Resolution B-103 was moved for the Board's consideration. Without objection, Resolution B-103 was adopted by the Board of Trustees.

**B-103-2019. Resolved,** that the ADA Board of Trustees directs the ADA Senior Management to move forward on implementing the proposed legal structure for the ADA Science and Research Institute LLC.

**Approval of Donation in Honor of Immediate Past Directors of the ADA Foundation:** Resolution B-104 was moved for the Board's consideration. Without objection, Resolution B-104 was adopted by the Board of Trustees.

**B-104-2019. Resolved,** that a donation in the amount of twenty-five thousand dollars (\$25,000) be made in honor of the immediate past directors of the ADA Foundation Board to the University of California San Francisco, School of Dentistry to help provide continuity of oral health care services to patients of UCSF's Community Dental Clinic.

**Adjournment:** The special session of the Board of Trustees adjourned at 5:29 p.m.

## Minutes of the Board of Trustees

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November 22, 2019

### Special Telephonic Meeting of the Board of Trustees

**Call to Order:** A special session of the ADA Board of Trustees was called to order on Friday, November 22, 2019 at 6:30 p.m., Central Daylight Savings Time. The telephonic meeting was called in accordance with the provisions of the ADA *Bylaws* and *Governance Manual* and the *Organization and Rules of the Board of Trustees*.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Chad P. Gehani, Daniel J. Klemmedson, Craig W. Herre, Vincent U. Rapini, W. Mark Donald, Ted Sherwin, Kathleen T. O'Loughlin, Craig S. Armstrong, Susan Becker Doroshow, Linda J. Edgar, Terry Fiddler, Jay F. Harrington, Jr., Linda K. Himmelberger, Brett Kessler, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Richard J. Rosato, Cesar R. Sabates, George R. Shepley, James D. Stephens, and Roy Thompson.

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

**Staff:** ADA staff present were: Krishna Aravamudhan, senior director, Center for Dental Benefits, ADA Practice Institute; Tomisena Cole, senior manager, Board and House Matters; Thomas Elliott, deputy general counsel; Scott Fowkes, general counsel; Jim Goodman, vice president, Business Group; Michael Kendall, senior associate general counsel; Michelle Kruse, director, Administrative Services; Molly Potnick, coordinator, Publications and Projects; David Preble, senior vice president, Practice Institute; and Wendy Wils, deputy general counsel.

**Guest in attendance for a portion of the meeting:** James R. Asmussen, Esq., Polsinelli Shughart PC

Before consideration of business Dr. Gehani called attention to the ADA Disclosure Policy included on the meeting agenda and the requirement to disclose any conflicts of interest. Dr. Terry Fiddler disclosed he is winding down a paid consultant contract with Delta Dental of Arkansas on December 1, 2019. Dr. Gehani indicated to Dr. Fiddler that he should recuse himself from the deliberations during the attorney-client session and any subsequent vote on the issue discussed, but could listen to the discussion. No other disclosures were made.

**Third Party Payer Market Disruptor: Bento:** Bento is a technology company that enables organizations and individuals to get access to affordable dental care without the need to contract with an insurance company. Bento's software application allows a family to find a dentist, manage appointments, understand costs and pay the dentist's fees using one comprehensive mobile app. Dr. David Preble reported that Bento has approached the ADA for consideration of a joint marketing and promotional opportunity, which is subject to a nondisclosure agreement between the parties. Resolution B-112 was moved for the Board's consideration. Without objection, Resolution B-112 was adopted by the Board of Trustees.

**B-112-2019.** Confidential Action

**Board of Trustees Attorney-Client Session: Pending Litigation:** An attorney-client session of the Board of Trustees was held at 6:57 p.m. In attendance were the members of the Board of Trustees, the general counsel, the deputy general counsel and the senior associate general counsel (as noted above) and Dr. Dave Preble. In open session, Resolution B-118 was considered and adopted. The text of Resolution B-118-2019 is currently embargoed.

**Adjournment:** The special session of the Board of Trustees adjourned at 7:17 p.m.

## Minutes of the Board of Trustees

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December 15, 2019  
Carolina, Puerto Rico

**Call to Order:** The second meeting of the Board of Trustees of the American Dental Association was called to order by Dr. Chad Gehani, president, on Sunday, December 15, 2019, at 8:00 a.m. in the Palmieri Room of the El San Juan Hotel, Carolina, Puerto Rico.

**Roll Call:** Officers and members of the Board of Trustees in attendance were: Chad P. Gehani, Daniel J. Klemmedson, Craig W. Herre, Vincent U. Rapini, W. Mark Donald, Ted Sherwin, Kathleen T. O'Loughlin, Craig S. Armstrong, Susan Becker Doroshow, Linda J. Edgar, Terry Fiddler, Jay F. Harrington, Jr., Linda K. Himmelberger, Brett Kessler, Billie Sue Kyger, Paul R. Leary, Kenneth McDougall, Kirk M. Norbo, Julio H. Rodriguez, Richard J. Rosato, Cesar R. Sabates, George R. Shepley, James D. Stephens, and Roy Thompson.

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

**Staff:** 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 and Scott Fowkes, general counsel. Marcelo Araujo, vice president, Science Institute; Krishna Aravamudhan, senior director, Center for Dental Benefits, ADA Practice Institute; Jim Goodman, vice president, Business Group; Nancy Livingston, senior associate general counsel, Legal; Jim Lyznicki, senior manager, Council on Scientific Affairs; and David Preble, senior vice president, Practice Institute; participated for portions of the meeting via teleconference.

Others in attendance were Tommi Cole, senior manager, Board and House Matters; and Michelle Kruse, director, Administrative Services.

**Guest:** James R. Asmussen, Esq., Polsinelli Shughart PC, participated for a portion of the meeting via teleconference.

Before consideration of business, Dr. Gehani 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 Consent Calendar and Agenda

*Approval of Agenda.* The following items of new business were identified:

- Open Access Publishing (Dr. O'Loughlin)
- Board Appointments to Councils (Dr. Doroshow)

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

**B-111-2019. 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 or the agenda when necessary to expedite business.

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

- ADA Practice Transitions Update

The amended consent calendar was adopted by the Board of Trustees.

**B-110-2019. 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 September 10, 2019, Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar actions).

**B-107-2019. Resolved**, that the minutes of the September 10, 2019, New Board of Trustees meeting be approved.

*Minutes of the October 14, 2019, Special Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-108-2019. Resolved**, that the minutes of the October 14, 2019, Special Telephonic meeting of the Board of Trustees be approved.

*Minutes of the October 31, 2019, Special Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-109-2019. Resolved**, that the minutes of the October 31, 2019, Special Telephonic meeting of the Board of Trustees be approved.

*Minutes of the November 22, 2019, Special Meeting of the Board of Trustees.* The following resolution was adopted (consent calendar action).

**B-123-2019. Resolved**, that the minutes of the November 22, 2019, Special Telephonic meeting of the Board of Trustees be approved.

### **Report on Mail Ballot Actions**

In accordance with the *Organization and Rules of the Board of Trustees*, mail ballot actions are required to be reported in the minutes of the next regular meeting of the Board of Trustees. Accordingly, the following mail ballot actions are presented. Each mail ballot resolution was unanimously approved (consent calendar item).

August 30, 2019—Mail Ballot #2  
*Posting of June 30, 2019, Financial Statements*

**B-91-2019. Resolved**, that the ADA quarterly financial statements as of June 30, 2019, be filed and posted in the appropriate delegates section.

November 6, 2019—Mail Ballot #3

*Amendment of the 2020 Strategic Promotional Incentive Plan*

**B-106-2019. Resolved**, that the 2020 Target Market in the *2018-2020 Strategic Promotional Incentive Plan* as adopted in Resolution B-108-2016 (*Trans.2016:231*) be amended as follows (additions=underscoring; deletions=~~stricken~~):

**Resolved**, that for the 2018-2020 Strategic Promotional Incentive plan, that any nonmember in the following select target markets that is ineligible for existing reduced dues programs as set forth in the *ADA Bylaws*, be eligible to receive a one-time fifty percent (50%) active member dues and special assessment reduction:

2018 Target Markets

- A. Non-member active licensed general practitioners not in a large group practice
- B. Recently lapsed non-members (most recent membership year of 2011, 2012 or 2013)
- C. Non-members working in a large group or corporate-owned practice
- D. Diversity SPI (under-represented ethnic/diverse and women non-member dentists)

2019 Target Markets

- A. Diversity SPI (under-represented ethnic/diverse and women non-member dentists)
- B. Non-members in the top five states with greatest opportunity for membership growth
- C. Non-members working in a large group or corporate-owned practice

2020 Target Markets

- A. Nonmember Specialists
- B. ~~Non-members working in a large group or corporate-owned practice~~ Diverse (under-represented ethnic/diverse and women dentists)
- C. C: Recently lapsed non-members (most recent membership years of 2018, 2017, 2016, 2015 and 2014)

**Reports of Standing Committees of the Board of Trustees**

**Report of the Budget and Finance Committee:** On behalf of the Committee, Dr. Cesar R. Sabates, chair, presented the report of the Budget and Finance Committee's December 6, 2019, meeting. The report presented its recommendations on the following resolution for the Board of Trustees' consideration (consent calendar item).

*Posting of Quarterly Financial Statements*

**B-105-2019. Resolved**, that the ADA quarterly financial statements as of September 30, 2019 be filed and posted in the appropriate delegates section.

**Report of the Governance Committee:** The Board of Trustees adopted the following resolution (consent calendar item).

*Proposal to Create a New Give Kids A Smile National Advisory Committee*

**B-119-2019. Resolved**, that the *Organization and Rules of the Board of Trustees* be amended effective January 1, 2020 through the addition of the following at the appropriate location:

**Give Kids A Smile National Advisory Committee:** The GKAS National Advisory Committee shall be an advisory committee to the ADA's Department of Corporate Social Responsibility and Philanthropy (the "Department").

*Composition.* The Committee shall be composed of not less than 7 and not more than 12 members, with at least one member from each of the following categories: American Student Dental Association/New Dentist member, and Interprofessional (i.e., non-dental professional) member. In addition, at least two representatives from industry and at least two GKAS Ambassador Alumni members and at least one but no more than two current members of the ADA Board of Trustees. All Committee members shall have the right to vote.

*Appointment.* Committee members shall be appointed by the ADA President with the approval of the Board of Trustees. Suggestions for appointment may be made by the Department, by the Committee itself, and by individual Board members.

*Term and Tenure.* The terms of service for members of the Committee who are Board members shall be one year, renewable as long as the member remains a member of the Board. Non-Board members shall serve for a four-year term, or such lesser or greater term as results from staggering the terms. Non-Board members shall be eligible for additional one-year terms at the discretion of the President and Board of Trustees.

*Chair.* The Committee shall select its own chair. The chair must serve at least one year on the Committee in order to be appointed as chair. The chair has the right to vote.

*Meetings.* The Committee shall meet at least annually in person, and at such other times either in person or by conference call as the Committee deems necessary.

*Duties.* The Committee shall be responsible for providing strategic advice to the Department with respect to Give Kids A Smile (GKAS). In addition, the Committee shall select the site for the following year's national kick-off event.

*Reports.* The Department shall periodically provide reports to the Board of Trustees and will include in such reports input received from the Committee.

and be it further,

**Resolved,** that the following appointments and corresponding terms made by the President to the Give Kids A Smile National Advisory Committee be approved:

Ms. Michele Penrose (Industry)  
Director of Professional Relations  
Henry Schein Inc.  
Term Ends: 2021

Ms. Ann Bruck (Industry)  
U.S. Industry Relations and Prof. Svcs. Manager  
3M Oral Care  
Term Ends: 2021

Ms. Grace Huang (Industry)  
Sr. Director of Marketing  
KaVo Kerr  
Term Ends: 2023

Ms. Angela Martinez (Industry)

AVP, Associations  
CareCredit  
Term Ends: 2022

Ms. Amy Moorman (Industry)  
Vice President, Operations  
Dental Trade Alliance  
Term Ends: 2021

Dr. Barbara Shearer (Industry)  
Director of Scientific Affairs  
Colgate  
Term Ends: 2022  
Dr. David Krol (Interprofessional)  
American Academy of Pediatrics  
Term Ends: 2020

Dr. Jeff Dalin (Ambassador)  
GKAS Ambassador  
Co-Founder, GKAS St. Louis  
Term Ends: 2023

Dr. Betsey Baumann-Smeege (New Dentist)  
New Dentist Representative  
GKAS Ambassador  
Term Ends: 2022

Dr. Mega Sata (Ambassador)  
GKAS Ambassador  
Term Ends: 2020

Dr. Billie Sue Kyger  
Term Ends 2020

Dr. James Stephens  
Terms Ends 2020

## **Education and Professional Affairs**

**Transfer of DLOSCE Development and Oversight to the Joint Commission on National Dental Examinations (JCNDE):** Without objection, the following resolution was adopted by the Board of Trustees.

**B-116-2019. Resolved,** that the Board of Trustees approves the transfer of final development and future administrative oversight of the DLOSCE from the American Dental Association to the Joint Commission on National Dental Examinations, and be it further

**Resolved,** that, as a condition of such transfer, current make-up of the DLOSCE Steering Committee shall be maintained through the development process, provided, however, that the Joint Commission may add two members to the Steering Committee to properly reflect the examination's new governing body, and be it further

**Resolved**, that, as a condition of such transfer, the Joint Commission is prohibited from licensing or sublicensing any aspect of examination development or administration to any outside agency, and be it further

**Resolved**, that, as a condition of such transfer, the Joint Commission utilize its Research and Development Fund to defray any exam development costs going forward, and be it further

**Resolved**, that, as a condition of such transfer, that the Joint Commission make regular reports to the Board of Trustees on the status of examination development, and be it further

**Resolved**, that the transfer and associated terms adopted herein be memorialized into the shared services agreement currently under development between parties.

## **Government and Public Affairs**

**Appointment of Members to the Task Force on Study Innovations for Alternate Student Loan Repayment Strategies:** The Board of Trustees adopted the following resolution (consent calendar item).

**B-120-2019. Resolved**, that the following appointments to the Task Force on Student Innovations for Alternate Student Loan Repayment Strategies, as made by the President, be approved:

Dr. Deborah Bishop, chair  
Dr. Lindsey Robinson  
Dr. Nader Nadershahi  
Dr. Emily Mattingly

## **Practice Institute**

**Bento: Due Diligence Report in Response to Resolution B-112-2019:** This confidential report was provided to the Board for consideration.

**B-125-2019.** (Confidential Action Temporarily Embargoed)

## **Science Institute**

**ADA Science and Research Institute LLC—LLC Name, Operating Agreement, Board of Directors, and Chief Executive Officer:** The Board of Trustees adopted the following resolutions.

**B-113-2019. Resolved**, that the name of the new limited liability company shall be “*ADA Science and Research Institute LLC.*”

**B-114-2019. Resolved**, that the Operating Agreement for ADA Science and Research Institute LLC in the form presented to the Board is hereby approved.

**B-115-2019. Resolved**, that each of the following persons be, and hereby is, elected to serve on the Board of Directors of ADA Science and Research Institute LLC, effective as of January 1, 2020, for the term set forth following his/her name:

- Dr. Raymond Cohlmiia (2020 - 2023)
- Dr. Teresa Dolan (2020 - 2021)

- Dr. John Featherstone (2020 - 2022)
- Dr. Karen Nelson (2020 - 2023)
- Dr. Craig Armstrong (2020 - 2023); and
- Dr. Billie Sue Kyger (2020)

**B-117-2019. Resolved**, that Dr. Marcelo Araujo hereby is elected to serve as the Chief Executive Officer of ADA Science and Research Institute LLC, effective as of January 1, 2020.

**Approval of Ad Interim Policy on E-Cigarettes and Vaping:** In accordance with ADA *Bylaws* (Chapter V, Section 70H) the Board of Trustees may establish interim policies essential to the management of the Association provided such policies be presented for review and consideration by the House of Delegates at its next session. Dr. Marcello Araujo, vice president, Science Institute; and Mr. Jim Lyznicki, senior manager, Council on Scientific Affairs; presented the following resolution for the Boards consideration. The Board adopted the following resolution.

**B-122-2019. Resolved**, that the ADA Board of Trustees adopts the following statement, which mirrors a recent action from the American Medical Association, as *ad Interim* ADA Policy to address the public health crisis related to e-cigarettes and vaping:

#### *AD INTERIM* ADA POLICY ON E-CIGARETTES AND VAPING

That the American Dental Association (1) urgently advocate for regulatory, legislative, and/or legal action at the federal and/or state levels to ban the sale and distribution of all e-cigarette and vaping products, with the exception of those approved by the FDA for tobacco cessation purposes and made available by prescription only; and (2) advocate for research funding to study the safety and effectiveness of e-cigarettes and vaping products for tobacco cessation purposes and their effects on the oral cavity.

**ADA Foundation:** The regular session of the Board of Trustees was adjourned for the purpose of convening the Member Meeting of the ADA Foundation. Following the Member Meeting of the ADA Foundation, the regular session of the Board of Trustees reconvened.

#### **Organizational/Other**

**Report of the 2020 Humanitarian Award Nominating Committee:** The following resolution was adopted by the Board of Trustees (consent calendar item).

**B-121-2019. Resolved**, the Dr. Loree Bolin, Washington, receive the 2020 Humanitarian Award.

#### **ADA Practice Transitions**

**ADA Practice Transitions Update:** On behalf of the ADA Business Innovation Group, Dr. Kirk Norbo presented the informational report submitted by Mr. Bill Robinson, President & CEO, ADA Business Innovation Group. At the February Board meeting, ADAPT management will present a revised business model and breakeven analysis based on the experience of the pilot.

**Report of the President:** Dr. Chad Gehani presented an informational report that summarized the activities of his first 90 days as president.

**Report of the President-elect:** Dr. Dan Klemmedson presented an oral report that summarized his activities since the September Board meeting.

**Report of the Executive Director:** Dr. Kathleen O'Loughlin presented an oral report to the Board of Trustees.

### **Liaison Reports**

**Report of Dr. Jay Harrington, Liaison to the Council on Communications:** This informational report summarized the August 16-17, 2019 Council on Communications meeting (consent calendar item).

**Report of Linda Himmelberger, Liaison to the Joint Commission on National Dental Examinations:** This informational report summarized the August 14-16, 2019 JCNDE meeting (consent calendar item).

**Report of Dr. Richard Huot, Former Liaison to the Council on Members Insurance and Retirement Programs:** This informational report summarized the August 23, 2019 CMIRP meeting (consent calendar item).

**Report of Dr. Richard Huot, Former Liaison to the Standards Committee on Dental Informatics:** This informational report summarized the September 2-4, 2019 Standards Committee on Dental Informatics meeting (consent calendar item).

**Report of Dr. Julio H. Rodriguez, Liaison to the Council on Communications:** This informational report summarized the November 20, 2019 Council on Communications meeting (consent calendar item).

**Report of Cesar R. Sabates, Liaison to the Council on Dental Benefit Programs:** This informational report summarized the November 7-8, 2019 CDBP meeting (consent calendar item).

### **New Business**

*Open Access Publishing.* Dr. O'Loughlin provided an update on recent developments regarding Open Access Publishing and reported that Michelle Hoffman, vice president, Publishing, would provide an update to the Board at its February 2020 meeting.

*Board Appointments to Councils.* Dr. Doroshov reminded Board members to consider diversity and new dentist members when selecting 2020 council appointments.

### **Attorney-Client Session**

An attorney-client session of the Board of Trustees was held on Sunday, December 15, 2019, in the Palmieri Room of the El San Juan Hotel, Carolina, Puerto Rico.

### **Adjournment**

Without objection, the second regular meeting of the Board of Trustees adjourned sine die on Sunday, December 15, 2019 at 12:05 p.m.

# Minutes of the House of Delegates

September 6–9

## Minutes of the 160th Annual Session of the American Dental Association House of Delegates

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September 6–9, 2019  
San Francisco, California

Friday, September 6, 2019

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### First Meeting of the House of Delegates

**Call to Order:** The First Meeting of the 160th 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, September 6, 2019, in the George R. Moscone Convention Center.

**Invocation:** An invocation was offered by Dr. Nipa Thakkar, Pennsylvania, and was followed by a moment of silence.

**Pledge of Allegiance:** Colonel Stephen Tanner, Deputy Dental Corp Chief, U.S. Army Dental Corps, 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.

**Presentation of Honorary Membership:** The Speaker recognized President Cole for the presentation of Honorary Membership to the following individuals:

Ms. Nancy R. Honeycutt  
Mr. Steven W. Kess  
Dr. Ashok Dhoble

**Report of the Standing Committee on Credentials, Rules and Order:** Dr. Minerva Patel, New York, Committee chair, presented the Committee's report. The other members of the Committee were: Dr. Xochitl D. Anderton, Texas; Dr. Brian D. Basinger, Louisiana; Dr. Douglas L. Kay, Illinois; Dr. Amber P. Lawson, Georgia; Dr. Shelley Barker Olson, North Carolina; Dr. Nancy R. Rosenthal, Pennsylvania; Dr. Richard A. Stevenson, Florida; and Dr. Karyn Ward, Rhode Island.

*Approval of Certified Delegates.* Dr. Patel reported that a list of certified delegates and alternate delegates as of August 30, 2019 was posted on ADA Connect. Subsequent to the August 30 posting, the following requests relating to the credentialing of new alternate delegates were presented:

#### *Alternate Delegates*

Dr. Stephanie M. Burrell, Public Health Service, replacing Dr. Nathan P. Mork  
Dr. Renee Arace, New Jersey, replacing Dr. Carmine J. LoMonaco

Dr. Patel reported that the Committee considered the requests to be the result of extenuating circumstances and recommended that the individuals be credentialed. On behalf of the Committee, Dr. Patel moved Resolution 29 (*Supplement:1035*) as amended. Hearing no objection, the Speaker declared Resolution 29, as amended, adopted.

**29H-2019. Resolved**, that the list of certified delegates and alternate delegates posted on the HOD Supplemental Information library on the House of Delegates community of ADA Connect be approved as the official roster of voting delegates and alternate delegates that constitute the 2019 House of Delegates of the American Dental Association.

Dr. Patel reported the presence of a quorum.

The following requests relating to the credentialing of a new acting secretary and new acting executive director were presented:

*Secretary*

Dr. Karyn Ward, Rhode Island

*Executive Director*

Ms. Phyllis Yancy, Arizona

Dr. Patel reported that the Committee considered the requests to be the result of extenuating circumstances and recommended the individuals be credentialed. Hearing no objection, the Speaker declared the credentials granted.

Dr. Patel 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 2018 Session of the House of Delegates.* On behalf of the Committee, Dr. Patel moved Resolution 30 (*Supplement:1036*). The Speaker asked if there were any corrections to the minutes; hearing none, the Speaker declared the minutes adopted.

**30H-2019. Resolved**, that the minutes of the 2018 session of the House of Delegates be approved.

*Adoption of Agenda and Order of Agenda Items.* On behalf of the Committee, Dr. Patel moved Resolution 31 (*Supplement:1037*). The Speaker asked if there was any discussion regarding the resolution; hearing none, the Speaker declared the agenda adopted.

**31H-2019. Resolved**, that the agenda as presented in the *2019 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. Patel moved Resolution 32 (*Supplement:1038*).

The Speaker announced the following withdrawn resolutions.

**Resolution 45**—Rescission of the Policy, Legislative Delegations—withdrawn by the Council on Government Affairs

**Resolution 48**—Rescission of the Policy, State Regulation of Advertising—withdrawn by the Council on Government Affairs

**Resolution 49**—Rescission of the Policy, Use of Dentist-to-Population Ratios—withdrawn by the Council on Government Affairs

**Resolution 50**—Rescission of the Policy, Use of Expert Witnesses in Liability Cases—withdrawn by the Council on Government Affairs

**Resolution 51**—Rescission of the Policy, Compensation of Dental Specialists in the Federal Dental Services—withdrawn by the Council on Government Affairs

**Resolution 52**—Rescission of the Policy, Legislation Prohibiting Waiver of Patient Copayment/Overbilling—withdrawn by the Council on Government Affairs

**Resolution 53**—Rescission of the Policy, Deployed Dentists and Mandatory Continuing Education Requirements—withdrawn by the Council on Government Affairs

**Resolution 54**—Rescission of the Policy, Exemption from Unemployment Insurance Liability for Active Duty Dentists—withdrawn by the Council on Government Affairs

**Resolution 55**—Rescission of the Policy, Support for Dentists Temporarily Called to Active Service—withdrawn by the Council on Government Affairs

**Resolution 56**—Rescission of the Policy, Dentists as Providers in all Public and Private Health Care Programs and Discrimination in Payment for Services Performed by a Licensed Dentist—withdrawn by the Council on Government Affairs

**Resolution 58**—Rescission of the Policy, Dental Focus in Federal Health Agencies—withdrawn by the Council on Government Affairs

**Resolution 60**—Rescission of the Policy, Suggested Dental Practice Acts—withdrawn by the Council on Government Affairs

**Resolution 62**—Rescission of the Policy, ADA Assistance in Legislative Initiatives—withdrawn by the Council on Government Affairs

**Resolution 86**—Exploration of Membership Structure Recognizing Evolving Dental Practice Models—withdrawn by the Wisconsin Dental Association

Dr. Steven A. Brown, Rhode Island, requested that Resolution 70-2018—Election of the President-Elect be withdrawn.

Hearing no objection, Resolution 70-2018 was withdrawn.

On vote, Resolution 32 was adopted.

**32H-2019. Resolved**, that the list of referrals recommended by the Speaker of the House of Delegates be approved.

Dr. Patel 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 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. Jeffrey M. Cole addressed the House of Delegates. He commented on the new strategic plan, stating, "This plan, Common Ground 2025, will ensure that the ADA remains relevant to members, remains relevant as the voice of the profession representing the vast majority of dentists, remains

relevant as the trusted source of information, remains relevant through financial sustainability and remains relevant as it benefits both our members and the public.” Dr. Cole noted the efforts made to engage dental student leaders and to better align the efforts of the ADA and the American Student Dental Association, stating, “Dental students are not only the future of our profession, they are the now of our profession.” Dr. Cole noted the passage of the Action for Dental Health Act, which provides funding for safety net programs including Give Kids a Smile and Missions of Mercy to help provide access to care. He also commented on ADA’s advocacy for solutions to the opioid crisis, efforts to bring about the repeal of the McCarran-Ferguson Act and the citizen petition filed by the ADA regarding orthodontic aligners dispensed without a prescription based on adequate patient examination. He stated, “As we move forward into the future, ADA must continue to take bold action on issues that impact our member dentists and our patients alike.” The Report of the President (*Supplement:2125*) was referred to Reference Committee A (Budget, Business, Membership and Administrative Matters) and was posted on ADA Connect. (A video recording of Dr. Cole’s address to the House will be available on ADA.org until October 2020.)

**Report of the Treasurer:** Dr. Ted Sherwin presented to the House of Delegates his report on the status of the Association’s finances.

**Report of the Executive Director:** Dr. Kathleen T. O’Loughlin presented her annual report to the House of Delegates.

**Presentation of Reports of the Board of Trustees:** On behalf of the Board of Trustees, Dr. Richard A. Huot, First Vice President, presented the reports of the Board of Trustees to the House of Delegates. The Board expressed its appreciation to the members of the Committee on Local Arrangements and its volunteers for their dedicated work.

*Nominations to Councils and Commissions.* Dr. Huot moved Resolution 16 (*Supplement:1025*) on behalf of the Board of Trustees. There being one nomination for each position, the Speaker declared the nominees elected.

**16H-2019. Resolved,** that the nominees put forward for membership on ADA councils and commissions 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. Huot 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. Huot noted that Reports 1 through 14 of the Board of Trustees to the House of Delegates were referred to the appropriate reference committees.

Dr. Huot 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**

**President-elect:** The Speaker called for nominations for the office of president-elect. Dr. Allison B. House, Arizona, nominated Dr. Daniel J. Klemmedson, Arizona, for the office of president-elect. The Speaker asked if there were any additional nominations; there were none. An acceptance speech was given by Dr. Klemmedson. There being no additional nominees for the office of president-elect, in accordance with ADA *Bylaws*, the Speaker declared Dr. Daniel J. Klemmedson duly elected to the office of president-elect.

**Second Vice President:** The Speaker called for nominations for the office of second vice president. Dr. Lori W. Roseman, Missouri, nominated Dr. Vincent U. Rapini, Missouri, for the office of second vice president. The

Speaker asked if there were any additional nominations; there were none. An acceptance speech was given by Dr. Rapini. There being no additional nominees for the office of second vice president, in accordance with ADA *Bylaws*, the Speaker declared Dr. Vincent U. Rapini duly elected to the office of second vice president.

**Speaker of the House of Delegates:** The Speaker called for nominations for the office of Speaker of the House of Delegates. Dr. Douglas Christiansen, California, nominated Dr. Alan L. Felsenfeld, California, for the office of Speaker of the House of Delegates; Dr. Craig S. Ratner, New York, nominated Dr. Steven Gounardes, New York, for the office of Speaker of the House of Delegates; Dr. Eugene G. Porcelli, New York, nominated Dr. Robert M. Peskin, New York, for the office of Speaker of the House of Delegates; Dr. Elizabeth C. Reynolds, Virginia, nominated Dr. David C. Anderson, Virginia, for the office of Speaker of the House of Delegates; Dr. Deborah S. Bishop, Alabama, nominated Dr. W. Mark Donald, Mississippi, for the office of Speaker of the House of Delegates; and Dr. Margaret S. Gingrich, Michigan, nominated Dr. Debra A. Peters, Michigan, for the office of Speaker of the House of Delegates. The Speaker asked if there were any additional nominations; there were none.

Acceptance speeches were given by each candidate for Speaker of the House of Delegates. The Speaker announced that the names of the candidates would be placed on the ballot for election on Monday, September 9.

**Presentation of Incoming Trustees:** The Speaker presented the following incoming trustees, elected by their respective Trustee Districts:

Dr. Richard J. Rosato, New Hampshire, First District Trustee  
Dr. Terry Fiddler, Arkansas, Twelfth District Trustee  
Dr. Brett Kessler, Colorado, Fourteenth District Trustee  
Dr. Craig S. Armstrong, Texas, Fifteenth District Trustee.

**New Business:** The Speaker announced that items of new business be submitted to the headquarters office for processing.

**Remarks by the Chair of the American Dental Political Action Committee (ADPAC):** Dr. Thomas C. Harrison, ADPAC chair, addressed the House of Delegates thanking members for their continued support of ADPAC.

**Report of the General Counsel:** Mr. Scott W. Fowkes, 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. Michael K. Keating, New York. With no other business before the House, the Speaker declared the First Meeting of the ADA House of Delegates adjourned at 3:26 p.m., Friday, September 6, 2019.

**Monday, September 9, 2019**

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**Second Meeting of the ADA House of Delegates**

**Call to Order:** The Second Meeting of the 160th Annual Session of the ADA House of Delegates was called to order at 7:30 a.m., Monday, September 9, 2019, by the Speaker of the House of Delegates, Dr. Glen D. Hall.

**Report of the Standing Committee on Credentials, Rules and Order:** Dr. Minerva Patel, Committee chair, announced that the Committee had received requests relating to the credentialing of new acting secretaries. The Committee considered these requests to be the result of extenuating circumstances and recommended that the following individuals be credentialed:

*Secretaries*

Dr. Brian J. Cotant, Wyoming

Dr. Douglas N. Robertson, West Virginia

Hearing no objection, the Speaker announced that the credentials were granted.

Dr. Patel announced the presence of a quorum and read 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 Speaker of the House of Delegates. The candidates on the ballot, listed in alphabetical order, were as follows: Dr. David C. Anderson, Virginia; Dr. W. Mark Donald, Mississippi; Dr. Alan L. Felsenfeld, California; Dr. Steven Gounardes, New York; Dr. Robert M. Peskin, New York; and Dr. Debra Peters, Michigan. Hearing no objection, the Speaker closed the vote. The Speaker called for the House to stand at ease while the voting results were tallied.

The Speaker announced there would be a run-off election for the office of Speaker of the House of Delegates between Dr. David C. Anderson, Dr. W. Mark Donald, Dr. Alan L. Felsenfeld, Dr. Steven Gounardes and Dr. Debra Peters. The Speaker opened the vote for the run-off election for Speaker of the House of Delegates. Hearing no objection, the Speaker closed the vote and the House stood at ease while voting results were tallied.

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The Speaker announced that Dr. W. Mark Donald, Mississippi, had been elected to the office of Speaker of the House of Delegates. Dr. W. Mark Donald, Dr. David C. Anderson, Dr. Alan L. Felsenfeld, Dr. Steven Gounardes, Dr. Robert M. Peskin and Dr. Debra Peters briefly addressed the House of Delegates.

**Announcements:** The Speaker announced that the following item of New Business was submitted and would be taken up at the appropriate time in accordance with the Agenda:

Ninth Trustee District Resolution 92—Election Commission Rules Amendment

**Recognition of New Delegates and Alternate Delegates:** The Speaker asked new or first time delegates and alternates to stand and be recognized.

**Priority Agenda Items:** Two priority agenda items were identified by the Reference Committees; the resolutions were considered in the following order:

- Amendment to the *ADA Governance Manual*: Section on Special Assessments and Related Matters—Council on Membership Resolution 15 and Eleventh Trustee District Resolution 15S-1 (Reference Committee A)
- Approval of 2020 Budget—Board of Trustees Resolution 33 (Reference Committee A)

The first priority agenda item was presented by Dr. Cody C. Graves, Texas, chair, Reference Committee A.

**Amendment of the ADA Governance Manual: Section on Special Assessments and Related Matters** (Council on Membership Resolution 15 and Eleventh Trustee District Resolution 15S-1): The Reference Committee reported as follows:

The Reference Committee heard considerable testimony both in favor of and against Resolution 15. The majority of the testimony was about changing life membership from a 75% discount to full dues. Pros and cons were equally divided. Testimony supporting the change came from dentists in all age groups and many active life members were comfortable with the increase in dues to support the financial future of the ADA. Testimony in support also referred to the Treasurer's presentation and data given in the report from the Council. Con testimony was heard from a considerable number of active life members who believed that the ADA should be better stewards of the budget and look to cut costs elsewhere instead of increasing active life members' dues. Testimony was also given proposing to "grandfather" the existing active life members.

The Reference Committee deliberated each section of the resolution considering the data and taking into consideration the sincere heartfelt testimony from members at the Reference Committee hearing. The Reference Committee recognizes that streamlining dues categories is a difficult process and supports the extensive work of the Council on Membership, which was tasked with the assignment of simplifying dues categories.

The Reference Committee recognizes the life-long contributions of active life members, both to the ADA and to the profession. The Reference Committee strongly encourages staff and the Council on Membership to mitigate the impact of this resolution on members.

The Standing Committee on Constitution and Bylaws approves the wording of Resolution 15 as submitted.

Adoption of this resolution will help sustain the Association and we ask all members to join in that effort.

**15. Resolved**, that the amendments to the *ADA Governance and Organizational Manual*, CHAPTER I. MEMBERSHIP MATTERS, Section B. Dues, Special Assessments and Related Financial Matters, on dues simplification as set forth in **Appendix 1** be adopted, to take effect at the adjournment *sine die* of the 2020 House of Delegates.

Dr. Graves moved Resolution 15 (*Supplement:2011*) in lieu of Resolution 15S-1 (*Supplement:2011a*) with the Committee Recommendation to Vote Yes.

Dr. William H. Gerlach, Texas, requested that Resolution 15 be divided by separating lines 19-23 of Appendix 1, page 2013 and lines 35-39 of Appendix 1, page 2012 from the main motion. Lines 19-23 on page 2013 read as follows:

2.c. Life Members:

i. ~~Seventy-five percent (75%) of any special assessment then in effect. The obligation of life members to pay any special assessment then in effect is the same as for active members, except that~~ ii. ~~Life~~ life members who also meet the eligibility requirements for retired membership shall be exempt from the payment of special assessments.

and lines 35-39 on page 2012 read as follows:

1.c. Life Members:

~~The obligation of life members to pay dues is the same as for active members, except that~~ i. ~~Seventy-five percent (75%) of active member dues as set by the House of Delegates pursuant to the ADA Bylaws.~~ ii. ~~Life~~ life members who also meet the eligibility requirements for retired membership shall be exempt from the payment of dues.

Dr. Gerlach stated, "It seems we have two distinct issues, that which affects the new dentists and that which effects the active life members. ... we have two cohorts in Resolution 15, and they differ in both age and years of experience. And this resolution will impact both of these cohorts very differently. The new dentist cohort may have a financial impact lasting decades, as some of these new dentists drop off and do not re-engage. The active life cohorts will have a significant, yet shorter chronological impact."

The Speaker stated, "It is the opinion of the Speaker that the resolution with multiple amendments is dividable. The delegate wishes to divide the portions in the appendix that have to do with life members, which are their dues and special assessments, as a separate item. ..."

The decision of the Chair was appealed.

Dr. Karin Irani, California, chair of the Council on Membership spoke against sustaining the decision of the Chair. She stated, "... I'm of the opinion that the resolution should not be divided. The Council on Membership has worked on this issue for the last two years, studied the data and believe that in order to achieve the financial stability required to sustain our organization, all parts of the resolution have to be considered together. The House will not be able to evaluate the full impact, implication and financial impact of each part if isolated."

On vote, the decision of the Chair was not sustained.

A delegate requested a revote and commented that delegates were not clear on what the request was on the vote to appeal the decision of the chair. The Speaker stated, "I am going to put it on the keypad. The decision of the Speaker has been appealed from. To sustain the decision of the Chair, that is, you believe that division is in order, you will vote "yes," 1 for "yes." If you feel that the division is not in order, to overturn the decision of the Speaker, vote "no."

On vote, the decision of the Chair was not sustained. The resolution was not divided.

The Speaker stated, "...so as to keep some order to this, we'll do this in seriatim. We'll take it as it comes in series. So does anyone wish to discuss any of the amendments on Section 1, Active Members?"

Dr. Thomas S. Kelly, Ohio, spoke against amending "Section 1, Active Members," stating, "I rise in opposition to this section of the proposed changes in the governance manual related to new members' dues discounts. If we do not vote 'no' on these proposed changes, we fail to achieve any of the membership goals and objectives in our Strategic Plan, Common Ground 2025. The extensive study done by the Council shows that changing the new member discounts will result in a loss of 600 members next year and over a thousand members over the next five years. ...we will lose the lifetime value in money on these members. ...this

Association, if you choose to pass this, will be losing \$21 million over the course of the lifetime of those members that we could have had. A lifetime value of a member is approximately \$36,000. That lifetime value of that member to this Association is both dues and non-dues income. That lifetime value certainly is greater if we have a person for the life of their membership. So losing those members just next year will cause us to lose that \$21 million. ... This Association is about members and engaging our members. And the number one goal...the number one portion of our member benefits is our advocacy. We lose our ability to be advocates for our profession if we lose that market share, and we will. The study shows that. ...”

Dr. Alexa M. Vitek-Hitchcock, Michigan, spoke in support of Resolution 15. She stated, “I am the chairperson of the ADA Council on Membership subcommittee that researched and created Resolution 15. ... For the last two years our subcommittee has researched the ADA Board’s directive to the Council on Membership to streamline and reduce the ADA dues rates codes. ... Through the elimination of discounts at the front end and the back end of the membership pipeline, Resolution 15, as it is currently written, fulfills the Board’s request. This elimination of the highly utilized discounts allows for increased overall financial health of the entire Association. ... Many of you here today are at or near active life membership of our ADA family. ... All of you in this room have helped create something amazing that my generation and future generations of dentists desire to be a member of. ... But if we don’t make changes right now, we will not have the association that you have worked so hard to build for myself and the next generation of dentists. Ultimately, Resolution 15 needs to be a business decision and not an emotional decision for this family and this House today. ...”

Dr. William H. Gerlach, Texas, spoke against Resolution 15. He said, “...This is completely counterintuitive to previous House discussions, counter to every strategic plan in memory, counter to our long-held promise of dues reduction at 65 and counter to our goal of increasing membership. In the Reference Committee, we heard from members of the New Dentist Committee who support Resolution 15...they realize what everyone else in this room realizes, the tremendous value we receive from the ADA and the entire tripartite. But we also know there are tens of thousands of new dentists around the country, the silent majority, who are still figuring out who we are, and they may not understand ADA’s value within those first two years. They may need a little bit more runway. This resolution will put some of those people out the door. The same goes for our active life members who will support this out of the greater good, those who the FROG report coined collectivists. But for others, the optics of this resolution sends a message of disrespect and, worse, of disregard. ... If you came in here with your mind made up to approve Resolution 15, I ask that you hit the “pause” button and ask yourself, is this really the best way to close our dues gap in 2021 by \$1.9 million by booting out some people that we know and love? ...”

Dr. Chris J. Hansen, Wisconsin, spoke in support of Resolution 15, stating, “I am a 36-year member of the ADA and in line for active life membership very soon. I benefitted directly from the membership insurance and discounts from our Association and really appreciate that, and, more importantly, advocacy efforts on behalf of the ADA for dentistry in my practice in particular. My individual financial concerns about the raise in dues are far outweighed by the long-term financial stability of the ADA. And rest assured, from what I have seen that the Committee has done a lot of the work on dues structure has done a lot of work on the ramifications of it, of the dues changes, and they have looked at things and really tried to create a fair and equitable way of trying to address this problem. I’d say trust the work of the Committee, trust that they have done their due diligence and trust that they have done their jobs.”

A motion was made to vote immediately on Resolution 15. The Speaker ruled that the motion to vote immediately was premature, and said, “I want to have every delegate have the opportunity to speak to any portion of these amendments. ... when you consider something in seriatim, you give someone an opportunity to consider everything paragraph by paragraph. ... While we are considering by paragraph, it’s not in order...to close debate.”

Dr. Prabu Raman, Missouri, moved to amend Resolution 15 by inserting an asterisk after the words “c. Life Members” on Appendix 1, page 2012, line 35 and page 2013, line 19, with the asterisk reading as follows:

\*The dues and special assessment percentage for those members who attained Active Life membership classification prior to the adjournment sine die of the 2019 House of Delegates, shall remain at the same

percentage as they had upon entry into this category and until such time that they move to another membership category.

In speaking to the proposed amendment, Dr. Raman stated, "I know that it was brought up about how we need this to balance the budget. I totally get it. And it was also brought up, this is purely business decision, but we cannot take away the emotion part of it, not the people that are here. ... who are these active life members. Those of us that have worked for at least 30 years...as continuous members and attained 65 years [of age], and we're not talking about this group that is here, but, rather, the people that are back home that are not that active, but they have felt like, 'okay, you have shown me some appreciation for being a loyal member, and you have given me a status as active life.' Now they'll feel like you're taking it away. That emotion is real. These are the elder statesmen, so to speak, that are going to be mentoring young dentists. Do you want them to be leaving membership just because of this? As someone was bringing up earlier, the implication of this needs to be looked at, and you cannot take away the emotion part of it. Emotion is very much real. So we can't just purely make a business decision here and hope no one will have emotion out there."

As a point of order, Dr. Robert S. Roda, Arizona, said, "We had what appeared to be a duly called motion to call the question, and I have been in this House a long time. I've never heard of saying that that's out of order when the House may want to vote to call the question on the...resolution in its entirety. And I'm not aware of this procedure."

In response, the Speaker stated, "So when the Speaker says that a motion will be considered in seriatim, we take it section by section. And when that is under consideration, a motion to vote immediately is not in order. The only time it would be in order is when we are considering the motion all together again. Should a delegate wish to consider everything together again and not in series, they may make that motion. A majority vote, we'll do away with the in seriatim consideration and begin to discuss it again as a whole, and then motion to vote immediately would be in order. Otherwise, we go through section by section, and at the conclusion, we consider it in total again and then we dispose."

Dr. Roda responded, "Mr. Speaker, with all due respect, a point of information, why are we considering in seriatim...I have never heard of this before."

The Speaker responded, "Because there are multiple amendments being offered in one motion. That's the reason. And so each amendment can be considered individually."

As a point of information, Dr. I. Jay Freedman, Pennsylvania, asked for clarification on the amendment, specifically the words "until such time that they move into another membership category." Dr. Freedman asked, "Could I be explained what that membership category is that I'm not aware of?"

The Speaker responded, "There are membership categories, active member, life member, student member, et cetera. Those are the different membership categories listed in the Bylaws. In some cases, in the case of active dentist, they have a discount rate that eventually expires. When you move into a life membership, you get a life membership discount, et cetera."

As a point of information, Dr. Bryan C. Blew, Illinois, asked for a financial implication of the proposed amendment.

At the request of the Speaker, Mr. Robert Quashie, vice president, Business Operations and Strategy, responded that the amendment would result in no financial implication for the 2020 budget, and the financial implication for the 2021 budget would be \$346,000 in the positive. In future years the financial implication would diminish over time and converge with the trend.

Dr. Bruce D. Grbach, Ohio, spoke in support of the amendment stating, "I know in Ohio I was membership chair the last time that we raised dues on active life members from 50 to 75 percent. We lost a lot of good people who we never saw again."

As a point of order, Dr. Lindsey A. Robinson, California, asked, "Will this amendment mean that members who received life status before we last changed this, will they go back to zero dues? ... Do they reset back to zero? ... as it is written, it remains unclear to my district. And, in fact, some of the districts, we changed our dues for life active as well a year ago. So as this is written...this is presenting great confusion for us."

In response, the Speaker stated, "This [amendment] changes the percentage discount based on a category at the time this goes into effect, grandfathering in those who are already in a category, and their dues would remain the same for them until they leave it."

Dr. Robinson responded, "But it's based upon entry at the time. So are we reading this the wrong way? Upon entry into the category."

Dr. Karin Irani, California, chair of the Council on Membership, added, "...So the confusing part for me, especially, is it says 'when they enter this category.' It could have been ten years ago. It could have been 15 years ago... So the percentages were not always the same. So if the percentage was zero when they entered, they go back to zero dues."

To address the point of order made by Dr. Robinson, a delegate from the floor proposed a secondary amendment to replace the words "had upon entry into this category" with the words "were for the 2019 dues year" so that the proposed amendment would read as follows:

\*The dues and special assessment percentage for those members who attained Active Life membership classification prior to the adjournment sine die of the 2019 House of Delegates, shall remain at the same percentage as they were for the 2019 dues year ~~had upon entry into this category~~ and until such time that they move to another membership category.

Without objection, the proposed secondary amendment was accepted.

As a point of information, Dr. I. Jay Freedman, Pennsylvania, requested a five-year financial implication of the proposed amendment.

At the request of the Speaker, Mr. Quashie responded that the cumulative five-year financial implication of the proposed amendment is a negative \$82,000 impact over five years.

As a point of information, Dr. Fredrick P. Babinowich, New Jersey, requested the current number of active life members and the number of members who would become active life members in the next five years.

Mr. Quashie responded that the ADA currently has approximately 15,000 active life members, and that approximately 3,000 active life members move into the active life category each year.

A motion was made to vote immediately on the proposed amendment. The motion to vote immediately was adopted by a two-thirds affirmative vote.

On vote, the proposed amendment was not adopted.

A motion was made to vote immediately on Resolution 15. The motion to vote immediately was adopted by a two-thirds affirmative vote.

On vote, Resolution 15 was adopted in lieu of Resolution 15S-1.

**15H-2019. Resolved**, that the amendments to the *ADA Governance and Organizational Manual*, CHAPTER I. MEMBERSHIP MATTERS, Section B. Dues, Special Assessments and Related Financial Matters, on dues simplification as set forth in **Appendix 1** be adopted, to take effect at the adjournment *sine die* of the 2020 House of Delegates.

[See page 319 for Appendix 1]

The second priority agenda item was presented by Dr. Cody C. Graves, Texas, chair, Reference Committee A.

**Approval of 2020 Budget** (Board of Trustees Resolution 33): The Reference Committee reported as follows:

The Reference Committee heard no testimony regarding the 2020 budget. The Reference Committee wants to point out that this is the first year the budget has been presented with an assumed dues increase included to create a balanced budget. The Reference Committee notes that including a dues increase in Board Report 2 does not create a balanced budget—the result is a deficit budget balanced by a dues increase.

The Reference Committee concurs with the Board of Trustees and supports adoption of Resolution 33.

**33. Resolved**, that the 2020 Annual Budget of revenues and expenses, including net capital requirements, be approved.

Dr. Graves moved Resolution 33 (*Supplement:2095*) with the Committee Recommendation to Vote Yes.

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 317 for the adoption of the final budget (Resolution 33).

### **Report of Reference Committee A (Budget, Business, Membership and Administrative Matters)**

The Report of Reference Committee A was presented by Dr. Cody C. Graves, Texas, chair. The other members of the Committee were: Dr. Alejandro M. Aguirre, Minnesota; Dr. Karen D. Foster, Colorado; Dr. Cissy K. Furusho, Illinois; Dr. Philip B. Howells, Massachusetts; \*Dr. Marshall H. Mann, Georgia; Dr. Michael S. Shreck, New York; Dr. Jon D. Siebrasse, Kansas; and Dr. Cynthia Southern, Virginia.

\*Note: Dr. Marshall H. Mann, Georgia, withheld support of the Committee's recommendation in regards to the active life member section of Resolution 15.

**Consent Calendar** (Reference Committee A Resolution 88): The Reference Committee reported as follows:

The appended Resolution 88 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 88, 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.

**88. Resolved**, that the recommendations of Reference Committee A on the following resolutions be accepted by the House of Delegates.

**Resolution 14**—(Adopt)—Amendment of ADA Policy: Long-Term Financial Strategy of Dues Stabilization (*Supplement:2010*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 74**—(Adopt)—Rescission of ADA Policy, The Dentist’s Prayer (*Supplement:2100*)  
\$: None

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 75RC**—(Adopt in lieu of Resolution 75)—Amendment of ADA Policy, Recognition of Religious Diversity (*Supplement:2102*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes.**

**Resolution 85RC**—(Adopt in lieu of Resolution 85)—American Dental Association’s Definition of Diversity (*Supplement:2103*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes.**

Dr. Graves moved Resolution 88 with the Committee Recommendation to Vote Yes.

Requests were made to remove the following resolutions from the Consent Calendar:

- Resolution 75RC removed by Dr. Lindsay Smith, Oklahoma
- Resolution 74 removed by Dr. Jay R. Wells, III, Pennsylvania

Hearing no objection, the amended Resolution 88 was adopted by general consent.

**88H-2019. Resolved**, that the recommendations of Reference Committee A on the following resolutions be accepted by the House of Delegates.

**Resolution 14**—(Adopt)—Amendment of ADA Policy: Long-Term Financial Strategy of Dues Stabilization (*Supplement:2010*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes.**

~~**Resolution 74**—(Adopt)—Rescission of ADA Policy, The Dentist’s Prayer (*Supplement:2100*)  
\$: None~~

~~**COMMITTEE RECOMMENDATION: Vote Yes.**~~

~~**Resolution 75RC**—(Adopt in lieu of Resolution 75)—Amendment of ADA Policy, Recognition of Religious Diversity (*Supplement:2102*) \$: None~~

~~**COMMITTEE RECOMMENDATION: Vote Yes.**~~

~~**Resolution 85RC**—(Adopt in lieu of Resolution 85)—American Dental Association’s Definition of Diversity (*Supplement:2103*) \$: None~~

~~**COMMITTEE RECOMMENDATION: Vote Yes.**~~

*Note: For the purpose of a fully documented record, the text of the resolutions presented in Resolution 88H follows.*

**Consent Calendar Resolutions—Adopted/Adopted in Lieu of**

*Amendment of ADA Policy: Long-Term Financial Strategy of Dues Stabilization*

**14H-2019. Resolved**, that the ADA policy, Long-Term Financial Strategy of Dues Stabilization (*Trans.2008:421; 2012:410*), be amended as follows (new language underscoring, deletions ~~stricken~~):

**Resolved**, that the Board develop annual budgets and manage the Association’s finances and reserves in accordance with the goal of long-term financial stability for the Association, ~~taking into account the need to limit dues increases, as practical, the effective dues rate for members, external market conditions and other relevant factors such as the Chicago Consumer Price Index (CPI) average for the prior three years.~~ Inflation affects the ADA’s costs to deliver existing programs. To minimize volatility in membership dues and keep pace with normal inflation, consider each year a minimum dues adjustment equal to multiplying (a) the dues of an active member for the prior year by (b) the prior five years average U.S. Consumer Price Index percent change, rounded up to the

nearest dollar amount (“Dues Adjustment”). The Dues Adjustment should be considered in addition to any other annual dues increase that year.

*American Dental Association’s Definition of Diversity*

**Definition of ADA Diversity**

**85H-2019. Resolved**, that the ADA defines diversity through many dimensions, including, but not limited to race, ethnicity, national origin, gender identity, age, physical abilities/qualities, sexual orientation, religious and ideological beliefs, professional practice choices and personal lifestyle preferences, and be it further

**Resolved**, that the ADA Policy, Definition of ADA Diversity (*Trans.2001:421; 2011:550*), be rescinded.

**Non-Consent Resolutions**

**Amendment of ADA Policy, Recognition of Religious Diversity:** (Board of Trustees Resolution 75 and Reference Committee A Resolution 75RC): The Reference Committee reported as follows:

The Reference Committee heard limited testimony regarding Resolution 75. The Reference Committee concurs with the Board of Trustees and supports adoption of Resolution 75 with a minor change to eliminate the clause “in lieu of a prayer.”

Deletion ~~double-stricken~~.

**Recognition of Religious Diversity**

**75RC. Resolved**, that in recognition of ~~the religious~~ diversity and to be inclusive of ~~the~~ our membership, ~~all~~ meetings of this Association ~~that may begin with a prayer or invocation also include a moment of reflection, in lieu of a prayer.~~

Dr. Graves moved Resolution 75RC in lieu of Resolution 75 (*Supplement:2102*) with the Committee Recommendation to Vote Yes.

Dr. Lindsay Smith, Oklahoma, moved to amend Resolution 75RC by deleting the word “may” and inserting the word “shall,” inserting the word “personal” before the word “moment” and inserting the words “or silent prayer” after the word “reflection” so that Resolution 75RC would read as follows:

**Resolved**, that in recognition of ~~the religious~~ diversity and to be inclusive of ~~the~~ our membership, ~~all~~ meetings of this Association ~~that may shall~~ begin with a personal ~~prayer or invocation also include a moment of reflection~~ or silent prayer, ~~in lieu of a prayer.~~

In speaking to the proposed amendment, Dr. Smith stated, “...While I appreciate the Board’s work and emphasis on developing a policy of religious diversity, I fear we have inadvertently excluded a large part of our membership in the process. Wicken, Hinduism, Buddhism, Islam, Judaism, Christianity are all religions which practice the act of prayer. In fact, I found up to 11 percent that identify themselves as atheists or agnostics actually pray in some way or form at times. ... Inclusivity is about an individual’s choice to practice their religious beliefs or their lack of belief in any way they so choose without fear of being looked down upon or excluded. Many times in today’s society, in a noble and necessary effort to be inclusive, we inadvertently make a change that ends up being exclusive. And that is just what 75RC, as written, feels and looks like.”

Dr. David A. Schwartz, Pennsylvania, proposed a secondary amendment to replace the word “shall” with the word “may” so that the amendment would read as follows:

**Resolved**, that in recognition of ~~the religious~~ diversity and to be inclusive of ~~the~~ our membership, ~~all~~ meetings of this Association ~~that may shall~~ begin with a personal ~~prayer or invocation also include a moment of reflection~~ or silent prayer, ~~in lieu of a prayer.~~

In speaking to the proposed secondary amendment, Dr. Schwartz stated, "I personally feel any time you're going to put 'shall' in something, now you're making a choice for people who may not want that choice. I respectfully say let's put the word 'may' back in there and get rid of the word 'shall.'"

Dr. Smith, spoke against the secondary amendment, stating, "But couldn't 'may' also mean may not?"

The Speaker responded, "It's a choice. 'May' is a choice. 'Shall' is a directive."

Dr. Smith, responded by saying, "But you may not do it. The chair of that meeting may not allow you to do it."

On vote, the secondary amendment to replace the word "shall" with the word "may" was adopted.

Dr. Judith M. Fisch, First District Trustee and chair of the Diversity and Inclusion Committee, spoke against the primary amendment. She said, "...Our Strategic Plan specifically separated the words 'diversity' and 'inclusion' so that 'inclusion' receives just as much attention as 'diversity.' The word 'prayer' has a religious connotation, and we were taking that word out of the policy in order to be inclusive of those that may not have a religious belief."

Dr. Susan Becker Doroshov, Eighth District Trustee, spoke against the amendment, stating, "...we are a secular organization. I do not believe reference to prayer belongs in any of our policies, and I applaud what the Reference Committee has done..."

Dr. Smith spoke in support of the amendment stating, "I would argue, while I appreciate the intent of the resolution, you are excluding anyone that wants to have a religious prayer or a religious moment before the meetings of this Association."

On vote, the proposed primary amendment was adopted.

Dr. Richard J. Dragon, Nevada, moved to further amend Resolution 75RC by adding the words "in beliefs" after the word "diversity," adding the words "prayer and invocation including a moment of silent reflection" after the words "may begin with a," and deleting the words "moment of reflection or silent prayer" so that the amendment would read as follows:

**Resolved**, that in recognition of ~~the religious~~ diversity in beliefs and to be inclusive of ~~the~~ our membership, ~~all~~ meetings of this Association ~~that~~ may begin with a personal prayer and an invocation including a moment of silent reflection. ~~prayer or invocation also include a moment of reflection or silent prayer in lieu of a prayer.~~

In speaking to the proposed amendment, Dr. Dragon stated, "...I respect those who look at this in a secular fashion. I also respect those who feel that the calling to a higher authority is essential to their purpose. So all things must be considered, and to many of us, all things matter."

Dr. Brooke Fukuoka, Idaho, spoke against the amendment, stating, "I would like to speak against this amendment. It's no more relevant for me to stand here and tell you guys about my turtle. My turtles are so important to me and I love my turtles. But my turtles are not relevant to dentistry. A prayer is not relevant to dentistry, and our purpose here is to discuss dentistry. Some of us are religious and some of us are not religious, and I don't think that that should matter."

Dr. Ian Paisley, Colorado, spoke in support of the amendment, stating, "...I would say that to many of our members a prayer is very important to our ability to do policy and practice dentistry. ..."

Dr. Paul R. Christian, Delaware, spoke against the amendment, stating, "...I feel that the previous thing we just voted on is inclusive enough to include an audible, vocal prayer or other form of reflection."

Dr. Theodore M. Baer, Washington, spoke against the amendment. He said, "I'm against the inclusion of the word 'invocation' which often has, no matter what, religious overtones."

On vote, the proposed amendment was not adopted.

On vote, Resolution 75RC, as amended, was adopted in lieu of Resolution 75.

**75H-2019. Resolved**, that in recognition of ~~the religious diversity and to be inclusive of the our~~ membership, ~~all meetings of this Association that may begin with a prayer or invocation also include~~ a personal moment of reflection or silent prayer, in lieu of a prayer.

**Rescission of ADA Policy, The Dentist's Prayer:** (Board of Trustees Resolution 74): The Reference Committee reported as follows:

The Reference Committee heard limited testimony both in favor of and in opposition to Resolution 74. Although the Reference Committee is mindful and respectful of the sensitivity of the issue, the Reference Committee concurs with the Board of Trustees and supports adoption of Resolution 74.

**74. Resolved**, that the ADA Policy titled The Dentist's Prayer (*Trans.*1991:643) be rescinded.

Dr. Graves moved Resolution 74 (*Supplement:*2100) with the Committee Recommendation to Vote Yes.

A delegate from the floor spoke in support of Resolution 74. He stated, "...My grandfather was a Methodist minister. I go to church and Sunday school most every Sunday, however, I'm aware of an inordinate amount of time that has been spent trying to perfect this prayer into something that could be all inclusive. That is an impossible task. The purpose of our organization is to encourage the improvement of the health of the public and promote the art and science of dentistry. That comes from our constitution. We are professional, not a religious organization. ..."

Dr. Jay R. Wells, III, Pennsylvania, spoke against Resolution 74, stating, "It's disappointing that those in our organization who are opposed to the prayer did not instead suggest that a group get together representing all faiths, all beliefs and coming up with a prayer that can be truly all inclusive. Alfred Lord Tennyson years ago said that more things are wrought through prayer than this world knows of. There are many people in this room, in our organization, and in this word who have strong beliefs in belief. And, likewise, there are many who have strong beliefs in no belief. But it seems nowadays the only people who are supported are those who believe in non-beliefs. I think that to be truly inclusive, we should keep this prayer."

Dr. Linda K. Himmelberger, Third District Trustee, spoke in support of Resolution 74. She stated, "We're not eliminating prayer. We're eliminating a policy. In the resolution that we've just passed, Resolution 75RC, we've clearly made it clear what our stance is on prayer. Anybody can bow their head at any point and ask for guidance if that's their wish." She added, "...When we talk about how everybody can, it's 80 percent, 85 percent of people believe in prayer. That still leaves out 15 percent. ... We are not getting rid of prayer. We are getting rid of a policy that has no place in this organization in this day and age when we want to be inclusive."

Dr. Cary J. Limberakis, Pennsylvania, spoke against Resolution 74, stating, "On April 26th of this year, in the Washington Examiner, an article was printed: 'D.C. Circuit Rightly Rules Prayer in Congress is Constitutional.' And we all know that this is a non-profit organization, and we also know that Congress is a non-profit organization. But during the Reference Committee hearings, I heard a new dentist say that this could be exclusive of new dentists. ... I'm an active life member, and I wonder if eliminating this would drive away active life members more than driving away new members? I don't know the answer to that, but I give you that thought to think about."

Dr. Larry F. Browder, Alabama, spoke in support of Resolution 74. He stated, "Every five years CEBJA gets to review all the policies of the ADA, and every five years 'The Dentist's Prayer' comes up. We spent an entire half-a-day trying to reword 'The Dentist's Prayer.' And then we referred it to the Board. They spent another half-a-day trying to reword 'The Dentist's Prayer.' I...want to reiterate that the prayer will still exist. ... It [Resolution 74] will simply remove the prayer as ADA policy."

A motion was made to vote immediately on Resolution 74. The motion to vote immediately was adopted by a two-thirds affirmative vote.

A motion was made to vote on Resolution 74 by method of keypad voting. On vote, the motion to vote by keypad was adopted.

At the request of Dr. Debrah J. Worsham, Texas, "The Dentist's Prayer" was displayed on the AV screens.

On vote, Resolution 74 was adopted.

**74H-2019. Resolved**, that the ADA Policy titled The Dentist's Prayer (*Trans.*1991:643) be rescinded.

### **Report of Reference Committee B (Dental Benefits, Practice and Related Matters)**

The Report of Reference Committee B was presented by Dr. Jill Shelton Wagers, Idaho, chair. The other members of the Committee were: Dr. Anisha Pandya, American Student Dental Association; Dr. Virendra R. Patel, California; Dr. Rhett E. Raum, Tennessee; Dr. David Schimmel, Pennsylvania; Dr. Scott L. Theurer, Utah; Dr. Linda G. Trotter, Florida; Dr. Najia Usman, Ohio; and Dr. Erika L. Williams, Delaware.

**Consent Calendar** (Reference Committee B Resolution 91) The Reference Committee reported as follows:

The appended Resolution 91 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 91, 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.

**91. Resolved**, that the recommendations of Reference Committee B on the following resolutions be accepted by the House of Delegates.

**Resolution 5RC**—(Adopt Resolution 5RC in lieu of Resolution 5)—Amendment to the ADA Statement Regarding Employment of a Dentist (*Supplement:3000*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 7RC**—(Adopt Resolution 7RC in lieu of Resolution 7 and Resolution 7S-1)—Amendment of Policy, Regulating Non-Dentist Owners of Dental Practices (*Supplement:3003*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 8S-1**—(Adopt Resolution 8S-1 in lieu of Resolution 8)—Amendment to the ADA Statement on Dentists' Choice of Practice Settings (*Supplement:3004a*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 9RC**—(Adopt Resolution 9RC in lieu of Resolution 9)—Statement on Programs Limiting Dental Benefit to Network Providers (*Supplement:3005*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 10**—(Refer)—Proposed New Policy, Patients’ Rights to Receive A Benefit for Dental Procedures From Their Medical Plan (*Supplement:3009*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes on the Referral**

**Resolution 11RC**—(Adopt Resolution 11RC in lieu of Resolution 11)—Revision of Policy, Medical Loss Ratio (*Supplement:3010*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 12**—(Adopt Resolution 12 in lieu of Resolution 12S-1)—Proposed ADA Policy Statement on the Use of Silver Diamine Fluoride (*Supplement:3012*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 13RC**—(Adopt Resolution 13RC in lieu of Resolution 13 and Resolution 13S-1)—Revision of Policy, Alteration of Dental Treatment Plans by Third-Party Claims Analysis (*Supplement:3014*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 26**—(Not Adopt)—Defining the Practice of Dentistry (*Supplement:3016*) \$: None  
**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 27RC**—(Adopt Resolution 27RC in lieu of Resolution 27)—Resources for Member Dentists (*Supplement:3018*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 28RC**—(Adopt Resolution 28RC in lieu of Resolution 28)—Pediatric Screening for Sleep Related Breathing Disorders (*Supplement:3019*) \$: 33,660  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 35**—(Adopt)—Amendment of Policy, Infection Control in the Practice of Dentistry (*Supplement:3021*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 72RC**—(Adopt Resolution 72RC in lieu of Resolution 72)—Reauthorization of Elder Care Workgroup (*Supplement:3023*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 76**—(Adopt)—Amendment of Policy Statement on the Role of Dentistry in the Treatment of Sleep Related Breathing Disorders (*Supplement:3024*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 87**—(Adopt)—Tracking Data on Donated Services (*Supplement:3030*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

Dr. Wagers moved Resolution 91 with the Committee Recommendation to Vote Yes.

Requests were made to remove the following resolutions from the Consent Calendar:

Resolution 76 removed by Dr. Prabu Krishnan, New York  
 Resolution 12 removed by Dr. Bryon E. Roshong, New Jersey  
 Resolution 9RC removed by Dr. David A. Schwartz, Pennsylvania  
 Resolution 7RC removed by Dr. Richard J. Nagy, California  
 Resolution 28RC removed by Dr. Richard J. Nagy, California  
 Resolution 72RC removed by Dr. Richard J. Nagy, California  
 Resolution 35 removed by Dr. Mark M. Johnston, Michigan  
 Resolution 11RC removed by Dr. David L. Hamel, Kansas

Hearing no objection, the amended Resolution 91 was adopted by general consent.

**91H-2019. Resolved**, that the recommendations of Reference Committee B on the following resolutions be accepted by the House of Delegates.

**Resolution 5RC**—(Adopt Resolution 5RC in lieu of Resolution 5)—Amendment to the ADA Statement Regarding Employment of a Dentist (*Supplement:3000*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 7RC**—(Adopt Resolution 7RC in lieu of Resolution 7 and Resolution 7S-1)—Amendment of Policy, Regulating Non-Dentist Owners of Dental Practices (*Supplement:3003*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 8S-1**—(Adopt Resolution 8S-1 in lieu of Resolution 8)—Amendment to the ADA Statement on Dentists' Choice of Practice Settings (*Supplement:3004a*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 9RC**—(Adopt Resolution 9RC in lieu of Resolution 9)—Statement on Programs Limiting Dental Benefit to Network Providers (*Supplement:3005*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 10**—(Refer)—Proposed New Policy, Patients' Rights to Receive A Benefit for Dental Procedures From Their Medical Plan (*Supplement:3009*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes on the Referral**

**Resolution 11RC**—(Adopt Resolution 11RC in lieu of Resolution 11)—Revision of Policy, Medical Loss Ratio (*Supplement:3010*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 12**—(Adopt Resolution 12 in lieu of Resolution 12S-1)—Proposed ADA Policy Statement on the Use of Silver Diamine Fluoride (*Supplement:3012*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 13RC**—(Adopt Resolution 13RC in lieu of Resolution 13 and Resolution 13S-1)—Revision of Policy, Alteration of Dental Treatment Plans by Third-Party Claims Analysis (*Supplement:3014*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 26**—(Not Adopt)—Defining the Practice of Dentistry (*Supplement:3016*) \$: None

**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 27RC**—(Adopt Resolution 27RC in lieu of Resolution 27)—Resources for Member Dentists (*Supplement:3018*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 28RC**—(Adopt Resolution 28RC in lieu of Resolution 28)—Pediatric Screening for Sleep Related Breathing Disorders (*Supplement:3019*) \$: 33,660

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 35**—(Adopt)—Amendment of Policy, Infection Control in the Practice of Dentistry (*Supplement:3021*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 72RC**—(Adopt Resolution 72RC in lieu of Resolution 72)—Reauthorization of Elder Care Workgroup (*Supplement:3023*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

~~**Resolution 76**—(Adopt)—Amendment of Policy Statement on the Role of Dentistry in the Treatment of Sleep Related Breathing Disorders (*Supplement:3024*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**~~

**Resolution 87**—(Adopt)—Tracking Data on Donated Services (*Supplement:3030*)  
\$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

*Note: For the purpose of a fully documented record, the text of the resolutions presented in Resolution 91H follows.*

### **Consent Calendar Resolutions—Adopted/Adopted in Lieu of**

*Amendment to the ADA Statement Regarding Employment of a Dentist*

**5H-2019. Resolved**, that the current ADA Statement Regarding Employment of a Dentist (*Trans.2013:353*) be amended as follows (additions are underscored).

#### **Statement Regarding Employment of a Dentist\***

These guidelines provide guidance for practice owners or management companies (collectively “employers”) in their working relationships with dentists associated with their practices, either as employees or independent contractors, except for postdoctoral education programs where a resident dentist is an employee of the educational program (collectively “employees”). The purpose of these guidelines is to protect the public in the provision of safe, high-quality and cost-effective patient care. Employers and employees should recognize and honor each of the guidelines set forth in this policy statement.

I. As described in the *ADA Principles of Ethics and Code of Professional Conduct*, dentists’ paramount responsibility is to their patients. An employee dentist should not be disciplined or retaliated against for exercising independent professional judgment in patient assessment, diagnosis, treatment and comprehensive management, including with respect to but not limited to:

- a. The use of any materials, or the delivery of a prosthetic device, that represents an acceptable standard of care or the refusal to use materials or deliver a prosthetic device that does not represent an acceptable standard of care;
- b. The use of techniques that are reasonably believed to be within the standard of care and are in the patient’s best interest or the refusal to use techniques that are not within the standard of care and are not in the patient’s best interests (recognizing the patient’s right to select among treatment options);
- c. The mandated provision of treatment that the employee dentist feels unqualified to deliver; and
- d. The provision of treatment that is not justified by the employee dentist’s personal diagnosis for the specific patient.

II. Because all employers and employee dentists must conform to applicable federal, state, and local laws, rules and regulations, an employed dentist should not be disciplined or retaliated against for 1) adherence to legal standards and 2) reporting to appropriate legal authorities suspected illegal behavior by employers. Employers should make certain that, for example:

- a. Appropriate business practices, including but not limited to billing practices, are followed;

- b. Facilities and equipment are maintained to accepted standards;
- c. Employment contractual obligations are adhered to.
- d. Employment practices must prohibit discrimination including hiring and compensation practices on the basis of, but not limited to, race, creed, color, gender, national origin, gender identity, sexual orientation, age or disability.

III. Because a dentist is functioning within a professional domain, anyone employing a dentist should, for example:

- a. Guard against lay interference in the exercise of a dentist's independent professional judgment in patient assessment, diagnosis, treatment and comprehensive management;
- b. To the extent permitted by law, promptly provide the dentist access to all relevant patient records in the event of peer review, board complaint or lawsuit, both during and subsequent to the dentist's employment; and
- c. Recognize and honor the dentist's commitment, as an ADA member, to comply with the *ADA Principles of Ethics and Code of Professional Conduct*.

\* Dentists are advised that employment contracts may have provisions that conflict with these guidelines and the ADA recommends that dentists seek legal counsel when considering how contracts affect their professional rights and responsibilities.

and be it further

**Resolved**, that the Association publish and promote this statement to all dentist and non-dentist employers and employees, and be it further

**Resolved**, that the Association encourage constituent societies to utilize this statement to facilitate legislative and regulatory measures to ensure the fair and ethical treatment of dentist employees and the patients that they treat.

#### *Amendment to the ADA Statement on Dentists' Choice of Practice Settings*

**8H-2019. Resolved**, that the statement on *Dentist's Choice of Practice Settings* (*Trans.*1994:637) be amended as follows (additions are double underscored).

#### **Dentists' Choice of Practice Settings Models**

**Resolved**, that the ADA supports ~~or initiate legislation to maintain~~ the ability of dentists to freely choose a practice ~~setting~~ model best suited to their ~~style~~ professional preference and training so they can assist patients in achieving the highest quality dental health without interference of their clinical independence.

#### *Revision of Policy, Alteration of Dental Treatment Plans by Third-Party Claims Analysis*

**13H-2019. Resolved**, that the ADA policy, *Alteration of Dental Treatment Plans by Third-Party Claims Analysis*, (*Trans.*1999:929; 2013:320) be amended as follows (additions are underscored; deletions are ~~stricken~~):

#### **Alteration of Dental Treatment Plans by Third-Party Claims Analysis**

**Resolved**, that in consideration of existing policy on standards for dental benefit plans (*Trans.*1988:478; 1989:547; 1993:696; 2000:458; 2001:428; 2008:453; 2010:546), the challenge of a dental treatment plan by a third-party claims analysis is considered diagnosis and thereby constitutes the practice of dentistry, which can only be performed by a dentist licensed in the state in which the

procedures are being performed, who has equivalent training with that of the treating dentist, and carries with it full liability, and be it further

**Resolved**, that the formulation or alteration of a treatment plan without a dental clinical examination of the patient by a dentist legally authorized to practice in the state in which the patient is treated should be prohibited, and be it further

**Resolved**, that the ADA encourage the adoption of ~~this~~ these positions by the American Association of Dental Boards, all state dental associations, and all states' boards of dentistry, and be it further

**Resolved**, that the ADA urges state dental associations and all states' boards of dentistry to pursue legislation and/or regulations to meet this end.

#### *Resources for Member Dentists*

**27H-2019. Resolved**, that the ~~American Dental Association Legal Division~~ appropriate ADA agencies create a document on what a dentist needs to know when reviewing a business services agreement with a dental support organization (similar to "Dentist Employment Agreements: A Guide to Key Legal Provisions")

and be it further

**Resolved**, that ~~the appropriate ADA agencies~~ ADA State Government Affairs Division track dental support organization-related legislative and regulatory activities in constituent states and make the information available to ADA members.

#### *Tracking Data on Donated Services*

**87H-2019. Resolved**, that if feasible, capabilities to track data on donated services through dentists' volunteerism be built into the ADA clinical data warehouse system to generate aggregate reports.

### **Consent Calendar Resolutions—Resolution Referred**

#### *Proposed New Policy, Patients' Rights to Receive a Benefit for Dental Procedures from their Medical Plan*

**10. Resolved**, that the ADA policy, Patients' Rights to Receive a Benefit for Dental Procedures from their Medical Plan be adopted as follows.

The ADA supports the rights of patients to receive a benefit for dental procedures from their medical plan when the dental procedures are not paid for by the patients' dental benefit plan.

### **Consent Calendar Resolutions—Not Adopted**

#### *Defining the Practice of Dentistry*

**26. Resolved**, that except as provided in the ADA Policy entitled "Ownership of Dental Practices" (*Trans.*2000:462), it is the position of the American Dental Association that dentist-owned dental practices may contract with non-dentist persons or entities for business, professional, and support services to assist dentists in the operations of dental practices, but such services should be subject to the oversight and control of a licensed dentist. Dentists do not retain management control if a non-dentist contractor has the authority to set, approve, or disapprove policies or practices relating to the clinical practice of dentistry, including, but not limited to, any of the following clinical activities:

- a. Patient scheduling,
- b. Treatment planning,
- c. Selecting or purchasing dental equipment, dental materials, or dental laboratories,
- d. Referral of patients, or
- e. Access to patient data and patient records.

and be it further

**Resolved**, that except as provided in the ADA Policy entitled “Ownership of Dental Practices” (*Trans.2000:462*), it is the position of the American Dental Association that dentists should maintain management control over activities that might be viewed as the business side of the practice. A dentist is deemed to have relinquished management control of their practice of dentistry if a non-dentist contractor has any of the following authorities or characteristics including but not limited to:

- a. Authority over dental practice bank accounts,
- b. Ability to make key financial decisions for the practice,
- c. Power to employ clinical or office-based staff,
- d. Control over whether a refund payment to a patient is made,
- e. Authority to establish billing policies or practices,
- f. Ability to determine which dental benefit plans are accepted.

### Non-Consent Resolutions

**Regulating Non-Dentist Owners of Dental Practices** (Council on Dental Practice Resolution 7, Eleventh District Caucus Resolution 7S-1 and Reference Committee B Resolution 7RC): The Reference Committee reported as follows:

The Reference Committee heard favorable testimony regarding Resolution 7 and Resolution 7S-1. The maker of Resolution 7 supported Resolution 7S-1. The Reference Committee believes that all practice models should be held accountable by state authorities. Because many dentists, who are already regulated through state dental boards, practice as corporate entities, the testimony to specify non-dentist corporations that are not so regulated was persuasive. Therefore, the Reference Committee recommends adoption of Resolution 7RC, with a recommendation to Vote Yes in lieu of Resolution 7 and Resolution 7S-1.

**7RC. Resolved**, that the statement on *Regulating Non-Dentist Owners of Dental Practices*, (*Trans.2011:491*) be amended as follows (additions are underscored; deletions ~~strikeouts~~).

#### Regulating Non-Dentist Owners of Dental Practices

**Resolved**, that in order to protect the oral health and safety of patients, and to ensure their continuity of care, the ADA, through its appropriate agencies, urge and assist constituent societies to advocate for the regulation of entities that provide dental services but are owned or controlled by non-dentists, non-dentist corporations, or dentists not licensed in that state by dental licensing and state authorities when state law allows non-dentists, non-dentist corporations, or dentists not licensed in that state to own or control dental practices, and be it further

**Resolved**, that licensing and state authorities be urged to establish regulations which hold entities providing dental services that are owned by non-dentists, non-dentist corporations, or dentists not licensed in that state to the same ethical and legal standards as those that are owned by state licensed dentists, and be it further

**Resolved**, that if non-dentists, non-dentist corporations, or dentists not licensed in that state own a dental practice or a private facility for the delivery of dental care these entities should register with their dental licensing board and obtain a business license from the appropriate state agency as required by law.

Dr. Wagers moved Resolution 7RC in lieu of Resolution 7 (*Supplement:3003*) and Resolution 7S-1 (*Supplement:3003a*) with the Committee Recommendation to Vote Yes.

Dr. Judee Tippett-Whyte, California, moved to amend Resolution 7RC in the first resolving clause by deleting the words “through its appropriate agencies” and the words “by dental licensing and state authorities when state law allows non-dentists, non-dentist corporations, or dentists non licensed in that state to own or control dental practices;” so that the first resolving clause would read as follows:

**Resolved**, that in order to protect the oral health and safety of patients, and to ensure their continuity of care, the ADA, ~~through its appropriate agencies~~, urge and assist constituent societies to advocate for the

regulation of entities that provide dental services but are owned or controlled by non-dentists, non-dentist corporations, or dentists not licensed in that state ~~by dental licensing and state authorities when state law allows non-dentists, non-dentist corporations, or dentists not licensed in that state to own or control dental practices~~, and be it further

and in the third resolving clause by deleting the words “if non-dentists, non-dentist corporations, or dentists not licensed in that state own a dental practice or a private facility for the delivery of dental care these entities,” adding the words “any entity providing dental services” after the word “that,” adding the words “be required to” between words “should” and “register” and adding the word “state” before the words “dental licensing board,” so that the third resolving clause would read as follows:

**Resolved**, ~~that if non-dentists, non-dentist corporations, or dentists not licensed in that state own a dental practice or a private facility for the delivery of dental care these entities~~ any entity providing dental services should be required to register with their state dental licensing board and obtain a business license from the appropriate state agency as required by law.

In speaking to the proposed amendment, Dr. Tippet-Whyte stated, “Although the intent of the resolution is very good, and we understand what the resolution is trying to achieve, it’s very verbose and it’s very difficult to read and to understand as it was written with the addition of those dental licensing phrases. ... And we just think that this cleans the resolution up in terms of the way it is written without it changing the intent of the resolution.”

On vote, the proposed amendment was adopted.

On vote, Resolution 7RC, as amended, was adopted in lieu of Resolution 7 and Resolution 7S-1.

**7H-2019. Resolved**, that the statement on *Regulating Non-Dentist Owners of Dental Practices*, (Trans.2011:491) be amended as follows (additions are underscored; deletions ~~strikeouts~~).

### **Regulating Non-Dentist Owners of Dental Practices**

**Resolved**, that ~~in order to protect the oral health and safety of patients, and to ensure their continuity of care, the ADA, through its appropriate agencies~~, urge and assist constituent societies to advocate for the regulation of entities that provide dental services but are owned or controlled by non-dentists, non-dentist corporations, or dentists not licensed in that state ~~by dental licensing and state authorities when state law allows non-dentists, non-dentist corporations, or dentists not licensed in that state to own or control dental practices~~, and be it further

**Resolved**, that licensing and state authorities be urged to establish regulations which hold entities providing dental services that are owned by non-dentists, non-dentist corporations, or dentists not licensed in that state to the same ethical and legal standards as those that are owned by state licensed dentists, and be it further

**Resolved**, ~~that if non-dentists, non-dentist corporations, or dentists not licensed in that state own a dental practice or a private facility for the delivery of dental care these entities~~ any entity providing dental services should be required to register with their state dental licensing board and obtain a business license from the appropriate state agency as required by law.

**Statement on Programs Limiting Dental Benefit to Network Providers** (Council of Dental Benefit Programs Resolution 9 and Reference Committee B Resolution 9RC): The Reference Committee reported as follows:

The Reference Committee heard limited but supportive testimony of Resolution 9 with several suggestions to strengthen the policy statement. Suggestions addressed availability of premium dollars, using a dentist of the patient’s choice for a second opinion and payment regardless of the dentist’s network status. Therefore, the Reference Committee recommends adoption of Resolution 9RC in lieu of Resolution 9 (additions are underscored; deletions are ~~stricken~~).

**9RC. Resolved**, that the ADA policy, “Statement on Programs Limiting Dental Benefit to Network Providers” be adopted.

### **Statement on Programs Limiting Dental Benefit to Network Providers**

The ADA supports approaches to designing dental benefit programs that allow patients the freedom to choose a dentist and receive benefit payment.

A Closed Panel Dental Benefit Plan exists when patients eligible to receive benefits can receive them only if services are provided by dentists who have signed an agreement with the benefit plan to provide treatment to eligible patients. As a result of the dentist reimbursement methods characteristic of a closed panel plan, only a small percentage of practicing dentists in a given geographical area are typically contracted by the plan to provide dental services.

An Exclusive Provider Organization (EPO) is a type of Preferred Provider Organization (PPO) under which patients must use providers from the specified network of dentists to receive a benefit; there is no payment for care received from a non-network provider except in an emergency situation.

A Dental Health Maintenance Organization (DHMO) is a dental benefit plan that is a legal entity that accepts the responsibility to provide or otherwise ensure the delivery of an agreed upon set of comprehensive oral health care services for a voluntarily enrolled group of persons in a geographic area, with dental care provided by only those dentists having contracts with the DHMO to provide these services.

The ADA opposes these approaches as the *only* dental benefit plans available to patients. To protect the patient’s freedom to receive benefits for dental services provided by any legally-qualified dentist of his or her choice, the ADA suggests the following guidelines for dental benefit plan sponsors who choose to offer these types of dental benefit programs:

1. Benefit programs that offer dental benefits through these types of plans should also offer a Freedom of Choice Plan with equal or comparable benefits which permits free choice of dentist under a fee-for-service arrangement. Under this system, individual consumers should have periodic options to change plans.
2. There should be equal premium dollars per subscriber available for all dental plans being offered and the amount of the premium dollars available for dental care should increase annually.
3. All dentists willing to abide by the terms of the programs provider contract should be eligible to participate in the program.
4. Dental subscribers in these plans should be made fully aware of, and have access to, the profession’s peer review mechanism.
5. Payments for services rendered should be based on the services rendered.
6. All dentists should be eligible to receive reimbursement from the dental plan/benefit program regardless of the dentist’s participation status.
7. When requested by the patient, these plans should pay for a second opinion from a dentist of the patient’s choosing outside the network.
8. A complete description of benefits provided under each plan should be given to all eligible individuals prior to each enrollment period. Benefit limitations and exclusions of each plan should be clearly described, and a complete and current list of dentists who participate in these plans should be provided and updated semi-annually.
9. The Freedom of Choice Plan should be designated the primary enrollment plan, i.e., eligible individuals who fail to enroll in any plan should be enrolled in the freedom of choice plan.

and be it further,

**Resolved**, that the ADA policies titled Closed Panel Dental Benefit Plans (*Trans.*1989:545; 2014:451) and Guidelines for Components of Dental Health Maintenance Organizations (*Trans.*1988:476; 1993:689; 1995:610; 2013:304) be rescinded.

Dr. Wagers moved Resolution 9RC in lieu of Resolution 9 (*Supplement*:3005) with the Committee Recommendation to Vote Yes.

Dr. David A. Schwartz, Pennsylvania moved to amend Resolution 9RC on item number 6. by inserting the word "equal" between the word "receive" and the word "reimbursement," so that item number 6. would read as follows:

6. All dentists should be eligible to receive equal reimbursement from the dental plan/benefit program regardless of the dentist's participation status.

In speaking to the proposed amendment, Dr. Schwartz said, "... the amendment that I posed in the Reference Committee was that level out the playing between the in-network and out-of-network discrimination that's going on and just try to get it into policy that the ADA is against it. Putting the word "equal" was a quick and simple way to do that. ... I think it's across the board that we don't have differentiation between networking. Patient pays premiums that services paid should be reflected."

Dr. Christopher M. Bulnes, Florida, chair of the Council on Dental Benefit Programs commented on the amendment, stating, "While the amendment is aspirational with regards to adding the word 'equal,' the resolution speaks to the different type of benefit programs that are out there, whether it be EPOs, HMOs. Specifically to those, if you're involved with an HMO or and EPO and you're an out-of network dentist, you will not receive reimbursement. The spirit of the resolution speaks to receiving reimbursement in regards to those types of plans that are available in the marketplace. The argument with in-network and out-of-network, while it's aspirational, I would suggest to this entire House and the entire membership, drop you plans, and we will cease to exist in any type of network, and we won't have to have a policy."

On vote, the proposed amendment was adopted.

On vote, Resolution 9RC, as amended, was adopted in lieu of Resolution 9.

**9H-2019. Resolved**, that the ADA policy, "Statement on Programs Limiting Dental Benefit to Network Providers" be adopted.

### **Statement on Programs Limiting Dental Benefit to Network Providers**

The ADA supports approaches to designing dental benefit programs that allow patients the freedom to choose a dentist and receive benefit payment.

A Closed Panel Dental Benefit Plan exists when patients eligible to receive benefits can receive them only if services are provided by dentists who have signed an agreement with the benefit plan to provide treatment to eligible patients. As a result of the dentist reimbursement methods characteristic of a closed panel plan, only a small percentage of practicing dentists in a given geographical area are typically contracted by the plan to provide dental services.

An Exclusive Provider Organization (EPO) is a type of Preferred Provider Organization (PPO) under which patients must use providers from the specified network of dentists to receive a benefit; there is no payment for care received from a non-network provider except in an emergency situation.

A Dental Health Maintenance Organization (DHMO) is a dental benefit plan that is a legal entity that accepts the responsibility to provide or otherwise ensure the delivery of an agreed upon set of comprehensive oral health care services for a voluntarily enrolled group of persons in a geographic area, with dental care provided by only those dentists having contracts with the DHMO to provide these services.

The ADA opposes these approaches as the *only* dental benefit plans available to patients. To protect the patient's freedom to receive benefits for dental services provided by any legally-qualified dentist of his or her choice, the ADA suggests the following guidelines for dental benefit plan sponsors who choose to offer these types of dental benefit programs:

1. Benefit programs that offer dental benefits through these types of plans should also offer a Freedom of Choice Plan with equal ~~or comparable~~ benefits which permits free choice of dentist under a fee-for-service arrangement. Under this system, individual consumers should have periodic options to change plans.
2. There should be equal premium dollars per subscriber available for all dental plans being offered and the amount of the premium dollars available for dental care should increase annually.
3. All dentists willing to abide by the terms of the programs provider contract should be eligible to participate in the program.
4. Dental subscribers in these plans should be made fully aware of, and have access to, the profession's peer review mechanism.
5. Payments for services rendered should be based on the services rendered.
6. All dentists should be eligible to receive equal reimbursement from the dental plan/benefit program regardless of the dentist's participation status.
7. When requested by the patient, these plans should pay for a second opinion from a dentist of the patient's choosing outside the network.
8. A complete description of benefits provided under each plan should be given to all eligible individuals prior to each enrollment period. Benefit limitations and exclusions of each plan should be clearly described, and a complete and current list of dentists who participate in these plans should be provided and updated semi-annually.
9. The Freedom of Choice Plan should be designated the primary enrollment plan, i.e., eligible individuals who fail to enroll in any plan should be enrolled in the freedom of choice plan.

and be it further,

**Resolved**, that the ADA policies titled Closed Panel Dental Benefit Plans (*Trans.*1989:545; 2014:451) and Guidelines for Components of Dental Health Maintenance Organizations (*Trans.*1988:476; 1993:689; 1995:610; 2013:304) be rescinded.

**Revision of Policy, Medical Loss Ratio** (Council on Dental Benefit Programs Resolution 11 and Reference Committee B Resolution 11RC): The Reference Committee reported as follows:

The Reference Committee heard limited but supportive testimony on Resolution 11 with some suggestions to strengthen the policy statement. Testimony sought to improve transparency of information available to the general public. Testimony also noted the need to consider not including expenses for quality improvement activities and its effect on the definition of medical loss ratio. On discussion, the Reference Committee recommends adoption of Resolution 11RC in lieu of Resolution 11.

**11RC. Resolved**, that the ADA policy, Medical Loss Ratio, (*Trans.* 2015:244) be amended as follows (additions are underscored; deletions are ~~stricken~~).

#### **Medical (Dental) Loss Ratio (*Trans.* 2015:244)**

**Resolved**, that the ADA supports the concept of a "Medical Loss Ratio" for dental plans defined as the proportion of premium revenues spent on clinical services and quality improvement versus administrative services and company profits, and be it further

**Resolved**, that dental plans, both for profit and nonprofit should be required to make information available to the general public and to publicize in their marketing materials to plan purchasers and in written communications to their beneficiaries the percentage of premiums that fund treatment and the percentage of premiums that go to administrative costs, promotion, marketing and profit, or in the case of nonprofit entities, reserves, and be it further

**Resolved**, that the ADA support legislative efforts to require dental benefit plans to file a comprehensive MLR report annually and to establish a specific loss ratio for dental plans in each state, and be it further

**Resolved** that the ADA policy, Managed Care Programs' Administrative Costs, Profit and Treatment Expense (*Trans.*1994:644) be rescinded.

Dr. Wagers moved Resolution 11RC in lieu of Resolution 11 (*Supplement:3010*) with the Committee Recommendation to Vote Yes.

Dr. David L. Hamel, Kansas, moved to amend Resolution 11RC in the first resolving clause by deleting the words "and quality improvement versus administrative services and company profit," so that the first resolving clause would read as follows:

**Resolved**, that the ADA supports the concept of a "Medical Loss Ratio" for dental plans defined as the proportion of premium revenues spent on clinical services ~~and quality improvement versus administrative services and company profits~~, and be it further

In speaking to the proposed amendment, Dr. Hamel said, "What [the proposed amendment] does is it makes it consistent with the second little resolve where they go in and try to explain it. The other thing is the message that we're really trying to capture and send from the dental standpoint is that we do want to have a medical loss ratio not be corrupted with anything other than what is spent on clinical services."

On vote, the proposed amendment was adopted.

Dr. Christopher M. Bulnes, Florida, chair of the Council on Dental Benefit Programs commented on the proposed resolution, stating, "While I'm not necessarily in agreement or in opposition to this, all this does is it changes the numerator from medical loss ratio which is done in various different ways, whether it be quality improvement is included or not included. I just think for the benefit of the House, that the calculation that is rendered for medical loss ratio, and this is just one way to do it."

Dr. Richard R. Grossman, Pennsylvania, moved to further amend Resolution 11RC in the first resolving clause by replacing the words "medical loss ratio" with the words "dental loss ratio"

In speaking to the proposed amendment, Dr. Grossman said, "I hate signing forms that say physician on it when I'm a dentist. And I think this is the same thing."

Discussion in opposition to the proposed amendment ensued. Individuals commented that the term "medical loss ratio" is a recognized term in the insurance industry and is currently defined in the Affordable Care Act.

On vote, the proposed amendment was not adopted.

Dr. Matthew S. Kolkman, Indiana, moved to further amend Resolution 11RC in the first resolving clause by adding the words "versus administrative services and company profits" after the words "clinical services," so that the first resolving clause would read as follows:

**Resolved**, that the ADA supports the concept of a "Medical Loss Ratio" for dental plans defined as the proportion of premium revenues spent on clinical services ~~and quality improvement versus administrative services and company profits~~, and be it further

In speaking to the proposed amendment, Dr. Kolkman said, "The reason being, we discuss it as a proportion, and the previous amendment is eliminating the denominator, which is the administrative services and company profits."

The Speaker stated, "In order to have a ratio, I think you need a numerator and a denominator. And from what I can tell...I didn't realize we had struck the entire denominator. ... So we have to have some kind of denominator."

Dr. Hamel spoke against the proposed amendment stating, "If you look at the first line, it says, 'The ADA supports concept of medical loss ratio for dental plans defined as the proportion of premium revenues.' That's your denominator. I mean, that's the definition of medical loss ratio. ... To include services such as administrative services or quality improvement services, for which are many times funds that insurance plans or third parties pay to themselves as part of quality improvement plans, corrupts the data for which we receive that tells us what percentage of premiums actually is spent on clinical services."

The Speaker responded, "...I understand this a little better now. So the proportion of premium revenues spent on clinical services, clinical services is the numerator, premium revenues is the denominator..."

Discussion in opposition to the proposed amendment ensued. Individuals commented that there are multiple ways to measure medical loss ratio, however, the proposed amendment would not provide the desired metric on how much of an insurance premium is spent directly on clinical services since the amendment would add in administrative services and company profits.

On vote, the proposed amendment was not adopted.

Dr. Virendra R. Patel, California, moved to further amend Resolution 11RC in the first resolving clause by deleting the words, "defined as the proportion of premium revenue spent on clinical services," so that the first resolving clause would read as follows:

**Resolved**, that the ADA supports the concept of a "Medical Loss Ratio" for dental plans ~~defined as the proportion of premium revenues spent on clinical services and quality improvement versus administrative services and company profits~~, and be it further

In speaking to the proposed amendment, Dr. Patel stated, "...this is not the body that should be deciding what a medical loss ratio is. The concept, which is what we want, is a proportion. And that concept is what we're after. We're not after generating the wordsmithing and the exact definition. That's for others to do."

Dr. Charles J. Incalcaterra, Pennsylvania, spoke in support of the amendment. He said, "I think that we should not define it. Just say we support the concept of medical loss ratio for dental plans, period."

Dr. Jane Gillette, Montana, spoke against the amendment, stating, "I think that we should stand for something. I think that if we don't put it in there, then we leave it open for either including quality improvement or not including quality improvement. And I support taking a stance on measuring...how much is actually being spent on dental services."

Dr. Christopher J. Smiley, Michigan, spoke against the amendment, stating, "MLR [Medical Loss Ratio] is defined by CMS, and that is true. What we're talking about here, though, is Association policy, which is aspirational. And what we're saying is that for our policy, what we want to have is knowledge about what percentage of premium dollars actually go into direct delivery of care. What is the position of our Association? That should be the position of our Association and not get caught up in the greater metric."

Pro and con discussion on the proposed amendment ensued. Individuals speaking in support of the proposed amendment commented that it provides for flexibility when other entities update the definition of medical loss ratio, and that the second resolving clause in Resolution 11RC states that dental plans should be required to make information available to the general public such as the percentage of premiums that fund treatment. Individuals speaking against the proposed amendment commented that it was important to keep the ratio as defined in the previously adopted amendment in order to receive clear data on the proportion of premium revenues spent directly on clinical services.

On vote, the proposed amendment was not adopted.

Dr. Steven A. Saxe, Nevada, moved to further amend Resolution 11RC in the third resolving clause by adding the words “and ERISA benefit plans” after the words “each state,” so that the third resolving clause would read as follows:

**Resolved**, that the ADA support legislative efforts to require dental benefit plans to file a comprehensive MLR report annually and to establish a specific loss ratio for dental plans in each state and ERISA benefit plans, and be it further

In speaking to the proposed amendment, Dr. Saxe said, “Self-funded plans that are monitored by ERISA are not included in that, and that information is not usually readily available. So I think we should encourage that...”

On vote, the proposed amendment was adopted.

As a point of information, Dr. Gary L. Glasband, California, asked if the language in the amended first resolving clause was a ratio.

The Speaker responded, “Yes, it is. The ratio is the proportion of premium revenues, which would be the denominator, spent on clinical services. Clinical services is the numerator.”

Dr. Allison S. Bergdoll, Indiana, moved to further amend Resolution 11RC in the first resolving clause by replacing the word “proportion” with the word “percentage” so that the first resolving clause would read as follows:

**Resolved**, that the ADA supports the concept of a “Medical Loss Ratio” for dental plans defined as the ~~proportion~~ percentage of premium revenues spent on clinical services ~~and quality improvement versus administrative services and company profits~~, and be it further

In speaking to the amendment, Dr. Bergdoll stated, “...we’ve eliminated the denominator, but a percent would mean that we wouldn’t need a denominator.”

Dr. Brett Kessler, Colorado, vice chair of the Council on Dental Benefit Programs moved to refer Resolution 11RC, as amended, to the Council on Dental Benefit Programs for further work on the Resolution. In speaking to the motion to refer, Dr. Kessler stated, “...this is council work and shouldn’t be House of Delegates work.”

Pro and con discussion on the motion to refer ensued. Individuals speaking in support of the motion to refer commented that the proposed amendment was committee work. Individuals speaking against the motion to refer commented that the House of Delegates has enough information to make a decision on Resolution 11RC, as amended.

On vote, the motion to refer was not adopted.

Dr. Barry J. Taylor, Oregon, spoke against the proposed amendment, stating, “...if you look at the definition of a ratio, a ratio is a proportion and not a percentage.”

Dr. Douglas S. Hadnot, Montana, spoke in support of the proposed amendment. He said, “The original intent of the first resolving clause really has been stripped out when we take out all the rest of the language, and I think it becomes unclear. The real meat of this is the second resolving clause, which defines exactly what we’re looking for, and the second resolving clause requires percentage.”

Pro and con discussion on the proposed amendment ensued.

On vote, the proposed amendment was not adopted.

Dr. Douglas N. Robertson, West Virginia, moved to further amend Resolution 11RC in the first resolving clause by adding the words “that is” between the word “revenues” and the word “spent” so that the first resolving clause would read as follows:

**Resolved**, that the ADA supports the concept of a “Medical Loss Ratio” for dental plans defined as the proportion of premium revenues that is spent on clinical services ~~and quality improvement versus administrative services and company profits~~, and be it further

In speaking to the proposed amendment, Dr. Robertson stated, “I think that would eliminate the confusion about whether we have a denominator.”

On vote, the proposed amendment was adopted.

A motion was made to vote immediately on Resolution 11RC, as amended. The motion to vote immediately was adopted by a two-thirds affirmative vote.

On vote, Resolution 11RC, as amended, was adopted in lieu of Resolution 11.

**11H-2019. Resolved**, that the ADA policy, Medical Loss Ratio, (*Trans.* 2015:244) be amended as follows (additions are underscored; deletions are ~~stricken~~).

#### **Medical (Dental) Loss ratio (*Trans.* 2015:244)**

**Resolved**, that the ADA supports the concept of a “Medical Loss Ratio” for dental plans defined as the proportion of premium revenues that is spent on clinical services ~~and quality improvement versus administrative services and company profits~~, and be it further

**Resolved**, that dental plans, both for profit and nonprofit should be required to make information available to the general public and to publicize in their marketing materials to plan purchasers and in written communications to their beneficiaries the percentage of premiums that fund treatment and the percentage of premiums that go to administrative costs, promotion, marketing and profit, or in the case of nonprofit entities, reserves, and be it further

**Resolved**, that the ADA support legislative efforts to require dental benefit plans to file a comprehensive MLR report annually and to establish a specific loss ratio for dental plans in each state and ERISA benefit plans, and be it further

**Resolved** that the ADA policy, Managed Care Programs’ Administrative Costs, Profit and Treatment Expense (*Trans.*1994:644) be rescinded.

**Proposed ADA Policy Statement on the Use of Silver Diamine Fluoride (SDF)** (Council on Dental Practice Resolution 12 and Eleventh Trustee District Resolution 12S-1): The Reference Committee reported as follows:

The Reference Committee heard extensive testimony on the appropriate use of SDF for the management of caries on primary and permanent teeth. The dentist’s role in diagnosis of caries and proper treatment protocols is essential for the non-restorative management of caries. Testimony to strike the need for a comprehensive examination and development of a treatment plan by a dentist for a patient was not found to be compelling. Therefore, the Reference Committee concurs with the Board recommendation and recommends the adoption of Resolution 12 in lieu of Resolution 12S-1 with the Committee recommendation to Vote Yes.

**12. Resolved**, that the ADA policy, Statement on the Use of Silver Diamine Fluoride, be adopted.

#### **Statement on the Use of Silver Diamine Fluoride**

38% Silver Diamine Fluoride (SDF) is a topical antimicrobial and remineralizing agent which was cleared by the FDA as a Class II medical device to treat tooth sensitivity. In certain limited circumstances, SDF can be used as a non-restorative treatment to arrest cavitated carious lesions on primary and permanent teeth. SDF treatment for carious lesions requires appropriate diagnosis and monitoring by a dentist.

When using SDF for caries management, the following protocols should be followed:

1. A diagnosis of caries and comprehensive treatment plan, developed by a dentist, are necessary for each patient prior to the application of SDF.

2. Patients or their lawful guardians who opt for this treatment modality should be informed of all available treatment options, possible side effects, and the need for follow-up monitoring when giving informed consent.

3. The application of SDF may be delegated to qualified allied dental personnel with the appropriate training under the indirect or Public Health supervision of a dentist, in accord with state law and in conjunction with the above protocols, keeping in mind that caries removal may be indicated for effective use of SDF.

Dr. Wagers moved Resolution 12 (*Supplement:3012*) in lieu of Resolution 12S-1 (*Supplement:3013a*) with the Committee Recommendation to Vote Yes.

Dr. Bryon E. Roshong, New Jersey, spoke against Resolution 12. He stated, “The FDA has not approved silver diamine fluoride...for reduction—it has approved it for only reduction of tooth sensitivity and not for caries management. The ADA has promoted and is still promoting evidence-based dentistry. At present, such a policy statement does not comply with this recommended practice or philosophy that the ADA is espousing.”

Dr. Ariane R. Terlet, California, moved to refer Resolution 12. In speaking to the motion to refer Dr. Terlet stated, “In the background, one of the comments that are made is that caries is not a contagious disease, and we know that we transmit bacteria from parent to children and children to children. In public health, we’re looking at this. Additionally, UCSF down the street has studies specifically about how the caries—how this helps arrest caries and what the use of it is for. So I think this needs to be referred back to the Council.”

Dr. Gary L. Dougan, California, spoke in support of the motion to refer, stating, “When I look at this policy, although it’s very well intended, it has a multiplicity of things that need further work and further attention. First of all, even just the title, ‘Statement on the Use of Silver Diamine Fluoride.’ Well, there are multiple uses of silver diamine fluoride. This is addressing the use of it in certain carious lesions as opposed to desensitization. In addition to that, there are clauses in here about who supervises the placement of silver diamine fluoride. So there are workforce issues as well. There’s a public health interest in who should be placing this and who shouldn’t. And also there are some inconsistencies with some policy in the American Academy of Pediatric Dentistry. There’s also some commentary about whether this is an actual treatment or therapeutic agent versus a medicament. And how you call it could affect funding and payment for this by third parties. ...”

As a point of information, Dr. Duc M. Ho, Texas, asked when the Council on Scientific Affairs would next examine silver diamine fluoride (SDF).

In response to Dr. Ho’s question, Dr. Marcelo Araujo, vice president, Science Institute, stated, “Currently, the Council is developing clinical practice guidelines on the use of SDF for restorative management of caries. We already have one for known restorative management of caries and that guideline supports the use of SDF for the management of caries when an alternative to restoration.”

Pro and con discussion on the motion to refer ensued. Individuals speaking in support of referral commented that the proposed policy needed clarity, posed unnecessary barriers on the use of SDF and does not address the use of SDF in the public health setting. Individuals speaking against referral commented that multiple councils were in support of the proposed policy and that the proposed policy was based on existing clinical practice guidelines. In addition, individuals speaking against referral commented that the proposed policy followed the best available research and that as research evolves over time the policy can be amended in future years.

A motion was made to vote immediately on the motion to refer. The motion to vote immediately was adopted by a two-thirds affirmative vote.

On vote, the motion to refer Resolution 12 to the appropriate ADA agency for further study and report to the 2020 House of Delegates was adopted.

**Pediatric Screening for Sleep Related Breathing Disorders** (Second Trustee District Resolution 28 and Reference Committee B Resolution 28RC): The Reference Committee reported as follows:

The Reference Committee heard testimony that inclusion of the Give Kids a Smile program could limit the use of the proposed protocol. Therefore, the Reference Committee recommends adoption of Resolution 28RC, with a recommendation to Vote Yes (additions are underscored; deletions are ~~stricken~~).

**28RC. Resolved**, that the American Dental Association, through its appropriate agency or agencies, develop a screening tool/protocol for pediatric airway issues for use by dentists., ~~and be it further Resolved, that this tool be promoted for use in dental practice and provided as a resource for Give Kids A Smile® events where permitted under applicable state laws and regulations.~~

Dr. Wagers moved Resolution 28RC in lieu of Resolution 28 (*Supplement:3019*) with the Committee Recommendation to Vote Yes.

Dr. Robert A. Gandola, California, moved to amend Resolution 28RC in the first resolving clause by adding the words “and promote” after the word “develop” so that the first resolving clause would read as follows:

**Resolved**, that the American Dental Association, through its appropriate agency or agencies, develop and promote a screening tool/protocol for pediatric airway issues for use by dentists., ~~and be it further~~

In speaking to the amendment, Dr. Gandola stated, “... We feel that it’s important that once we develop this tool, that the dentists, in general, need to know about it. If they don’t know about it, they won’t be able to take advantage of it and utilize this important tool...”

On vote, the proposed amendment was adopted.

On vote, Resolution 28RC, as amended, was adopted in lieu of Resolution 28.

**28H-2019. Resolved**, that the American Dental Association, through its appropriate agency or agencies, develop and promote a screening tool/protocol for pediatric airway issues for use by dentists., ~~and be it further~~

~~**Resolved**, that this tool be promoted for use in dental practice and provided as a resource for Give Kids A Smile® events where permitted under applicable state laws and regulations.~~

**Amendment of Policy, Infection Control in the Practice of Dentistry** (Council on Dental Practice Resolution 35): The Reference Committee reported as follows:

The Reference Committee heard supportive testimony for the resolution. A suggestion to refer the resolution to allow the study of the effects of autoclaving slow speed motors was discussed and considered. CDC is the authority on appropriate infection control and the profession is obligated to follow its guidelines. ADA can engage CDC concerning the status of autoclaving slow speed motors when new information is available. Therefore, the Reference Committee supports Resolution 35 with a recommendation to Vote Yes (additions are underscored; deletions are ~~stricken~~).

**35. Resolved**, that the policy Infection Control in the Practice of Dentistry (*Trans:2012:470*) be amended as follows (additions are underscored).

#### **INFECTION CONTROL IN THE PRACTICE OF DENTISTRY**

**Resolved**, that it be ADA policy to support the implementation of standard precautions and infection control recommendations appropriate to the clinical setting, per the 2003 Guidelines for Infection Control in Dental Health Care Settings and the 2016 Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care from the Centers for Disease Control and Prevention (CDC), and be it further

**Resolved**, that the ADA urges practicing dentists, dental auxiliaries and dental laboratories to keep up to date as scientific information leads to improvements in infection control, and be it further

**Resolved**, that this policy includes implementation of CDC recommendations for vaccination and the prevention and management of exposures involving non-intact skin, mucous membranes and percutaneous injuries.

Dr. Wagers moved Resolution 35 (*Supplement:3021*) with the Committee Recommendation to Vote Yes.

Dr. Mark M. Johnston, Michigan, moved to refer Resolution 35.

In speaking to the motion to refer, Dr. Johnston stated, "...Apparently the Eleventh [District] is having some zealous overregulation in their state. What I'd like to see the ADA be able to do is help us, the members, by continuing to provide data to not only the FDA, but also to the CDC on the science of sterilization protocol. What we are seeing in the Ninth District are vendors speaking to allied health professionals, specifically hygienists, and misrepresenting the CDC guidelines that were put out on 4/11/2018 in promoting the sale of multiple packet, slow speed handpieces when it may not be necessary to autoclave that motor. In the February 7, 2019, ADA News, it was presented that after speaking with CDC, the ADA has given updated information on sterilization guidelines to some slow speed motors. And why I'd like to see it referred is so that the ADA help out not only the Eleventh [District] but all of our members in getting accurate information and also further fight the fight against the vendors who are misleading us."

Dr. Bernard J. Larson, Washington, spoke in support of the motion to refer. He stated, "I would also like to see this referred so that it could be put together with language that allowed us to basically engage the CDC instead of just believing everything that they said. I think like any other government agency in this day and age, they may be a little underfunded and they may not have enough dentists on their staff to actually have a valid opinion on research that they're seeing. As the previous speaker noted, some of the research is maybe not as well done as it perhaps could be, and it was perhaps misrepresented or, at very best, not reviewed and not redone. ... I think that we should rely on evidence-based dentistry, as we have proclaimed to be our goal, and that some of the 2016 guidelines by the CDC are not exactly based on evidence-based performance, but, rather, conjecture from research that's not quite as well done as it should be. ... I think that basically checks and balances are good, and the CDC could be benefited by that just like anything else."

Dr. Angelo J. Mariotti, Ohio, chair of the Council on Scientific Affairs, spoke against the motion to refer, stating, "We believe the language is correct and supported by the current state of science. At this time, we do not believe that there is any need for referral. Further, the Council is working to finish this standard, and we'll work with the FDA and CDC for any potential change in guidelines."

Dr. Christopher J. Smiley, Michigan, spoke in support of the motion to refer, stating, "...we agree that this is an issue for standards and for the standards folks and also that this is being communicated as the science evolves with CDC. However, the issue on referral is the need to have clear, simplistic language for our members to communicate with vendors on the interpretation of CDC guidelines, as there seems to be some misunderstanding that is being used to market excessive purchase of supplies that may not be necessary."

Dr. Bryan C. Edgar, Washington, spoke in support of the motion to refer. He stated, "[I'm] also the chair of regulatory affairs for the Washington State Dental Association. And during the past two years we have found that this science that we're so relying on from the CDC and the ADA is supporting is actually flawed. Let me describe the two studies that we looked at that are being quoted so often. One of them is where they do an in vivo study using hygienist's handpieces with prophylaxis angles on them, and it was found by the CDC or by the study from Indiana, that bioburden did get into the handpiece. No mention in the study was whether it got into the motor of the handpiece. The other study was an in vitro study where motors were actually dipped in bacteria solution and, by golly, bacteria got into the motor. Well, that's not the way dentistry is practiced. And so we contend that those studies are flawed, and we would like this looked at by Science, especially, and, really, put the ADA in a position that is going to be supported by science."

Dr. Stacey K. Van Scoyoc, Illinois, chair of the Council on Dental Practice, spoke against the motion to refer, stating, "...the Council on Dental Practice supports the Council on Scientific Affairs' comments and is recommending against referral."

In speaking against the motion to refer, Dr. Mariotti added, "Obviously, there are many different ways to look at papers and interpret that data. That is why the Council on Scientific Affairs is here. Again, we do not need referral. We are working on this to finish this standard."

On vote, the motion to refer was not adopted.

On vote, Resolution 35 was adopted

**35H-2019. Resolved**, that the policy Infection Control in the Practice of Dentistry (*Trans*:2012:470) be amended as follows (additions are underscored).

### INFECTION CONTROL IN THE PRACTICE OF DENTISTRY

**Resolved**, that it be ADA policy to support the implementation of standard precautions and infection control recommendations appropriate to the clinical setting, per the 2003 Guidelines for Infection Control in Dental Health Care Settings and the 2016 Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care from the Centers for Disease Control and Prevention (CDC), and be it further

**Resolved**, that the ADA urges practicing dentists, dental auxiliaries and dental laboratories to keep up to date as scientific information leads to improvements in infection control, and be it further

**Resolved**, that this policy includes implementation of CDC recommendations for vaccination and the prevention and management of exposures involving non-intact skin, mucous membranes and percutaneous injuries.

**Elder Care Work Group Report 1 to the House of Delegates: Elder Care Strategy** (Elder Care Workgroup Resolution 72 and Reference Committee B Resolution 72RC): The Reference Committee reported as follows:

The Reference Committee heard testimony that a definitive report should be delivered to the 2020 House of Delegates and that the timeline should be included in the resolution. Therefore, the Reference Committee supports adoption of Resolution 72RC with a recommendation to Vote Yes (additions are underscored).

**72RC. Resolved**, that the *ad hoc* Elder Care Committee, comprised of members appointed by the President, be reauthorized for another year to review and update Resolution 5H-2006 (*Trans*.2006:319) and to identify an implementation plan and timeline to address elder care including Medicare and report to the 2020 House of Delegates with a Comprehensive Strategic Elder Care policy.

Dr. Wagers moved Resolution 72RC in lieu of Resolution 72 (*Supplement*:3023) with the Committee Recommendation to Vote Yes.

Dr. Richard J. Nagy, California, moved to amend Resolution 72RC by deleting the words "with a Comprehensive Strategic Elder Care policy," so that the Resolution would read as follows:

**Resolved**, that the *ad hoc* Elder Care Committee, comprised of members appointed by the President, be reauthorized for another year to review and update Resolution 5H-2006 (*Trans*.2006:319) and to identify an implementation plan and timeline to address elder care including Medicare and report to the 2020 House of Delegates. ~~with a Comprehensive Strategic Elder Care policy.~~

In speaking to the proposed amendment, Dr. Nagy stated, "The few people who testified at Reference Committee wanted a timeline, which is reflected as what you see. I think the Reference Committee went a little too far, because as read subsequently, it changes the scope of our charge. For one thing, a committee or workgroup cannot make a policy. We can make recommendations for the House to create a policy. So that is

not accurate. And in the background statement, we already are charged to do a comprehensive strategic guidelines for elder care. So I think we're already accomplishing what we are charged to do, as well as meeting the needs of the concerned in the audience."

Dr. Christopher M. Bulnes, Florida, chair of the Council on Dental Benefit Programs, spoke against the proposed amendment stating, "I think it's intuitive to the resolution that they will come back to the 2020 House with a proposed comprehensive strategic elder care policy to be voted on by this House and not in finality. The intention is to finally get a policy in regards to that."

Dr. Julia H. Townsend, California, spoke in support of the proposed amendment. She stated, "I have a problem with the word 'comprehensive' just because it has many definitions. And the task force is obviously working and trying to come up with something that has, especially in the terms of Medicare, which is definitely a very broad topic, to come up with very comprehensive and specific policy. I think a report that's going to be given at next year's House of Delegates is going to give us a vast amount of information, and I don't want to tie the hands of this Committee of having to come up with something that would be quantified as comprehensive."

Dr. Bulnes stated, "For the group and the House, comprehensive, I don't know if there's a quantitative element to that word, but from Webster, 'comprehensive' means complete, including all or nearly all elements or aspects of something. In regards to the proposed addition of the resolution from the RC Committee, it's in regards to elder care, not specific to Medicare. I think we had that discussion last year, and I don't want to rehash that."

Dr. Richard P. Herman, New York, chair of the Council on Advocacy for Access and Prevention, spoke against the proposed amendment stating, "We used a group report to support and be the main voice for oral health in America. At the same time, we are reporting that oral health is part of total body health. We understand that in this country on both sides of the political spectrum, there is a cry for some change in clarification in our health care policy. We also understand that in this room, there are people on one side who may be very liberal and want to promote, for example, Medicare for all, and some on the other side who may feel that this anathema. I think that we, as an association, owe, one, to our members a policy; and, two, the American public a policy so that, one, we can support it or propose it and explain it to both our members and to the public."

Dr. Steven I. Snyder, New York, spoke against the proposed amendment stating, "My concern is if we...strike those words, we're allowing this discussion regarding elder care and Medicare to go on forever. We've been discussing elder care, Medicare for the last several years. Nothing has been done. We keep kicking the can down the road. I believe by keeping this language in, we are requesting that the Elder Care Workgroup get the job done, report back to this House, let this House decide whether to vote the policy up or down or make changes."

Dr. Diane D. Romaine, Maryland, spoke against the proposed amendment stating, "As a member of the Elder Care Workgroup, I believe the underscored edition gives timeliness and refinement to the mandate of the Elder Care Workgroup. If we define a comprehensive elder care policy for the House to consider, it will give the ADA a better opportunity to align and act on the critical advocacy issue of elder care, including Medicare."

On vote, the proposed amendment was not adopted.

As a point of information, Dr. Nagy asked if a workgroup can create a policy. In response, the Speaker stated, "The policy will come to the House. They cannot adopt a policy on their own. The House must approve a policy."

Dr. Cesar R. Sabates, Seventeenth District Trustee, chair of the Elder Care Workgroup, commented that the Workgroup has funding to meet in October, but no additional funds were budgeted for the Elder Care Workgroup to meet.

In response to Dr. Sabates' comment, Dr. Ted Sherwin, Treasurer, said "...as far as we know, we don't have any meetings planned. If the Elder Care Group decides that it does, then it can come to the Board. We can look at a contingency fund help for that."

Dr. Nagy moved to amend Resolution 72RC by adding the word "recommended" before the word "Comprehensive" so that the Resolution would read as follows:

**Resolved**, that the *ad hoc* Elder Care Committee, comprised of members appointed by the President, be reauthorized for another year to review and update Resolution 5H-2006 (*Trans.*2006:319) and to identify an implementation plan and timeline to address elder care including Medicare and report to the 2020 House of Delegates with a recommended Comprehensive Strategic Elder Care policy.

In speaking to the amendment, Dr. Nagy stated, "That's all the Workgroup is doing is making recommendations. This House makes the policy. Our Workgroup does not."

Without objection, the amendment was made editorially.

On vote, Resolution 72RC, as editorially amended, was adopted in lieu of Resolution 72.

**72H-2019. Resolved**, that the *ad hoc* Elder Care Committee, comprised of members appointed by the President, be reauthorized for another year to review and update Resolution 5H-2006 (*Trans.*2006:319) and to identify an implementation plan and timeline to address elder care including Medicare and report to the 2020 House of Delegates with a recommended Comprehensive Strategic Elder Care policy.

**Amendment of Policy, Statement on the Role of Dentistry in the Treatment of Sleep Related Breathing Disorders** (Council on Dental Practice Resolution 76): The Committee reported as follows:

The Reference Committee heard testimony in favor of Resolution 76 and no testimony in opposition. Therefore, the Reference Committee concurs with the Board of Trustees and supports adoption of Resolution 76.

**76. Resolved**, that the Policy Statement on the Role of Dentistry in the Treatment of Sleep Related Breathing Disorders (*Trans.*2017:269) be amended as follows (additions are underscored; deletions are ~~stricken~~.)

**Policy Statement on the Role of Dentistry in the  
Treatment of Sleep Related Breathing Disorders (*Trans.*2017:269)**

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 a physician diagnoses obstructive sleep apnea in an adult patient and the treatment with oral appliance therapy is recommended ~~When oral appliance therapy is prescribed by a physician~~ through written or electronic referral 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, monitor its effectiveness and titrate the appliance as necessary.
- 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. Wagers moved Resolution 76 (*Supplement:3024*) with the Committee Recommendation to Vote Yes.

Dr. Prabha Krishnan, New York, moved to amend Resolution 76, in the fourth bullet point of the section that reads “The dentist’s role in the treatment of SRBD includes the following:” by deleting the words “an adult,” so that the fourth bullet point would read as follows:

- When a physician diagnoses obstructive sleep apnea in a patient and the treatment with oral appliance therapy is recommended ~~When oral appliance therapy is prescribed by a physician through written or electronic referral 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, monitor its effectiveness and titrate the appliance as necessary.

In speaking to the amendment, Dr. Krishnan stated, “We would like to be inclusive of all patients, not just restricting it to an adult patient.”

As a point of information, a delegate from the floor asked, “Does that also effect previously where it talks about adult? I think its a few paragraphs up, it also talks about adult.” In response to the delegate’s question, Dr. Krishnan said, “We just requested the change in this paragraph because the previous paragraphs, which have adult patients, doesn’t apply to this because it includes—it talks about children separately and adults separately.”

On vote, the proposed amendment was adopted.

On vote, Resolution 76, as amended, was adopted.

**76H-2019. Resolved,** that the Policy Statement on the Role of Dentistry in the Treatment of Sleep Related Breathing Disorders (*Trans.2017:269*) be amended as follows (additions are underscored; deletions are ~~stricken~~.)

#### **Policy Statement on the Role of Dentistry in the Treatment of Sleep Related Breathing Disorders (*Trans.2017:269*)**

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 a physician diagnoses obstructive sleep apnea in a patient and the treatment with oral appliance therapy is recommended ~~When oral appliance therapy is prescribed by a physician through written or electronic referral 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, monitor its effectiveness and titrate the appliance as necessary.
  - 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.

### **Report of Reference Committee C (Dental Education, Science and Related Matters)**

The Report of Reference Committee C was presented by Dr. Elizabeth A. Clemente, New Jersey, chair. The other members of the Committee were: Dr. Rita M. Cammarata, Texas; Dr. Leigh W. Kent, Alabama; Dr. William K. Lobb, Wisconsin; Dr. James G. McMahan, Oregon; Dr. Paul M. Mullasseril, Oklahoma;

Dr. Aruna Rao, Minnesota; Ms. Karina Valentin, American Student Dental Association; and Dr. Debra A. Woo, California.

**Consent Calendar** (Reference Committee C Resolution 90) The Reference Committee reported as follows:

The appended Resolution 90 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 90, 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.

**90. Resolved**, that the recommendations of Reference Committee C on the following resolutions be accepted by the House of Delegates.

**Resolution 17RC**—(Adopt Resolution 17RC in lieu of Resolution 17)—ADA *Bylaws* Amendments for the Joint Commission on National Dental Examinations (*Supplement:4008*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 18**—(Adopt)—ADA *Bylaws* Amendments for the Commission on Continuing Education Provider Recognition (*Supplement:4010*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 19RC**—(Adopt Resolution 19RC in lieu of Resolution 19)—Amendments to Chapter IX, Section A of the ADA *Governance Manual* (*Supplement:4012*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 20**—(Adopt)—Amendments to Chapter IX, Section B of the ADA *Governance Manual* (*Supplement:4015*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 21**—(Adopt)—Amendments to Chapter IX, Section C of the ADA *Governance Manual* (*Supplement:4016*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 22**—(Adopt)—Amendments to Chapter IX, Section E of the ADA *Governance Manual* (*Supplement:4018*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 23**—(Adopt)—Amendments to Chapter IX, Section H of the ADA *Governance Manual* (*Supplement:4020*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 24**—(Adopt)—Amendments to Chapter IX, Section I of the ADA *Governance Manual* (*Supplement:4021*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 25**—(Adopt)—Amendments to Chapter IX, Section L of the ADA *Governance Manual* (*Supplement:4022*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 65RC**—(Adopt Resolution 65RC in lieu of Resolution 65)—Proposed Amendment of the ADA Policy on Early Detection and Prevention of Oral Cancer (*Supplement:4039*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 66**—(Adopt)—Amendment of Policy: Criteria for Recognition of a Certification Board for Dental Assistants (*Supplement:4040*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 67**—(Adopt)—Amendment of Policy: Criteria for Recognition of a Certification Board for Dental Laboratory Technicians (*Supplement:4043*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 68**—(Adopt)—Rescind Policy on Admissions Criteria for Dental Hygiene Programs (*Supplement:4046*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 69**—(Adopt)—Response to Resolution 83-2018: Geriatric Dentistry (*Supplement:4050*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 79**—(Adopt)—Gathering Evidence to Develop Policy Regarding Cannabis Use (*Supplement:4073*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

Dr. Clemente noted an editorial correction to the Report of Reference Committee C, which was displayed for the House. The editorial correction was made to Resolution 19RC in the proposed amendment to the *ADA Governance Manual*, Chapter IX. Commissions, Section A. Members, Selections, Nominations and Elections., Part 1.b., by adding the word “faculty,” so that the proposed amendment to Part 1.b. would read as follows:

- a. Four (4) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a faculty member of a school of dentistry or any dental education program.

Dr. Clemente moved Resolution 90 with the Committee Recommendation to Vote Yes.

Requests were made to remove the following resolutions from the Consent Calendar:

Resolution 17RC removed by Dr. Shelley Barker Olson, North Carolina  
 Resolution 19RC removed by Dr. Stanley D. Halpern, Georgia

Hearing no objection, the amended Resolution 90 was adopted by general consent.

**90H-2019. Resolved**, that the recommendations of Reference Committee C on the following resolutions be accepted by the House of Delegates.

~~**Resolution 17RC**—(Adopt Resolution 17RC in lieu of Resolution 17)—ADA *Bylaws* Amendments for the Joint Commission on National Dental Examinations (*Supplement:4008*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**~~

**Resolution 18**—(Adopt)—ADA *Bylaws* Amendments for the Commission on Continuing Education Provider Recognition (*Supplement:4010*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

~~**Resolution 19RC**—(Adopt Resolution 19RC in lieu of Resolution 19)—Amendments to Chapter IX, Section A of the ADA Governance Manual (*Supplement:4012*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**~~

**Resolution 20**—(Adopt)—Amendments to Chapter IX, Section B of the ADA Governance Manual (*Supplement:4015*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 21**—(Adopt)—Amendments to Chapter IX, Section C of the ADA Governance Manual (*Supplement:4016*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 22**—(Adopt)—Amendments to Chapter IX, Section E of the ADA Governance Manual (*Supplement:4018*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 23**—(Adopt)—Amendments to Chapter IX, Section H of the ADA Governance Manual (*Supplement:4020*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 24**—(Adopt)—Amendments to Chapter IX, Section I of the ADA Governance Manual (*Supplement:4021*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 25**—(Adopt)—Amendments to Chapter IX, Section L of the ADA Governance Manual (*Supplement:4022*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 65RC**—(Adopt Resolution 65RC in lieu of Resolution 65)—Proposed Amendment of the ADA Policy on Early Detection and Prevention of Oral Cancer (*Supplement:4039*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 66**—(Adopt)—Amendment of Policy: Criteria for Recognition of a Certification Board for Dental Assistants (*Supplement:4040*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 67**—(Adopt)—Amendment of Policy: Criteria for Recognition of a Certification Board for Dental Laboratory Technicians (*Supplement:4043*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 68**—(Adopt)—Rescind Policy on Admissions Criteria for Dental Hygiene Programs (*Supplement:4046*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 69**—(Adopt)—Response to Resolution 83-2018: Geriatric Dentistry (*Supplement:4050*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 79**—(Adopt)—Gathering Evidence to Develop Policy Regarding Cannabis Use (*Supplement:4073*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

*Note: For the purpose of a fully documented record, the text of the resolutions presented in Resolution 90H follows.*

**Consent Calendar Resolutions—Adopted/Adopted in Lieu of**

*ADA Bylaws Amendments for the Commission on Continuing Education Provider Recognition*

**18H-2019. Resolved**, that the ADA *Bylaws*, Section 30. Duties, Subsection C. Commission on Continuing Education Provider Recognition be amended as follows (new language underscored, deletions ~~stricken~~):

- 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 an annual budget to the Board of Trustees of the Association. 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.

*Amendments to Chapter IX, Section B of the ADA Governance Manual*

**20H-2019. Resolved**, that ADA *Governance Manual*, Chapter IX. Commissions, Section B. Removal for Cause be amended to grant the commissions sole authority to remove a commissioner for cause as follows (new language underscored, deletions ~~stricken~~):

- B. Removal for Cause.
1. ~~Any of the The Commission commissions of this Association on Dental Accreditation shall have the sole authority to remove a Commission on Dental Accreditation any of its members for cause pursuant to the its Rules Rules of the Commission on Dental Accreditation, with notice of such removal being given. The Commission on Dental Accreditation shall provide notice to the ADA Board of Trustees once the Commission acts to remove a member for cause.~~
  2. ~~The Board of Trustees may remove a member of the Joint Commission on National Dental Examinations, the Commission on Continuing Education Provider Recognition, and the National Commission for Recognition of Dental Specialties and Certifying Boards 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. 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.~~

*Amendments to Chapter IX, Section C of the ADA Governance Manual*

**21H-2019. Resolved**, that the ADA *Governance Manual*, Chapter IX. Commissions, Section C. Eligibility be amended to grant a commission chair the sole authority to declare a position vacant when a commission member ceases to be a member of the selecting organization as follows (new language underscored, deletions ~~stricken~~):

- C. Eligibility.
1. All members of commissions who are dentists must be active, life or retired members in good standing of this Association if eligible, except as otherwise provided in the *Bylaws*.
  2. ~~A member of the Joint Commission on National Dental Examinations selected by the American Association of Dental Boards who ceases to be an active member of that~~

~~organization may continue as a member of the Joint Commission on National Dental Examinations for the balance of that member's term.~~

- ~~3.—~~ If a commission member of one of the ~~Joint Commission on National Dental Examinations~~ selected by the ~~American Dental Education Association~~ ceases to be a member of the organization that selected or elected the commission member, that commission member's faculty of a member school of that organization, the membership on the commission ~~Joint Commission on National Dental Examinations~~ shall terminate, and the ~~President of this Association~~ Chair of the commission shall declare the position vacant.
- ~~3.4.~~ Any organizations that select members to serve on the Commission for Continuing Education Provider Recognition and offer continuing dental education courses must be recognized as a continuing education provider by the commission.
- ~~4.5.~~ No member of a commission may serve concurrently as a member of a council or another commission.
- ~~5.6.~~ 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 or council appointment.

*Amendments to Chapter IX, Section E of the ADA Governance Manual*

**22H-2019. Resolved**, that the *ADA Governance Manual*, Chapter IX. Commissions, Section E. Consultants, Advisors, and Staff be amended to grant the commissions authority to appoint consultants to assist in the administration of their respective programs as follows (new language underscored, deletions ~~stricken~~):

E. Consultants, Advisers and Staff.

1. Consultants and Advisers.

- a. The Commission on Dental Accreditation shall have the power to appoint consultants to assist in developing requirements and guidelines for conducting the accreditation program and accreditation evaluations, including site visitations, of predoctoral, advanced dental education, and allied dental education programs.
- b. ~~The Joint Commission on National Dental Examinations, the Commission on Continuing Education Provider Recognition, and the National Commission on Recognition of Dental Specialties and Certifying Boards 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 the Bylaws or this Governance Manual.~~ The Joint Commission on National Dental Examinations ~~also~~ shall have the power to appoint select consultants to serve on the commission's test construction teams committees and to assist with test administration, test development, test security and test psychometric evaluation.
- c. 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.
- d. The National Commission on Recognition of Dental Specialties and Certifying Boards shall have the power to appoint consultants to assist in the periodic review of dental specialties, the annual review of dental specialty certifying boards, and in conducting appeals.

2. 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.

*Amendments to Chapter IX, Section H of the ADA Governance Manual*

**23H-2019. Resolved**, that the *ADA Governance Manual*, Chapter IX. Commissions, Section H. Meetings of Commissions be amended to grant the commissions authority to conduct meetings in accordance with their *Rules* as follows (new language underscored, deletions ~~stricken~~):

- H. Meetings of Commissions. Each commissions shall conduct meetings in accordance with its Rules. ~~The Joint Commission on National Dental Examinations, the Commission on~~

~~Continuing Education Provider Recognition, and the National Commission on Recognition of Dental Specialties and Certifying Boards shall hold at least one regular meeting annually, provided that funds are available in the budget for that purpose or unless otherwise directed by the Board of Trustees. Meetings may be held at the ADA Headquarters Building, the ADA 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. The Commission on Dental Accreditation shall conduct meetings in accordance with rules and procedures pursuant to the *Rules of the Commission on Dental Accreditation*.~~

*Amendments to Chapter IX, Section I of the ADA Governance Manual*

**24H-2019. Resolved**, that the ADA *Governance Manual* Chapter IX. Commissions, Section I. Quorum be amended to grant the commissions the authority to define a quorum for meetings as follows (new language underscored, deletions ~~stricken~~):

- I. Quorum. A majority of the members of the Joint Commission on National Dental Examinations, the Commission on Continuing Education Provider Recognition, and the National Commission on Recognition of Dental Specialties and Certifying Boards shall constitute a quorum. Quorum requirements for each the Commissions on Dental Accreditation shall be as stated in the Rules of the Commission on Dental Accreditation of that commission.

*Amendments to Chapter IX, Section L of the ADA Governance Manual*

**25H-2019. Resolved**, that the ADA *Governance Manual* Chapter IX. Commissions, Section L. Power to Adopt Rules be amended to grant the commissions the authority to adopt rules as follows (new language underscored, deletions ~~stricken~~):

- 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, Governance and Organizational Manual and Standing Rules for Councils and Commissions* of this Association. ~~Rules and amendments thereto, adopted by the Joint Commission on National Dental Examinations and Commission for Continuing Education Provider Recognition, 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 and the National Commission on Recognition of Dental Specialties and Certifying Boards Commissions shall have the power to adopt rules and amendments thereto pursuant to a two-thirds affirmative vote of the members present and voting. 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.~~

*Proposed Amendment of the ADA Policy on Early Detection and Prevention of Oral Cancer*

**65H-2019. Resolved**, that the ADA Policy on Early Detection and Prevention of Oral Cancer (*Trans.*2014:460) be amended by deletion and addition as follows (additions underscored; deletions ~~stricken~~):

**Early Detection and Prevention of Oral and Oropharyngeal Cancer**

**Resolved**, that the American Dental Association recognizes that early oral and oropharyngeal cancer diagnosis has the potential to have a significant impact on treatment decisions and outcomes, and supports routine visual and tactile examinations for all patients, ~~particularly for patients who are at risk including those who use tobacco or who are heavy consumers of alcohol~~, and be it further **Resolved**, that the Association supports state and local Association-sponsored education activities to promote the prevention and early detection of oral and oropharyngeal cancer. ~~to those who use tobacco, alcohol or both.~~

*Amendment of Policy: Criteria for Recognition of a Certification Board for Dental Assistants*

**66H-2019. Resolved**, that the ADA Policy on Criteria for Recognition of a Certification Board for Dental Assistants (*Trans.*1989:520; 2014:460) be amended as follows (additions underscored; deletions ~~stricken~~):

**Criteria for Recognition of a Certification Board for Dental Assistants**

~~**Introduction:** An area of subject matter responsibility ~~duty~~ of the Council on Dental Education and Licensure as indicated in the *Governance and Operational Manual* ~~Bylaws~~ of the American Dental Association is certifying boards and credentialing of allied dental personnel. The Council ~~to studies~~ and makes recommendations on policy related to the approval or disapproval of national certifying boards for allied dental personnel (each of which is referred to herein after as "the Board").~~

A mechanism should be made available for providing evidence that a dental assistant has acquired the knowledge and ability that is expected of an individual employed as a dental assistant through a program of certification. Such a certification program should be based on the educational requirements for dental assistants approved by the Commission on Dental Accreditation.

The dental profession is committed to assuring appropriate education and training of all personnel who participate in the provision of oral health care to the public. The following basic requirements are ~~prescribed~~ applied by the Council on Dental Education and Licensure for the evaluation of an agency which seeks ~~approval~~ recognition of the American Dental Association for a program to certify dental assistants that reflects on the basis of educational standards approved by the dental profession.

I. Organization

1. The Board shall have no less than five nor more than nine voting members designated on a ~~rotating~~ basis in accordance with a method approved by the Council on Dental Education and Licensure. The following organizations/interests shall be represented on the Board:
  - a. American Dental Assistants Association
  - b. American Dental Association
  - c. American Dental Education Association
  - d. American Association of Dental Boards
  - e. Public
  - f. The at-large population of Board Certificants

All dental assistant members shall be currently certified by the Board.

2. The Board shall submit to the Council on Dental Education and Licensure evidence of adequate financial support to conduct its program of certification.
3. The Board may select suitable consultants or agencies to assist in its operations, such as the preparation and administration of examinations and the evaluation of records and examinations of candidates. Dental assistant consultants should be certified by the Board.
4. The Board shall submit in writing to the Council on Dental Education and Licensure a program sufficiently comprehensive in scope to meet the requirements established by the American Dental

Association for the operation of a certifying board for dental assistants. This statement should include evidence that the Board has the support of the American Dental Assistants Association, the organization representative of dental assistants, as well as other groups within the communities of interest represented by the Board.

## II. Operation of Board

1. The Board shall grant certification to individuals who have provided evidence of knowledge-based competence in dental assisting.
2. The Board shall submit in writing to the Council on Dental Education and Licensure a plan for renewal of certificate currently held by certified persons.
3. The Board shall submit annually to the Council on Dental Education and Licensure data relative to its financial operations, applicant eligibility criteria, examination procedures and pass/fail results of its certifying examination. The Certification Board must establish and maintain documented policies concerning current, prospective and lapsed certificants including, but not limited to: eligibility, application, assessments, certification renewals and appeals. Additionally, the Certification Board must establish, analyze, publish and review examination content outlines which lay the foundation for the knowledge and skills tested on the assessment instruments and provide evidence of validity and reliability.
4. The Board shall administer the certification examinations at least twice each calendar year with administrations publicized at least six months prior to the examination.
5. The Board shall maintain and make available a current list of all persons certified.
6. The Board shall have authority to conduct the certification program; i.e., the Board shall be responsible for evaluating qualifications and competencies of persons certified and for maintaining adequate standards for the annual renewal of certificates. However, proposals for important changes in the examination eligibility criteria or the Board procedures and policies must be circulated reasonably well in advance of consideration to affected communities of interest for review and comment. Proposed changes must have the approval of the Council on Dental Education and Licensure.
7. The Board shall maintain close liaison with the organizations represented on the Board. The Board shall report on its program annually to the organizations represented on the Board.

## III. Granting Certificates

1. In the evaluation of its candidates for certification, the Board shall use standards of education and clinical experience approved by the Commission on Dental Accreditation. The Board shall require for eligibility for certification the successful completion of a dental assisting education program accredited by the Commission on Dental Accreditation, and satisfactory performance on an examination prescribed by the Board.
2. The Board shall grant certification or recertification annually to those who qualify for certification. The Board may require an annual certificate renewal fee to enable it to carry on its program.

## IV. Waivers

It is a basic view of the Council that all persons seeking certification shall qualify for certification by completing satisfactorily a minimum period of approved training and experience and by passing an examination. However, the Council realizes that there may be need for a provision to recognize candidates who do not meet the established eligibility criteria on educational training. Therefore, the Board may make formal requests to the Council on Dental Education and Licensure regarding specific types of waivers which it believes essential for certification and/or certificate renewal. Such requests shall be substantiated and justified to and supported by the

organizations represented on the Board; only waivers approved by the Council on Dental Education and Licensure may be used.

*Amendment of Policy: Criteria for Recognition of a Certification Board for Dental Laboratory Technicians*

**67H-2019. Resolved**, that the ADA Policy on Criteria for Recognition of a Certification Board for Dental Laboratory Technicians (*Trans.*1989:520; 2014:460) be amended as follows (additions underscored; deletions ~~stricken~~):

**Criteria for Recognition of a Certification Board for Dental Laboratory Technicians**

An area of ~~subject matter responsibility~~ duty of the Council on Dental Education and Licensure as indicated in the *Governance and Operational Manual* ~~Bylaws~~ of the American Dental Association is certifying boards and credentialing of allied dental personnel. The Council ~~to study~~ studies and makes recommendations on policy related to the approval or disapproval of national certifying boards for allied dental personnel (each of which is referred to herein after as "the Board").

A mechanism for the examination and certification of dental laboratory technicians is necessary to provide the dental profession with an indication of those persons who have demonstrated their ability to fulfill the dental laboratory work authorization. Such a certification program should be based on the educational requirements for dental laboratory technicians approved by the Commission on Dental Accreditation.

The following basic requirements are applied ~~prescribed~~ by the Council on Dental Education and Licensure for the evaluation of an agency which seeks recognition ~~approval~~ of the American Dental Association for a program to certify dental laboratory technicians on the basis of educational standards approved by the dental profession.

- I. **Organization:** An agency that seeks approval as a Certification Board for Dental Laboratory Technicians should be representative of or affiliated with a national organization of the dental laboratory industry and have authority to speak officially for that organization. It is required that each dental laboratory technician member of the Certification Board hold a certificate in one of the areas of the dental laboratory technology.
- II. **Authority and Purpose:** The rules and regulations established by the Certification Board of Dental Laboratory Technicians will be considered for approval by the Council on Dental Education and Licensure on the basis of these requirements. Changes that are planned in the rules and regulations of the Certification Board should be reported to the Council before they are put into effect. The Board shall submit data annually to the Council on Dental Education and Licensure relative to its financial operations, applicant admission and examination procedures, and results thereof.

The principal functions of the Certification Board shall be:

- a. to determine the levels of education and experience of candidates applying for certification examination within the requirements for education established by the Commission on Dental Accreditation;
  - b. to prepare and administer comprehensive examinations to determine the qualifications of those persons who apply for certification; and
  - c. to issue certificates to those persons who qualify for certification and to prepare and maintain a roster of certificants.
- III. **Qualifications of Candidates:** It will be expected that the minimum requirements established by the Certification Board for the issuance of a certificate will include the following:
    - a. satisfactory legal and ethical standing in the dental laboratory industry;
    - b. graduation from high school or an equivalent acceptable to the Certification Board;

- c. a period of study and training as outlined in the Accreditation Standards for Dental Laboratory Technology Education Programs, plus an additional period of at least two years of working experience as a dental laboratory technician; or, five years of education and/or experience in dental technology; and
- d. satisfactory performance on examination(s) prescribed by the Certification Board.

**IV. Standards:** The Certification Board must establish and maintain documented policies concerning current, prospective and lapsed certificants including, but not limited to: eligibility, application, assessments, certification renewals and appeals. Additionally, the Certification Board must establish, analyze, publish and review examination content outlines which lay the foundation for the knowledge and skills tested on the assessment instruments and provide evidence of validity and reliability.

*Rescind Policy on Admissions Criteria for Dental Hygiene Programs*

**68H-2019. Resolved,** that the ADA Policy on Admissions Criteria for Dental Hygiene Programs (*Trans.*1995:639) be rescinded.

*Response to Resolution 83-2018: Geriatric Dentistry*

**69H-2019. Resolved,** that the findings of the feasibility study conducted by the Council on Dental Education and Licensure be provided to the Special Care Dentistry Association for its consideration in pursuing an accreditation process and accreditation standards for advanced education programs in geriatric dentistry by the Commission on Dental Accreditation.

*Gathering Evidence to Develop Policy Regarding Cannabis Use*

**79H-2019. Resolved,** that the ADA encourage research and data gathering on the effect of cannabis and cannabidiol (CBD) products on the dentition and surrounding oral mucosa, so that policy and guidelines can be developed to help the profession meet the needs of the patients.

**Non-Consent Resolutions**

**ADA Bylaws Amendments for the Joint Commission on National Dental Examinations** (Board of Trustees Resolution 17 and Reference Committee C Resolution 17RC) The Reference Committee reported as follows:

The Reference Committee heard testimony in favor of and opposed to Resolution 17. Those opposed to amending the Joint Commission on National Dental Examination's duties believed that the Joint Commission should remain focused on dental and dental hygiene examinations. Those supporting the resolution believed the amended language would allow for flexibility to administer licensure examinations to other members of the oral health care team in addition to dentists and dental hygienists, and to develop certification exams.

Some members did not support the deletion of the sentence on page 4008, lines 13-15: "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." However, others testified that this statement is reflected in the ADA's Comprehensive Policy on Dental Licensure, adopted by the House of Delegates in 2018: "The state boards of dentistry in each state or licensure jurisdiction are the sole licensure and regulating authorities for all dentists and allied dental personnel." The Reference Committee concluded that the duties of the Joint Commission should be a list of the specific tasks and supported deletion of the sentence.

The Reference Committee noted that the JCNDE and the Council on Dental Education and Licensure support the proposed governance changes as presented in Resolution 17.

After discussion, the Reference Committee revised Section B, subsection (a) to reinsert the phrase “assisting state boards of dental examiners” as one of the purposes of licensure examinations. For clarification purposes the Reference Committee also revised Section B, subsections (a) and (c) to add the word “dentists”.

Therefore, the Reference Committee supports adoption of Resolution 17RC in lieu of Resolution 17.

The wording of Resolution 17RC has been approved by the Speaker of the House of Delegates and the Chair of the Council on Ethics, Bylaws and Judicial Affairs.

**17RC. Resolved**, that the ADA *Bylaws*, Section 30. Duties, Subsection B. Joint Commission on National Dental Examinations, be amended as follows (new language underscored, deletions ~~stricken~~):

- 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~~all purposes, including of assisting state boards of dental examiners in determining qualifications of dentists and other oral health care professionals dentists who seeking certification and/or licensure 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. Make rules and regulations for the conduct of examinations and the certification of successful candidates. ~~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. Serve as a resource ~~of~~ for dentists and other oral health care professionals the dental profession in concerning the development of written examinations. ~~Make rules and regulations for the conduct of examinations and the certification of successful candidates.~~
  - d. Provide a means for a candidate to appeal an adverse decision of the Commission. Serve as a resource of the dental profession in the development of written examinations.
  - e. Submit an annual report to the House of Delegates of this Association and interim reports, on request.
  - f. Submit an annual budget to the Board of Trustees of the Association.

Dr. Clemente moved Resolution 17RC in lieu of Resolution 17 (*Supplement:4008*) with the Committee Recommendation to Vote Yes.

As a point of information, Dr. Steven A. Saxe, Nevada, asked, “I would like clarification, please, from the Speaker on the definition of ‘other oral health care professional’... .” In response, Dr. Anthony J. Ziebert, senior vice president, Education and Professional Affairs, stated, “dental hygiene, dental assisting, dental therapy.” Dr. Saxe asked, “Being that this is the first description of ‘other health care professional’ in all of our policy manuals, all of our bylaws, would this set precedent to be acceptable terminology to be used in the future, for example, mid-levels and all of our other...” Dr. Ziebert responded, “I don’t know.”

Dr. Shelley Barker Olson, North Carolina, moved to amend Resolution 17RC. The Speaker commented that the projection displayed on the screen was not displaying the correct text of Dr. Olson’s amendment. The Speaker requested that the House adjourn the Second Meeting of the House of Delegates and continue debate on Resolution 17RC during the Third Meeting of the House of Delegates.

## **Adjournment**

Dr. Michele L. Frawley, 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 11:51 a.m., Monday, September 9, 2019.

## Monday, September 9, 2019

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### Third Meeting of the ADA House of Delegates

**Call to Order:** The Third Meeting of the 160th Annual Session of the ADA House of Delegates was called to order at 1:00 p.m., Monday, September 9, 2019, 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. Jeffrey M. Cole, president  
Dr. Richard A. Huot, first vice president  
Dr. Glen D. Hall, speaker of the House of Delegates  
Dr. Judith M. Fisch, trustee, First District  
Dr. Raymond A. Cohlma, trustee, Twelfth District  
Dr. Richard C. Black, trustee, Fifteenth 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. Paul R. Leary, trustee, Second District  
Dr. Linda K. Himmelberger, trustee, Third District  
Dr. George R. Shepley, trustee, Fourth District  
Dr. Jay F. Harrington, Jr., trustee, Fifth District  
Dr. Roy Thompson, trustee, Sixth District  
Dr. Billie Sue Kyger, trustee, Seventh District  
Dr. Susan Becker Doroshov, trustee, Eighth District  
Dr. Julio H. Rodriguez, trustee, Ninth District  
Dr. Kenneth McDougall, trustee, Tenth District  
Dr. Linda J. Edgar, trustee, Eleventh District  
Dr. James D. Stephens, trustee, Thirteenth District  
Dr. Kirk M. Norbo, trustee, Sixteenth District  
Dr. Cesar R. Sabates, trustee, Seventeenth District  
Dr. Craig W. Herre, first vice president  
Dr. Ted Sherwin, treasurer  
Dr. Kathleen T. O'Loughlin, executive director

The Speaker recognized Dr. Cole for the purpose of installing the new officers and trustees.

The following new officers and trustees were introduced:

Dr. Richard J. Rosato, trustee, First District  
Dr. Terry Fiddler, trustee, Twelfth District  
Dr. Brett Kessler, trustee, Fourteenth District  
Dr. Craig S. Armstrong, trustee, Fifteenth District  
Dr. Vincent U. Rapini, second vice president  
Dr. W. Mark Donald, speaker of the House of Delegates

*Installation of Officers and Trustees.* Dr. Cole installed Dr. Chad P. Gehani, New York, as ADA President; Dr. Daniel J. Klemmedson, Arizona, as ADA President-elect; Dr. Vincent U. Rapini, Missouri, as second vice president; Dr. W. Mark Donald, Mississippi, as speaker of the House of Delegates; and Drs. Richard Rosato, Terry Fiddler, Brett Kessler and Craig Armstrong as trustees. Dr. Cole extended congratulations to the new officers and trustees.

Additionally, Dr. Cole 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 of Dr. Chad Gehani:** Dr. Gehani addressed the members of the House of Delegates. He thanked his wife, Rekha and his children who were in attendance. His remarks focused on the ADA's support of the dental profession and the oral health of patients. Dr. Gehani shared his personal story of when he and his wife, Rekha, new United States citizens and new members of the ADA, were provided the opportunity to begin practicing dentistry in the U.S. thanks to the help of an ADA member. Dr. Gehani stated, "We wished to achieve our American dream through ownership of our private practice. Thanks to our mentor, an ADA member who offered a room in his office for rent, we forged our way to financial and professional independence. ... We have never forgotten this ADA member's help and throughout our careers, we have paid it forward by mentoring countless young dentists as they get established on their way to fulfilling their dreams. Dentists helping dentists. This is what our ADA is all about."

Dr. Gehani commented on the changing landscape of the dental profession including do-it-yourself dentistry and consumer trends including patient research of dental treatment on the internet. He stated, "The 21st Century patient is decisive, empowered, informed and sometimes misinformed. ... They will shop around for treatment based on what they researched, what they can afford and how many five star reviews a dentist has on the internet. There are some associations that will turn a blind eye to these kinds of changes. Some believe that if they ignore the disruption, it will go away. Some believe that their organizations are too big to fail. Some will succumb to their own anxiety and surrender to the whims of outside forces. This will not happen to our American Dental Association." He added, "So many things have changed in our profession, but there are three constants that will sustain it: A commitment to evidence-based practice, a patient-first philosophy and the dentist at the center of care. Let me emphasize this, the dentist-patient relationship is the tentpole of our profession, and it must be respected."

**Presentation to Dr. Cole:** Dr. Gehani, as the newly installed ADA President, presented Dr. Cole with the insigne of past president and a certificate of appreciation recognizing his dedication to the Association and the dental profession.

The installation ceremony concluded following these presentations.

**Remarks of the Chair of the American Dental Political Action Committee (ADPAC):** Dr. Thomas C. Harrison 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. As a point of personal privilege, Dr. Harrison expressed his appreciation to retiring Speaker, Dr. Glen Hall.

**Report of the Standing Committee on Credentials, Rules and Order:** Dr. Minerva Patel, Committee chair, announced that the Committee had received requests relating to the credentialing of a new delegate and a new alternate delegate. The Committee considered these requests to be the result of extenuating circumstances and recommended that the following individuals be credentialed:

*Delegate*

Dr. Ivan Vazquez Santiago, New York

*Alternate Delegate*

Dr. Mark A. Bauman, New York

Hearing no objection, the Speaker declared the credentials granted.

Dr. Patel announced the presence of quorum and read the ADA Disclosure Policy. As a point of personal privilege, Dr. Patel thanked the Speaker for his years of service as Speaker of the House of Delegates.

## Unfinished Business

### Report of Reference Committee C (Continued)

Dr. Elizabeth A. Clemente, chair, Reference Committee C, returned to the podium to present the Reference Committee's remaining items of business.

### **ADA Bylaws Amendments for the Joint Commission on National Dental Examinations (Continued)** (Board of Trustees Resolution 17 and Reference Committee C Resolution 17RC)

Dr. Shelley Barker Olson, North Carolina, moved to amend Resolution 17RC in Subsection B.a. by adding the words "dentistry and" after the words "state boards of," by deleting the word "determining," and by adding the words "exercising their authority to determine" before the word "qualifications," so that the Subsection would read as follows:

- a. Provide and conduct ~~written~~ examinations, ~~exclusive of clinical demonstrations for the all purposes, including~~ of assisting state boards of dentistry and dental examiners in determining ~~determining~~ exercising their authority to determine qualifications of dentists and other oral health care professionals ~~dentists who seeking certification and/or licensure 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.~~

In speaking to the amendment, Dr. Olson stated, "We in the Sixteenth District believe it is important to affirm that dental licensure falls under the jurisdiction of the individual state boards. Therefore, we recommend this language."

Dr. Ryan M. Vaughn, Georgia, spoke in support of the amendment, stating, "...from the Reference Committee in the comments, it states that the ADA's comprehensive policy on dental licensure, that there is no need for the language in the *Bylaws* describing dental licensure being subject to the laws of states. The problem is, is that these commissions are being—are getting further to an arm's length away much like they're supposed to be streamlining like CODA. CODA has its own set of policies. They will eventually develop their own set of policies within this Joint Commission. With that, if they have their own policies, they don't have to recognize the ADA's policy in this situation, and they can circumvent the whole thing. I think it really needs to state that the jurisdiction of licensure still falls with the states somewhere in these *Bylaws*."

On vote, the proposed amendment to Resolution 17RC was adopted.

Dr. Steven A. Saxe, Nevada, moved to refer Resolution 17RC, as amended, to the appropriate agency for legal consultation and interpretation of the wording of the Resolution. In speaking to the motion to refer, Dr. Saxe said, "I rise in opposition of this resolution. As we strike [out] lines 36 through 43 where it does talk about other health care professionals, such as dental hygiene licensure. I also believe that the ADA should not adopt ill-defined health care professionals, such as...oral health care profession, as the intent of this may be to accept mid-levels and to have dentistry at the table for their licensure and their credentialing and their regulation. I applaud that, but the intent could be misconstrued as some states in the United States are not confronted with this and it gives mid-level dental people a reason to say that the American Dental Association recognizes mid-levels in their policy. And it could be a detriment to those states that do not have this threat, ...and I would like to make a motion to refer this to legal, as they are not able to clearly answer the details of, will this set a precedent in our language of our policy and our *Bylaws*."

On vote, the motion to refer was not adopted.

The Speaker noted that adoption of Resolution 17RC requires a two-thirds affirmative vote. On vote, Resolution 17RC, as amended, was adopted in lieu of Resolution 17.

**17H-2019. Resolved**, that the ADA *Bylaws*, Section 30. Duties, Subsection B. Joint Commission on National Dental Examinations, be amended as follows (new language underscored, deletions ~~stricken~~):

- 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 all~~ purposes, ~~including of assisting state boards of dentistry and dental examiners in determining~~ exercising their authority to determine qualifications of dentists and other oral health care professionals ~~dentists who seeking certification and/or licensure 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. Make rules and regulations for the conduct of examinations and the certification of successful candidates. ~~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. Serve as a resource ~~of for dentists and other oral health care professionals the dental profession in~~ concerning the development of written examinations. ~~Make rules and regulations for the conduct of examinations and the certification of successful candidates.~~
  - d. Provide a means for a candidate to appeal an adverse decision of the ~~Commission. Serve as a resource of the dental profession in the development of written examinations.~~
  - e. Submit an annual report to the House of Delegates of this Association and interim reports, on request.
  - f. Submit an annual budget to the Board of Trustees of the Association.

**Amendments to Chapter IX, Section A of the ADA Governance Manual** (Board of Trustees Resolution 19 and Reference Committee C Resolution 19RC) The Reference Committee reported as follows:

The Reference Committee heard testimony supportive of Resolution 19, however there were comments made during the hearing suggesting that the criteria for selection of commission members did not include faculty who work in dental education programs other than dental schools. Therefore, the Reference Committee revised the language in Resolution 19 to include faculty in all dental education programs.

The Reference Committee supports adoption of Resolution 19RC in lieu of Resolution 19.

The wording of Resolution 19RC has been approved by the Speaker of the House of Delegates and the Chair of the Council on Ethics, Bylaws and Judicial Affairs.

**19RC. Resolved**, that the ADA *Governance Manual*, Chapter IX. Commissions, Section A. Members, Selections, Nominations and Elections be amended to common language across all commissions for nomination and selection of ADA, ADEA and AADB members as follows (new language underscored, deletions ~~stricken~~):

- A. Members, Selections, Nominations and Elections.
  1. Commission on Dental Accreditation. The number of and the method of selection of members of the Commission on Dental Accreditation shall be governed by the *Rules of the Commission on Dental Accreditation*, ~~except that twelve~~ Twelve (12) of the members of the Commission on Dental Accreditation shall be selected as follows:
    - a. ~~Four (4) members shall be selected from nominations of active, life or retired members of this Association, with the nominations open to all trustee districts. None of the nominees 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. Four (4) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the~~

- appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency.
- b. Four (4) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a faculty member of a faculty of a school of dentistry any dental education program.
  - c. Four (4) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the ~~American Association of Dental Boards~~ American Dental Education Association. None of these members shall be a member of any state board of dental examiners or jurisdictional dental licensing agency.
2. Joint Commission on National Dental Examinations. The number of and the method of selection of members of the Joint Commission on National Dental Examinations shall be governed by the Rules of the Joint Commission on National Dental Examinations, except that twelve (12) members shall be selected as follows: 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. Additional nominations of active, life or retired members may be made by the House of Delegates. None of the ADA 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. Three (3) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency.~~
  - b. Six (6) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a ~~member of a faculty of a school of dentistry~~ faculty member of any dental education program.
  - c. Three (3) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the American Dental Education Association. None of these members shall be a member 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.~~
3. Commission for Continuing Education Provider Recognition. The number of and the method of selection of members of the Commission for Continuing Education Provider Recognition shall be governed by the Rules of the Commission for Continuing Education Provider Recognition, except that six (6) members shall be selected as follows: The Commission for Continuing Education Provider Recognition shall be composed of sixteen (16) members selected as follows:
- a. ~~Four (4) members shall be selected from nominations of active, life or retired members of this Association, with the nominations open to all trustee districts. Four (4) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency. At least two (2) of the members nominated appointed shall be general dentists, who shall be selected from nominations open to all trustee districts from the active, life or retired members of the 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 member of the American Association of Dental Boards and also, if eligible, an active, life or retired member of this Association shall be selected by the American Association of Dental Boards.
  - c. One (1) member who is an active member of the American Dental Education Association and also, if eligible, an active, life or retired member of this Association shall be selected by the American Dental Education Association.
  - d. ~~One (1) member who is an active member of the American Society of Constituent Dental Executives and also, if eligible, an active, life or retired member of this Association shall be selected by the American Society of Constituent Dental Executives.~~
  - e. ~~One (1) member who is an active, life or retired member of this Association shall be selected by the sponsoring organization of each ADA dental specialty recognized by the ADA.\*~~
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 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 Chapter 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.

\* 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 30H-2017 that established this Commission. This footnote shall expire without further action at the adjournment sine die of the 2021 House of Delegates.

Dr. Clemente moved Resolution 19RC in lieu of Resolution 19 (*Supplement:4012*) with the Committee Recommendation to Vote Yes.

Dr. Stanley D. Halpern, Georgia, moved to amend Resolution 19RC in Subsection 1.a. so that the Subsection would read as follows:

1. Commission on Dental Accreditation. The number of and the method of selection of members of the Commission on Dental Accreditation shall be governed by the *Rules of the Commission on Dental Accreditation*, ~~except that twelve~~ Twelve (12) of the members of the Commission on Dental Accreditation shall be selected as follows:
  - a. Four (4) members shall be selected from nominations of active, life or retired members of this Association, with the nominations open to all trustee districts. None of the nominees shall be a faculty member of any dental education program 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. ~~Four (4) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency.~~

In speaking to the amendment, Dr. Halpern stated, "...This amendment will maintain oversight by our House. If this amendment fails and the resolution passes, these four members will be appointed by the Board of Trustees and not voted on by our House. ...the resolution as stated before the amendment says that the Board of Trustees will appoint four members from the American Dental Association, whereas the amendment keeps it like it has been previously, which is for the Board of Trustees to nominate four members, and those members will be voted upon by the House of Delegates. We would like to maintain this oversight as it has been previously, and that's what this amendment will do."

As a point of information, Dr. I. Jay Freedman, Pennsylvania, asked, "If an individual was not approved by the House, the way this is formatted...for that position to be filled in, would it go back to the Board of Trustees to submit another name?"

The Speaker responded, "The way things work now is that the Board nominates and the House elects. If there is only one nomination for a position, that person is declared elected, and there is no formal vote by the House. ...there's no provision for nominations to occur except through the Board of Trustees."

On vote, the proposed amendment was not adopted.

The Speaker noted that adoption of Resolution 19RC requires a two-thirds affirmative vote. On vote, Resolution 19RC was adopted in lieu of Resolution 19.

**19H-2019. Resolved**, that the ADA *Governance Manual*, Chapter IX. Commissions, Section A. Members, Selections, Nominations and Elections be amended to common language across all commissions for nomination and selection of ADA, ADEA and AADB members as follows (new language underscored, deletions ~~stricken~~):

A. Members, Selections, Nominations and Elections.

1. Commission on Dental Accreditation. The number of and the method of selection of members of the Commission on Dental Accreditation shall be governed by the *Rules of the Commission on Dental Accreditation*, ~~except that twelve~~ Twelve (12) of the members of the Commission on Dental Accreditation shall be selected as follows:
  - a. ~~Four (4) members shall be selected from nominations of active, life or retired members of this Association, with the nominations open to all trustee districts. None of the nominees 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. Four (4) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency.~~
  - b. Four (4) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a faculty member of a faculty of a school of dentistry any dental education program.
  - c. Four (4) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the ~~American Association of Dental Boards~~ American Dental Education Association. None of these members shall be a member of any state board of dental examiners or jurisdictional dental licensing agency.
2. Joint Commission on National Dental Examinations. The number of and the method of selection of members of the Joint Commission on National Dental Examinations shall be governed by the *Rules of the Joint Commission on National Dental Examinations*, except that twelve (12) members shall be selected as follows: 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. Additional nominations of active, life or retired members may be made by the House of Delegates. None of the ADA 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. Three (3) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency.~~
  - b. Six (6) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a ~~member of a faculty of a school of dentistry~~ faculty member of any dental education program.
  - c. Three (3) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the American Dental Education Association. None of these members shall be a member 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.~~
3. Commission for Continuing Education Provider Recognition. The number of and the method of selection of members of the Commission for Continuing Education Provider Recognition shall be governed by the *Rules of the Commission for Continuing Education Provider Recognition*, except that six (6) members shall be selected as follows: The Commission for Continuing Education Provider Recognition shall be composed of sixteen (16) members selected as follows:
- a. ~~Four (4) members shall be selected from nominations of active, life or retired members of this Association, with the nominations open to all trustee districts. Four (4) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency. At least two (2) of the members nominated appointed shall be general dentists, who shall be selected from nominations open to all trustee districts from the active, life or retired members of the 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 member of the American Association of Dental Boards and also, if eligible, an active, life or retired member of this Association shall be selected by the American Association of Dental Boards.
  - c. One (1) member who is an active member of the American Dental Education Association and also, if eligible, an active, life or retired member of this Association shall be selected by the American Dental Education Association.
  - d. ~~One (1) member who is an active member of the American Society of Constituent Dental Executives and also, if eligible, an active, life or retired member of this Association shall be selected by the American Society of Constituent Dental Executives.~~
  - e. ~~One (1) member who is an active, life or retired member of this Association shall be selected by the sponsoring organization of each ADA dental specialty recognized by the ADA.<sup>2</sup>~~
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 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 Chapter 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.

\* 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 30H-2017 that established this Commission. This footnote shall expire without further action at the adjournment sine die of the 2021 House of Delegates.

### Report of Reference Committee D (Legislative, Health, Governance and Related Matters)

The Report of Reference Committee D was presented by Dr. Bruce R. Hutchison, Virginia, chair. The other members of the Committee were: Dr. Barry D. Curry, Kentucky; Dr. Karen G. Glerum, Florida; Dr. Michael H. Halasz, Ohio; Dr. Denise D. Hale, Illinois; Dr. Gabriel B. Holdwick, Michigan; Dr. James E. Jacobs, New York; Dr. Tam H. Le, Connecticut; and Dr. Stephanie L. Sandretti, California.

**Consent Calendar** (Reference Committee D Resolution 89) The Reference Committee report as follows:

The appended Resolution 89 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 89, 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.

**89. Resolved**, that the recommendations of Reference Committee D on the following resolutions be accepted by the House of Delegates.

**Resolution 1**—(Adopt)—Amendment of the ADA *Bylaws* to Clarify Chair Voting (*Supplement:5000*)

\$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 2**—(Adopt)—Amendment of ADA Conflict of Interest Disclosure Policy

(*Supplement:5001*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 4**—(Adopt)—Amendment of the *Governance and Organizational Manual: Eligibility Requirements for the Office of Treasurer (Supplement:5006)* \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 36**—(Adopt)—Proposed Policy, Federal Student Loan Programs (*Supplement:5018*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 37**—(Adopt)—Proposed Policy, Federal Student Loan Repayment Incentives (*Supplement:5021*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 38**—(Adopt)—Proposed Policy, Tax Treatment of Student Loan Interest, Scholarships and Stipends (*Supplement:5023*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 39**—(Adopt)—Proposed Policy, General, Pediatric and Public Health Dental Residency Programs (*Supplement:5025*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 41**—(Adopt)—Proposed Policy, Tax Treatment of Employer-Paid Fringe Health Benefits (*Supplement:5030*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 42**—(Adopt)—Proposed Policy, Tax Treatment of Professional Dues (*Supplement:5032*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 43**—(Adopt)—Amendment of the Policy, Legislative Assistance by the Association (*Supplement:5034*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 44**—(Adopt)—Amendment of the Policy, Inclusion of Members of Congress in Health Care Legislation (*Supplement:5035*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 46**—(Adopt)—Rescission of the Policy, Enforcement of State Dental Practice Acts (*Supplement:5038*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 47**—(Adopt)—Rescission of the Policy, Funding and Authority for Patient Protection (*Supplement:5040*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 57**—(Adopt)—Rescission of the Policy, Standard Benefit Package (*Supplement:5060*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 59**—(Adopt)—Rescission of the Policy, State Responsibility for Health, Safety and Welfare (*Supplement:5064*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 61**—(Adopt)—Rescission of the Policy, Testimony by Component and Constituent Societies (*Supplement:5068*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 63**—(Adopt)—Rescission of the Policy, Cooperation of ADA and Constituent Societies in Development of State Health Care Reform (*Supplement:5072*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 71**—(Adopt)—Amendment of Chapter V., Section E.2. of the *Governance Manual – Pilot Programs* (*Supplement:5077*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 73**—(Adopt)—Amendment of the *ADA Bylaws and Governance Manual* to Revise the Committee Structure of the ADA (*Supplement:5079*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 78**—(Adopt)—Response to Resolution 55H-2018: Establishing a Culture of Safety in Dentistry (*Supplement:5088*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 82**—(Not Adopt)—Attracting New Dental Educators (*Supplement:5098*) \$: None  
**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 83**—(Adopt)—Availability of ADA Publication Fluoridation Facts (*Supplement:5100*) \$33,000; Amount On-going \$33,000; Net Dues Impact \$0.32  
**COMMITTEE RECOMMENDATION: Vote Yes**

Dr. Hutchison moved Resolution 89 with the Committee Recommendation to Vote Yes.

Requests were made to remove the following resolutions from the Consent Calendar:

Resolution 43 removed by Dr. Sidney R. Tourial, Georgia  
Resolution 71 removed by Dr. Ben W. Jernigan, Jr., Georgia  
Resolution 78 removed by Dr. Christopher J. Cuomo, New York

Hearing no objection, the amended Resolution 89 was adopted by general consent.

**89H-2019. Resolved**, that the recommendations of Reference Committee D on the following resolutions be accepted by the House of Delegates.

**Resolution 1**—(Adopt)—Amendment of the *ADA Bylaws* to Clarify Chair Voting (*Supplement:5000*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 2**—(Adopt)—Amendment of ADA Conflict of Interest Disclosure Policy (*Supplement:5001*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 4**—(Adopt)—Amendment of the *Governance and Organizational Manual: Eligibility Requirements for the Office of Treasurer* (*Supplement:5006*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 36**—(Adopt)—Proposed Policy, Federal Student Loan Programs (*Supplement:5018*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 37**—(Adopt)—Proposed Policy, Federal Student Loan Repayment Incentives (*Supplement:5021*) \$: None  
**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 38**—(Adopt)—Proposed Policy, Tax Treatment of Student Loan Interest, Scholarships and Stipends (*Supplement:5023*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 39**—(Adopt)—Proposed Policy, General, Pediatric and Public Health Dental Residency Programs (*Supplement:5025*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 41**—(Adopt)—Proposed Policy, Tax Treatment of Employer-Paid Fringe Health Benefits (*Supplement:5030*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 42**—(Adopt)—Proposed Policy, Tax Treatment of Professional Dues (*Supplement:5032*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

~~**Resolution 43**—(Adopt)—Amendment of the Policy, Legislative Assistance by the Association (*Supplement:5034*) \$: None~~

~~**COMMITTEE RECOMMENDATION: Vote Yes**~~

**Resolution 44**—(Adopt)—Amendment of the Policy, Inclusion of Members of Congress in Health Care Legislation (*Supplement:5035*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 46**—(Adopt)—Rescission of the Policy, Enforcement of State Dental Practice Acts (*Supplement:5038*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 47**—(Adopt)—Rescission of the Policy, Funding and Authority for Patient Protection (*Supplement:5040*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 57**—(Adopt)—Rescission of the Policy, Standard Benefit Package (*Supplement:5060*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 59**—(Adopt)—Rescission of the Policy, State Responsibility for Health, Safety and Welfare (*Supplement:5064*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 61**—(Adopt)—Rescission of the Policy, Testimony by Component and Constituent Societies (*Supplement:5068*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 63**—(Adopt)—Rescission of the Policy, Cooperation of ADA and Constituent Societies in Development of State Health Care Reform (*Supplement:5072*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

~~**Resolution 71**—(Adopt)—Amendment of Chapter V., Section E.2. of the *Governance Manual*—Pilot Programs (*Supplement:5077*) \$: None~~

~~**COMMITTEE RECOMMENDATION: Vote Yes**~~

**Resolution 73**—(Adopt)—Amendment of the ADA *Bylaws* and *Governance Manual* to Revise the Committee Structure of the ADA (*Supplement:5079*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 78**—(Adopt)—Response to Resolution 55H-2018: Establishing a Culture of Safety in Dentistry (*Supplement:5088*) \$: None

**COMMITTEE RECOMMENDATION: Vote Yes**

**Resolution 82**—(Not Adopt)—Attracting New Dental Educators (*Supplement:5098*)

\$: None

**COMMITTEE RECOMMENDATION: Vote No**

**Resolution 83**—(Adopt)—Availability of ADA Publication Fluoridation Facts (*Supplement:5100*)

\$33,000; Amount On-going \$33,000; Net Dues Impact \$0.32

**COMMITTEE RECOMMENDATION: Vote Yes**

*Note: For the purpose of a fully documented record, the text of the resolutions presented in Resolution 89H follows.*

**Consent Calendar Resolutions—Adopted**

*Amendment of the ADA Bylaws to Clarify Chair Voting*

**1H-2019. Resolved**, that CHAPTER V. BOARD OF TRUSTEES, *Section* 110. OFFICERS, B. DUTIES, a. CHAIR, of the ADA *Bylaws* be amended as follows (additions underscored; deletions ~~stricken through~~):

B. DUTIES.

- a. CHAIR. The Chair shall preside at all meetings of the Board of Trustees. The Chair may vote only in the event of a tie vote on a ballot to fill a single position from among multiple candidates. ~~The Chair may cast a vote only in instances where there is a tie vote and the tie does not by itself determine the outcome of the vote.~~

*Amendment of ADA Conflict of Interest Disclosure Policy*

**2H-2019. Resolved**, that the ADA Conflict of Interest Policy (Disclosure Policy) (*Trans.*2010:624; 2011:537; 2013:341) be amended as follows: (additions underscored, deletions ~~stricken through~~):

**Resolved**, that chairs of any meeting of the ADA, including Executive Committee, Board of Trustees, councils, committees and the House of Delegates include the disclosure policy as a written part of the agenda at each meeting:

In accordance with the ADA Disclosure Policy, ~~at this time~~ at the appropriate time anyone present at this meeting is obligated to disclose any personal, professional or business relationship that they or their immediate family may have with a company, professional organization or individual doing business with the ADA, when such company, professional organization or person is being discussed. This includes, but is not limited to insurance companies, sponsors, exhibitors, vendors and contractors.

and be it further

**Resolved**, that the disclosure policy be read at the opening of each meeting of the House of Delegates, and be it further

**Resolved**, that when speaking on the floor of the House of Delegates or in Reference Committees, those individuals/members shall first identify those relationships before speaking on an issue related to such conflict of interest.

*Amendment of the Governance and Organizational Manual: Eligibility Requirements for the Office of Treasurer*

**4H-2019. Resolved**, that *The Governance and Operational Manual*, Ch. VI, Section A. be amended as follows (additions underscored, deletions ~~stricken through~~):

- A. Eligibility. Only an active, life or retired member, in good standing, of this Association shall be eligible to serve as an elective officer. No trustee or other elected officer is eligible to serve simultaneously as Treasurer or Speaker of the House of Delegates. Trustees and elective officers may not apply for the office of Treasurer while serving in any of those offices, except that the Treasurer may apply for a second term as set forth elsewhere in this chapter of the Governance Manual.

*Proposed Policy, Federal Student Loan Programs*

### Federal Student Loan Programs

**36H-2019. Resolved**, that the American Dental Association supports the federal graduate and professional degree student loan programs authorized under the Higher Education Act of 1965, with an emphasis on:

1. Protecting access to federal Direct Unsubsidized Stafford Loans (Direct Loans) and Grad PLUS loans for graduate and professional degree students.
2. Reinstating eligibility for graduate and professional degree students to take advantage of federal Direct Subsidized Stafford Loans.
3. Removing annual and cumulative borrowing limits on federal student loans.
4. Lowering the interest rates and fees on federal student loans.
5. Capping total amount of interest that can accrue on federal student loans.
6. Halting the accrual of federal student loan interest while a dentist is completing a medical/dental internship or residency.
7. Extending the period of federal student loan deferment until after a new dentist has completed his or her medical/dental internship or residency.
8. Permitting federal graduate student loans to be refinanced more than once.
9. Simplifying and adding more transparency to the federal graduate student loan application process.
10. Encouraging institutions of higher education and lenders to offer training to help students make informed decisions about how to finance their graduate education.
11. Encouraging collaborative approaches to handling borrowers who fail (or are at risk of failing) to fully repay their federal student loan(s) in the required time period.

and be it further

**Resolved**, that the ADA's position on allowing private lenders to have a role in the federal student loan program shall depend on whether the loan terms and conditions and borrower protections are guaranteed to be as favorable or better than the existing system of federal student loans, and be it further

**Resolved**, that the ADA supports strengthening federal regulations for the protection of all student loan borrowers, and be it further

**Resolved**, that the policy entitled Advocacy for Graduate Student Loan Programs (*Trans.2014:512*) be rescinded.

*Proposed Policy, Federal Student Loan Repayment Incentives*

### Federal Student Loan Repayment Incentives

**37H-2019. Resolved**, that the American Dental Association supports using state and federal funds to provide payments toward a dental professional's outstanding federal student loans in exchange for practicing in underserved areas, entering and remaining in public service and academic teaching and research positions, and filling other gaps in areas of national need, and be it further

**Resolved**, that the ADA supports removing barriers that prohibit those with private graduate student loans from taking advantage of state and federal student loan repayment programs, and be it further

**Resolved**, that the policies entitled Advocacy for Student Loan Forgiveness and Other Educational Debt Reduction Programs (*Trans.*2014:502) and Use of Federal and State Funds to Provide Loan Repayments to Dentists (*Trans.*1992:599; 2016:319) be rescinded.

*Proposed Policy, Tax Treatment of Student Loan Interest, Scholarships and Stipends*

#### **Tax Treatment of Student Loan Interest, Scholarships and Stipends**

**38H-2019. Resolved**, that the American Dental Association supports the tax deductibility of interest on health profession student loans, and be it further

**Resolved**, that the ADA supports a tax exemption for scholarship assistance and stipends awarded to health professions students under federal programs, and be it further

**Resolved**, that the policies entitled Tax Deductibility of Interest on Health Profession Student Loans (*Trans.*1995:648) and Tax Exemptions for Scholarships and Stipends (*Trans.*1976:892) be rescinded.

*Proposed Policy, General, Pediatric and Public Health Dental Residency Programs*

#### **General, Pediatric and Public Health Dental Residency Programs**

**39H-2019. Resolved**, that the American Dental Association supports using state and federal funds to support general, pediatric, and public health dental residency programs, including those authorized under Title VII of the Public Health Service Act, for dentists to obtain extended clinical training and experience in facilities that provide a disproportionate level of care to the underserved, and be it further

**Resolved**, that the policy entitled Advocacy for Dental Education Infrastructure (*Trans.*2014:502) be rescinded.

*Proposed Policy, Tax Treatment of Employer-Paid Fringe Health Benefits*

#### **Tax Treatment of Employer-Paid Fringe Health Benefits**

**41H-2019. Resolved**, that the American Dental Association is opposed to all forms of taxes on health care services, including employer-paid fringe health benefits, and be it further

**Resolved**, that the policy entitled Opposition to Taxation of Health Care Services and Fringe Benefits (*Trans.*1969:325; 1982:549) be rescinded.

*Proposed Policy, Tax Treatment of Professional Dues*

#### **Tax Treatment of Professional Dues**

**42H-2019. Resolved**, that the American Dental Association supports policies that would allow employed professionals to deduct certain professional expenses, such as the full amount of dues paid to professional organizations, from their income taxes,

and be it further

**Resolved**, that the policy entitled Tax Deductibility of Dues Paid to Professional Dental Organizations (*Trans.*1987:520) be rescinded.

*Amendment of the Policy, Inclusion of Members of Congress in Health Care Legislation*

**44H-2019. Resolved**, that the policy entitled Inclusion of Members of Congress in Health Care Legislation (*Trans.*1993:718) be amended to read as follows (additions are underscored; deletions are ~~stricken~~):

**Resolved**, that the American Dental Association ~~communicate with other health care and public interest organizations the concept that~~ supports including all members of Congress and all federal employees ~~must be included~~ in any comprehensive health care legislation passed for the population as a whole.

*Rescission of the Policy, Enforcement of State Dental Practice Acts*

**46H-2019. Resolved**, that the policy entitled Enforcement of State Dental Practice Acts (*Trans.*1976:921) be rescinded.

*Rescission of the Policy, Funding and Authority for Patient Protection*

**47H-2019. Resolved**, that the policy entitled Funding and Authority for Patient Protection (*Trans.*1983:560) be rescinded.

*Rescission of the Policy, Standard Benefit Package*

**57H-2019. Resolved**, that the policy entitled Standard Benefit Package (*Trans.*1993:665) be rescinded.

*Rescission of the Policy, State Responsibility for Health, Safety and Welfare*

**59H-2019. Resolved**, that the policy entitled State Responsibility for Health, Safety and Welfare (*Trans.*1978:530) be rescinded.

*Rescission of the Policy, Testimony by Component and Constituent Societies*

**61H-2019. Resolved**, that the policy entitled Testimony by Component and Constituent Societies (*Trans.*1979:637) be rescinded.

*Rescission of the Policy, Cooperation of ADA and Constituent Societies in Development of State Health Care Reform*

**63H-2019. Resolved**, that the policy entitled Cooperation of ADA and Constituent Societies in Development of State Health Care Reform (*Trans.*1995:652) be rescinded.

*Amendment of the ADA Bylaws and Governance Manual to Revise the Committee Structure of the ADA*

**73H-2019. Resolved**, that Chapter X. SPECIAL COMMITTEES of the ADA *Bylaws* be stricken in its entirety and replaced by a new CHAPTER X., entitled COMMITTEES, SPECIAL COMMITTEES AND SUBCOMMITTEES, as set forth below (additions underscored):

**CHAPTER X • COMMITTEES, SPECIAL COMMITTEES AND SUBCOMMITTEES**

Section 10. COMMITTEES. A committee is a group having ongoing duties, assignments or responsibilities that are specified in the *Bylaws* or the *Governance Manual* or has duties delegated to it by the agency establishing the committee.

- A. ESTABLISHMENT AND DUTIES. The House of Delegates and Board of Trustees may establish committees. The resolution establishing a committee shall specify duties and scope of responsibility of the committee, which thereafter shall be set forth in the rules of the body establishing the committee.
- B. MEMBERSHIP AND MEMBER APPOINTMENT, TERM AND TENURE. The resolution establishing a committee shall specify the number and type of committee members and their term, tenure and method of selection, which thereafter shall be set forth in the rules of the body establishing the committee. If a committee is delegated duties otherwise assigned to the Board of Trustees, a majority of the members of the committee shall be members of the Board of Trustees.
- C. RULES OF OPERATION. The rules of operation and procedures of committees shall be as set forth in the *Governance Manual* and the rules of body establishing the committee.

- D. FUNDING. Unless otherwise specified in the resolution establishing a committee, any funding required by the committee to fulfill its duties and responsibilities shall be the responsibility of the body establishing the committee.
- E. REPORTING. All reports of a committee shall be directed to the body that established the committee.
- F. PRIVILEGE OF THE FLOOR. Chairs and members of committees who are not members of the House of Delegates shall have the right to participate in the debate on any reports originating with their respective committees but shall have no other rights unless that person is a duly credentialed delegate or alternate delegate.

Section 20. SPECIAL COMMITTEE. A special committee is a group formed to perform tasks not otherwise assigned by the *Bylaws* or the *Governance Manual*. A special committee will cease to exist at the earlier of the completion of its assigned tasks or at the adjournment *sine die* of the annual session of the House of Delegates following its creation.

- A. ESTABLISHMENT AND DUTIES. The House of Delegates, Board of Trustees, ~~and~~ councils and commissions of the ADA may establish special committees. The resolution or motion establishing a special committee shall specify the tasks and scope of responsibility assigned to the special committee.
- B. MEMBERSHIP AND MEMBER APPOINTMENT, TERM AND TENURE. The resolution or motion establishing a special committee shall specify the number and type of committee members, their method of selection and the term and tenure of members of the Committee.
- C. RULES OF OPERATION. The rules of operation and procedures of special committees shall be as set forth in the *Governance Manual* and the rules of body establishing the special committee.
- D. FUNDING. Unless otherwise specified in the resolution or motion establishing a special committee, any funding required by the special committee to fulfill its assigned tasks shall be the responsibility of the body establishing the special committee.
- E. REPORTING. All reports of a special committee shall be directed to the body that established the committee.
- F. PRIVILEGE OF THE FLOOR. Chairs and members of special committees who are not members of the House of Delegates shall have the right to participate in the debate on any reports originating with their respective special committees but shall have no other rights unless that person is a duly credentialed delegate or alternate delegate.

Section 30. SUBCOMMITTEE. A subcommittee is a subgroup of a body created for a specific purpose within the jurisdiction of the creating body. It may have authority delegated to it by the creating body.

- A. ESTABLISHMENT AND DUTIES. Committees of the House of Delegates, committees of the Board of Trustees, councils and commissions of the ADA may establish subcommittees. The resolution or motion establishing a subcommittee shall specify the tasks and scope of responsibility assigned to the subcommittee.
- B. MEMBERSHIP AND MEMBER APPOINTMENT, TERM AND TENURE. Members of a subcommittee shall be limited to members of the body establishing the subcommittee. The resolution or motion establishing a subcommittee shall specify the number of members and their method of selection.

- C. RULES OF OPERATION. The rules of operation and procedures of subcommittee shall be the same as the body that established the subcommittee, unless otherwise specified in the *Governance Manual* or the rules of body that established the special committee.
- D. FUNDING. Any funding required by the subcommittee to fulfill its assigned tasks shall be the responsibility of the body establishing the subcommittee.
- E. REPORTING. All reports of a subcommittee shall be directed to the body that established the subcommittee.

and be it further

**Resolved**, that the title of CHAPTER X. of the *Governance Manual* be revised as shown below (additions underscored):

**CHAPTER X. COMMITTEES, SPECIAL COMMITTEES AND SUBCOMMITTEES**

and be it further

**Resolved**, that CHAPTER III. HOUSE OF DELEGATES, Section 110. COMMITTEES of the *Bylaws* be amended as follows (deletions ~~stricken through~~):

**CHAPTER III • HOUSE OF DELEGATES**

\* \* \*

Section 110. COMMITTEES:

- A. ~~STANDING COMMITTEES.~~ The standing committees of the House of Delegates shall be the Committee on Constitution and Bylaws, the Committee on Credentials, Rules and Order and such Reference Committees as shall in the determination of the Speaker of the House of Delegates be necessary to complete the business of the House of Delegates. ~~The composition and duties of the standing committees of the House of Delegates shall be as stated in the Manual of the House of Delegates.~~
- B. ~~SPECIAL COMMITTEES.~~ The composition of special committees formed by the House of Delegates shall be determined by the Speaker of the House of Delegates. The duties of any special committee shall be as specified by the House of Delegates, but may only include duties not otherwise assigned by these Bylaws. Any special committee created by the House of Delegates shall exist until the duties assigned to it are fulfilled or until adjournment sine die of the House of Delegates session immediately following the session at which it was appointed, whichever first occurs.

and be it further

**Resolved**, that CHAPTER V. BOARD OF TRUSTEES, Section 70. POWERS, Subsection K. be amended as shown below (deletions ~~stricken through~~, additions underlined):

**CHAPTER V • BOARD OF TRUSTEES**

\* \* \*

*Section 70.* POWERS: The Board of Trustees shall be the managing body of the Association, vested with power to:

\* \* \*

- K. ~~Appoint its members to committees that shall have the power to perform any duty that the Board of Trustees may lawfully delegate.~~ Delegate any of its duties that can be lawfully delegated to one or more committees of the Board of Trustees.

and be it further

**Resolved**, that the ADA policy entitled Definitions of Committees (*Trans.*2001:447; 2013:340; 2018:359) be rescinded.

*Availability of ADA Publication Fluoridation Facts*

**83H-2019. Resolved**, that the American Dental Association publication, Fluoridation Facts, be made available, in its digital format, at no cost to the public.

**Consent Calendar Resolutions—Not Adopted**

*Attracting New Dental Educators*

**82. Resolved**, that the ADA explore innovative models to attract recently graduated or retired dentists into academic settings, and be it further

**Resolved**, that the ADA should support federal legislation that is meant to attract dentists to academic settings.

**Non-Consent Resolutions**

**Amendment of the *Organization and Rules of the Board of Trustees: Recorded Board Votes:*** (Board of Trustees Resolution 3 and Reference Committee D Resolution 3RC): The Reference Committee reported as follows:

The Reference Committee heard substantial testimony that was opposed to the resolution, based on the arguments that requiring the disclosure of the votes of individual trustees supports the principles of transparency and accountability and because the voting records of trustees who later run for office are helpful in deciding whether those candidates for office should be supported. There was also considerable testimony that was supportive of not continuing to require the disclosure of individual votes, but only if the overall vote tally of the Board of Trustees was provided so that the general position of the Board could be ascertained – i.e., whether the vote of the Board was unanimous or whether an issue was closely contested. The testimony supportive of discontinuing the requirement of the disclosure of individual votes expressed the view that disclosing a vote tally only would allow trustees to vote according to what is truly best for the ADA without regard for the optics of their individual votes.

The Reference Committee engaged in substantial discussion of the issues surrounding this resolution. The Committee reasoned that, if a resolution is controversial or that some other compelling reason exists for publishing individual votes on a resolution, a roll call vote can always be requested by any voting member of the Board of Trustees. The Committee also believes that a member can discover how any trustee votes on an issue simply by asking that question of the trustee. Additional information concerning the Board's consideration of any resolution may be discovered by reviewing the minutes of the meeting of the Board of Trustees at which the resolution was considered.

Ultimately, the Reference Committee proposes an amendment to Resolution 3 so that it unambiguously states that a general vote tally on the Board's consideration of resolutions is required, as follows:

**3RC. Resolved**, that Resolution 88H-1981, Requiring Recording by Name of All Votes of the Board of Trustees (*Trans.*1981:607), be amended as follows (additions underscored; deletions ~~stricken~~ through):

**Resolved**, that the Board of Trustees be encouraged to vote on all matters when requested to do so, and be it further

**Resolved**, that on ADA Board of Trustees reports, white papers, resolutions or recommendations to the House of Delegates the vote tally reflecting the overall recommendation of the Board of Trustees be provided to the House of Delegates. ~~individual trustee vote will be recorded by name, and be it further~~

**Resolved**, that ~~on all votes of the Board of Trustees all abstentions and absences will be recorded by name.~~

Dr. Hutchison moved Resolution 3RC in lieu of Resolution 3 (*Supplement:5004*) with the Committee recommendation to Vote Yes.

Dr. Jill M. Burns, Indiana, moved to amend Resolution 3RC, by adding a third resolving clause, which reads as follows:

**Resolved**, that the Board of Trustees provide a minority comment for any contested votes when the ratio of the vote is less than 2:1.

In speaking to the amendment, Dr. Burns stated, “We feel in the Seventh [District] that if we can’t know the names, at least we’ll know the why of, if someone votes in the—either yes or no and not in the minor—in the minority vote and why they voted the way they did. And we feel that would go a long way to easing the House’s trepidation about not knowing who voted how.”

On vote, the proposed amendment was adopted.

Dr. Barbara B. Mauldin, Mississippi, spoke against Resolution 3RC, as amended. She said, “I think it’s important that we know what the Board of Trustees are thinking. We want to hold them accountable, and we want transparency within our organization. Also, it is from the Board of Trustees that our President will come. And I want to know as a voice of a delegate whether or not my choice in presidency, which will come from this Board, I want to know how they have voted through the years. And I also want to know the ramifications of each of their votes.”

Dr. Shane A. Ricci, Texas, spoke against Resolution 3RC, as amended, stating, “Any time you make a decision for an association, you have to look at what is gained and what is lost by that decision. In this case, not only do you lose some transparency, but you also lose the value of the ability to approach somebody to educate you on what information they saw. ... The one other thing that we look at, I think, and an argument that I heard in the Reference Committee that I thought was a valid argument, was best practices. Ultimately, I’d submit to you that best practices is a very generalized thing. And this body is who determines what the best practices for this organization is. And transparency, ability to access information and ability to see who our leaders are and what they’re voting for is the most important part of all.”

Dr. Alan R. Stein, California, spoke in support of Resolution 3RC, as amended. He said, “I think it’s very important that we understand that this is an issue of governance, not an issue of government. We’re not electing trustees to carry out our own personal or district wishes, nor are we electing them to be able to assess their suitability for a future political position. We’re really putting them in place as the Board of Governors of our organization, whose fiduciary responsibility is to do the best for the American Dental Association, not necessarily to please individuals in an individual district. And I think by passing this, we take the political pressure off of our trustees so they can do the right thing and not worry about ramifications.”

Dr. Debrah J. Worsham, Texas, spoke against Resolution 3RC, as amended, stating, “I understand and appreciate the intent of this resolution; however, as I return to Texas, I want my colleagues to know I stood in opposition to this resolution. My East Texas peers usually know what went on at this meeting before I get home, and they expect explanations for our actions. Openness and transparency are valued assets of our leaders.”

Dr. John E. Hisel, Jr., Idaho, spoke in support of Resolution 3RC, as amended, stating, “In the Eleventh [District], we feel that when we send our trustee, there is a great matter of trust that we send with that trustee. And we feel like that with that trust, that tally that’s being recommended here fully satisfies our transparency...”

Dr. Albert A. Natelli, Connecticut, spoke against Resolution 3RC, as amended. He said, “As a former elected official, we must own our votes. And the way you own your vote is when you vote, it’s tallied in the affirmative or not with your name, yes or no. You need to be able to defend your vote to your colleagues, constituents afterwards. If you voted in the affirmative, why, and if you voted in the negative, why. But it’s recorded, so someone can call you and ask you why. Own your vote.”

Dr. Jane Gillette, Montana, spoke in support of Resolution 3RC, as amended, stating, “I’ve served on lots of boards, everything from little grassroots community boards to large national high profile boards, and I can tell you that this Association is the only one that I have been a part of that actually records votes like that. And

I would agree with the previous speaker in front of me that I fully trust our trustee, and you know what, I trust the other trustees too. That's what we've put them in that position for, and I think that they're making decisions in the best interest of the organization."

Dr. Alan B. Moore, Texas, spoke against Resolution 3RC, as amended, stating, "The more knowledge we have, the better decisions we are going to make. I think it is important to understand the Board thought process, who's voting here, who's voting there. The more knowledge we have, we're creating—is better for us, but we're creating, basically, some mental gymnastics to try and figure out how people voted. We get the information late in the year. Are we going to have to call up our trustees when we're reading this and say how did you vote on this? ...if we keep doing it the way we've been doing it, we're going to have more knowledge, we'll have more understanding and make life simpler."

Dr. Sidney R. Tourial, Georgia, spoke against Resolution 3RC, as amended, stating, "I appreciate the Reference Committee's attempt to compromise and calling for a tally of the votes on the Board, but this doesn't really tell us what's going on sometimes. I think it's important for us to see how the people themselves are voting. As it was just mentioned, this helps us understand the ideas that are going on in the ADA. This helps us understand the finances of the ADA. And sometimes if you watch how the votes are going, you get a feeling of where the ADA is going. ...all of us are volunteers, including our peers who sit on the Board, and so we should be proud of how we vote."

Dr. Richard R. Grossman, Pennsylvania, spoke against Resolution 3RC, as amended. He said, "Winston Churchill once said, and I quote, 'With greatness comes responsibility.' And I think we have a wonderful Board. I trust my trustee. I'm sure we all trust them, but we still have a right to know what their vote was so that we can go back to our constituents and discuss what we discussed at this meeting and during the year what our trustees voted on."

A motion was made to vote immediately on Resolution 3RC, as amended. The motion to vote immediately was adopted by a two-thirds affirmative vote.

On vote, Resolution 3RC, as amended, was not adopted.

**Proposed Policy, National Pretreatment Standard for Dental Office Wastewater** (Board of Trustees Resolution 40 and Reference Committee D Resolution 40RC): The Reference Committee reported as follows:

The Reference Committee agrees with the Board's recommendation, however, the Reference Committee heard testimony concerning the removal of the words "continued" and "the Environmental Protection Agency's national" in the first resolving clause. The Reference Committee agrees with the recommended removal of those words due to concerns that government policy could change in the future (~~deletions stricken~~).

#### **National Pretreatment Standard for Dental Office Wastewater**

**40RC. Resolved**, that the following principles guide the American Dental Association's ~~continued~~ support for ~~the Environmental Protection Agency's national~~ pretreatment standard for dental office wastewater:

1. Any regulation should require covered dental offices to comply with best management practices patterned on the ADA's best management practices (BMPs), including the installation of International Organization for Standardization (ISO) compliant amalgam separators or separators equally effective.
2. Any regulation should defer to existing state or local law or regulation requiring separators so that the regulation would not require replacement of existing separators compliant with existing applicable law.
3. Any regulation should exempt dental practices that place or remove no or only de minimis amounts of amalgams.

4. Any regulation should include an effective date or phase-in period of sufficient length to permit affected dentists a reasonable opportunity to comply.
5. Any regulation should provide for a reasonable opportunity for covered dentists to repair or replace defective separators without being deemed in violation of the regulation.
6. Any regulation should minimize the administrative burden on covered dental offices by (e.g.) primarily relying upon self-certification (subject to verification or random inspection) and not requiring dental-office-specific permits.
7. Any regulation should not include a local numerical limit set by the local publicly owned treatment works (POTW).
8. Any regulation should not require wastewater monitoring at the dental office, although monitoring of the separators to assure proper operation may be required.
9. Any regulation should provide that compliance with it shall satisfy the requirements of the Clean Water Act unless a more stringent local requirement is needed.

and be it further

**Resolved**, that the policy entitled Negotiated Rulemaking Process Regarding a National Pretreatment Standard for Dental Office Wastewater (*Trans.2010:602*) be rescinded.

Dr. Hutchison moved Resolution 40RC in lieu of Resolution 40 (*Supplement:5027*) with the Committee recommendation to Vote Yes.

The Speaker asked if there was any discussion on Resolution 40RC; there was none. On vote, Resolution 40RC was adopted in lieu of Resolution 40.

#### **National Pretreatment Standard for Dental Office Wastewater**

**40H-2019. Resolved**, that the following principles guide the American Dental Association's continued support for the Environmental Protection Agency's national pretreatment standard for dental office wastewater:

1. Any regulation should require covered dental offices to comply with best management practices patterned on the ADA's best management practices (BMPs), including the installation of International Organization for Standardization (ISO) compliant amalgam separators or separators equally effective.
2. Any regulation should defer to existing state or local law or regulation requiring separators so that the regulation would not require replacement of existing separators compliant with existing applicable law.
3. Any regulation should exempt dental practices that place or remove no or only de minimis amounts of amalgams.
4. Any regulation should include an effective date or phase-in period of sufficient length to permit affected dentists a reasonable opportunity to comply.
5. Any regulation should provide for a reasonable opportunity for covered dentists to repair or replace defective separators without being deemed in violation of the regulation.
6. Any regulation should minimize the administrative burden on covered dental offices by (e.g.) primarily relying upon self-certification (subject to verification or random inspection) and not requiring dental-office-specific permits.

7. Any regulation should not include a local numerical limit set by the local publicly owned treatment works (POTW).
8. Any regulation should not require wastewater monitoring at the dental office, although monitoring of the separators to assure proper operation may be required.
9. Any regulation should provide that compliance with it shall satisfy the requirements of the Clean Water Act unless a more stringent local requirement is needed.

and be it further

**Resolved**, that the policy entitled Negotiated Rulemaking Process Regarding a National Pretreatment Standard for Dental Office Wastewater (*Trans.*2010:602) be rescinded.

**Report on the Referral of Resolution 21H-2018: Amendment of Policy: Use of the Term “Specialty”** (Council on Ethics, Bylaws and Judicial Affairs Resolution 70 and Reference Committee D Resolution 70RC): The Reference Committee reported as follows:

The Reference Committee heard limited testimony concerning Resolution 70. The testimony was to the effect that (1) the amendment to the policy entitled “Use of the Term ‘Specialty’” was redundant to a portion of Section 5H of the ADA *Principles of Ethics and Code of Professional Conduct* (the “ADA Code of Ethics”), or (2) that the addition to the policy included on line 15 of Page 5075 should either be changed to mirror the language of Section 5H of the ADA *Code of Ethics* or eliminated.

The Reference Committee spent considerable time reviewing the testimony and comparing the language proposed by the resolution against Section 5H of the ADA Code, which states, in pertinent part and with a footnote not relevant to the consideration of the resolution omitted:

A dentist may ethically announce as a specialist to the public in any of the dental specialties recognized by the National Commission on Recognition of Dental Specialties and Certifying Boards including dental public health, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, and prosthodontics, and in any other areas of dentistry for which specialty recognition has been granted under the standards required or recognized in the practitioner’s jurisdiction, provided the dentist meets the educational requirements required for recognition as a specialist adopted by the American Dental Association or accepted in the jurisdiction in which they practice.

While appreciative of the work of the agencies that sponsored the resolution, the Reference Committee believes that the proposed language is redundant to Section 5H of the *ADA Code of Ethics*. Consequently, the committee proposes a substitute resolution in lieu of Resolution 70 as follows:

**70RC. Resolved**, that the ADA policy entitled “Use of the Term ‘Specialty’” (*Trans.*1957:360) be rescinded.

Dr. Hutchison moved Resolution 70RC in lieu of Resolution 70 (*Supplement*:5075) with the Committee recommendation to Vote Yes.

The Speaker asked if there was any discussion on Resolution 70RC; there was none. On vote, Resolution 70RC was adopted in lieu of Resolution 70.

**70H-2019. Resolved**, that the ADA policy entitled “Use of the Term ‘Specialty’” (*Trans.*1957:360) be rescinded.

**Dental Specialties Representation in House of Delegates** (Dr. James D. Nickman, delegate, Minnesota Resolution 77): The Reference Committee reported as follows:

The Reference Committee heard testimony that both supported and opposed Resolution 77. The testimony in favor of the resolution was given predominantly, but not exclusively, by specialists, who stated that having specialty representation in the House would allow the specialties’ perspectives to be

expressed in the House and that information known to and views of each specialty would be made available to the House through its representative.

The Reference Committee, however, does not support the resolution and agrees with the views expressed by the Board of Trustees in its comment to the resolution. As stated, the leadership of the ADA is required to meet annually with each specialty to maintain lines of communication and discuss matters of mutual concern. Also, as demonstrated by the open hearing of Reference Committee D that was held this year, specialty organizations are encouraged to, and do, inform the ADA of their views on any matter of interest that is before the House of Delegates by providing testimony to the reference committees of the House. Finally, the Reference Committee notes that it is the fiduciary duty of any delegate of the House of Delegates to act in what is believed to be the best interests of the ADA, and not the agency that selected or elected the delegate.

Consequently, the Reference Committee, while appreciative of the views of those in support of the resolution, recommends that the resolution not be adopted.

The Standing Committee on Constitution and Bylaws approves the wording of Resolution 77 as submitted, except that a resolving clause proposing an amendment to ADA Bylaws, Chapter III, HOUSE OF DELEGATES, Section 80 (Quorum) has been added so that the House of Delegates quorum provision reflects the revised composition of the House of Delegates proposed by Resolution 77. Those revisions are shown as additions shaded and deletions ~~double stricken through~~ and shaded.

**77. Resolved**, that Chapter III, House of Delegates, Section 10 (Members), Subsection A (Voting Members) of the ADA *Bylaws* be amended as follows (additions underlined, deletions ~~stricken~~):

“A. VOTING MEMBERS. The voting members of the House of Delegates shall be composed of officially certified delegates of the constituents and of the federal dental services, who shall be active, life or retired members, ~~and~~ officially certified delegates of the American Student Dental Association, and officially certified delegates of dental specialties recognized by the National Commission on Recognition of Dental Specialties and Certifying Boards who shall be active, life or retired members.

and be it further

**Resolved**, that Chapter III, House of Delegates, Section 10 (Members), Subsection B (Alternate Delegates) of the ADA *Bylaws* be amended as follows (additions underlined, deletions ~~stricken~~):

B. ALTERNATE DELEGATES. Each constituent and each federal dental service may select from among its active, life or retired members up to the same number of alternate delegates as delegates. The American Student Dental Association may select from among its active members up to the same number of alternate delegates as delegates. Each dental specialty recognized by the National Commission on Recognition of Dental Specialties and Certifying Boards may select from among its active, life or retired members an alternate delegate.

and be it further

**Resolved**, that Chapter III, House of Delegates, Section 10 (Members), Subsection D (Election or Selection) of the ADA *Bylaws* be amended as follows (additions underlined, deletions ~~stricken~~):

D. ELECTION OR SELECTION. A constituent's delegates shall be elected or, in the case of a constituent's alternate delegates elected or selected by one or more of the following methods:

1. By the membership at large of that constituent;
2. By the constituent's governing legislative body, House of Delegates, or Board of Directors, or in the case of alternate delegates, at the discretion of the constituent; or
3. By a component with respect to delegates representing that component.

Each federal dental services and the American Student Dental Association may establish its own method for selecting or selecting delegates, except that the American Student Dental Association

shall select its five (5) delegates from its even number regions in even numbered years, and the odd numbered regions in odd numbered years, with their alternate delegates selected from the opposite groups of regions. Each national dental specialty organization recognized by the National Commission on Recognition of Dental Specialties and Certifying Boards shall establish its own method for electing or selecting its delegate and alternate delegate.

and be it further

**Resolved**, that Chapter III, House of Delegates, Section 30 (Representation) of the ADA *Bylaws* be amended as follows (additions underlined, deletions ~~stricken~~):

*Section 30. REPRESENTATION.* Each constituent society, each federal dental service and the American Student Dental Association shall be entitled to representation as set forth in the Manual of the House of Delegates. Each dental specialty recognized by the National Commission on Recognition of Dental Specialties and Certifying Boards shall be entitled to one delegate and one alternate, which are not included in the representation formula as set forth in the section entitled Representation of Constituents and Periodic Reapportionment of Delegates and Alternate Delegates found in the Manual of the House of Delegates. The House of Delegates may, by a two-thirds (2/3) vote of the delegates present and voting suspend the representation of a constituent in the House of Delegates upon a determination by the House that the constitution or bylaws of the constituent conflicts or limits the Constitution or Bylaw of this Association. Such suspension shall not be effective until the House of Delegates has voted that the constituent is in violation and has one year after notification of the specific violation to correct its constitution or bylaws.

and be it further

**Resolved**, that Chapter III, House of Delegates, Section 80 (Quorum) of the ADA Bylaws be amended as follows (additions shaded and deletions ~~double-stricken through~~ and shaded):

*Section 80. QUORUM:* A quorum for the transaction of business at any meeting shall consist of twenty-five percent (25%) of the voting members of the House of Delegates, representing at least twenty-five percent (25%) of the constituents, the federal dental services, and the American Student Dental Association and the dental specialties recognized by the National Commission on Recognition of Dental Specialties and Certifying Boards combined.

Dr. Hutchison moved Resolution 77 (*Supplement:5084*) with the Committee recommendation to Vote No.

Dr. Deborah S. Bishop, Alabama, spoke against Resolution 77 stating, "I think it is very disingenuous to ask for a seat in the ADA House when these organizations do not require their members to be ADA members. And I also think if you are a specialist and you're unhappy with your situation, you need to hold your specialty organization accountable and not the ADA."

Dr. Donna Thomas-Moses, Georgia, spoke against Resolution 77 stating, "Former member of the Strategic Planning Committee, former member of CERP, present member of CDEL, periodontist. I'm sorry to call those out, but I want to recognize the fact that I am a specialist, and I have been involved in this ADA. House of Delegates members must be sensitive to the culture of the American Dental Association and not bring influences from other specialty organization cultures to the voting process of the supreme governing body of this Association. I see and understand ADA culture and needs, because I have walked this path for 26 years of constant involvement. Many times my periodontal colleagues not trodding the day-to-day path of ADA involvement simply do not appropriately understand and appreciate the sensitivity of the issues of this House and, in my opinion, do not deserve a vote in this ADA House of Delegates. I am thankful the American Dental Association allows me, as a periodontist, to be as involved as I have chosen to be. Specialists can use the pathway of involvement that now exists. Do not expect to have a vote in this House of Delegates just because you represent a specialty organization. Fellow House members, I cannot imagine who would be in favor of diluting the votes of the passionate, hard-working members of this House of Delegates."

Dr. Bishop added, "I want to add that I am a specialist also. I'm an endodontist."

Dr. James I. Lopez, Georgia, spoke against Resolution 77. He said, "In the Fifth District, we have four pediatric dentists, two orthodontists, four periodontists and one endodontist. Twenty-eight percent of our district are specialists. We would encourage specialty associations to encourage their ADA members to become actively engaged in their respective state dental associations and the ADA. This will ensure their representation. When we enter this House, we are all equals representing the profession of dentistry and not general dentistry or any particular specialty."

On vote, Resolution 77 was not adopted.

**Study Innovations for Alternate Student Loan Repayment Strategies** (Fourteenth Trustee District Resolution 81 and Reference Committee D Resolution 81RC): The Reference Committee reported as follows:

The Reference Committee recognizes that the ADA has been looking at ways to mitigate dental student debt for many years. Therefore the Reference Committee recommends the creation of a task force to explore new, innovative, and creative ways to address the problem. The Financial Implication is \$0 because the Reference Committee concluded that the work could be done electronically.

**81RC. Resolved**, that the Board form a task force and appoint stakeholders to examine, identify, and creatively address solutions to the student debt crisis, and be it further **Resolved**, that the task force will report back on their progress to the 2020 House of Delegates on its recommended initiatives.

Dr. Hutchison moved Resolution 81RC in lieu of Resolution 81 (*Supplement:5096*) with the Committee recommendation to Vote Yes.

On vote, Resolution 81RC was adopted in lieu of Resolution 81.

**81H-2019. Resolved**, that the Board form a task force and appoint stakeholders to examine, identify, and creatively address solutions to the student debt crisis, and be it further **Resolved**, that the task force will report back on their progress to the 2020 House of Delegates on its recommended initiatives.

**Clarification of ADA Policy Regarding Tobacco Products** (Fourteenth Trustee District Resolution 80, Virginia Dental Association Resolution 84 and Reference Committee D Resolution 84RC): The Reference Committee reported as follows:

There is some concern that the current ADA policy on tobacco may be limited. As times change and options change, so must ADA policy.

**84RC. Resolved**, that the American Dental Association add "vaping" and any other alternative delivery system for both tobacco and non-tobacco products to ADA Policy, and be it further **Resolved**, that this be referred to the appropriate Council and that a report be made to the 2020 ADA House of Delegates to update current ADA Policy.

Dr. Hutchison moved Resolution 84RC in lieu of and Resolution 84 (*Supplement:5102*) and Resolution 80 (*Supplement:5094*) with the Committee recommendation to Vote Yes.

On vote, Resolution 84RC was adopted in lieu of Resolution 84 and Resolution 80.

**84H-2019. Resolved**, that the American Dental Association add "vaping" and any other alternative delivery system for both tobacco and non-tobacco products to ADA Policy, and be it further **Resolved**, that this be referred to the appropriate Council and that a report be made to the 2020 ADA House of Delegates to update current ADA Policy.

**Amendment of the Policy, Legislative Assistance by the Association** (Council on Government Affairs Resolution 43): The Reference Committee reported as follows:

The Reference Committee concurs with the Board of Trustees and supports adoption of the following resolution.

**43. Resolved**, that the policy entitled Legislative Assistance by the Association (*Trans.*1977:948; 1986:530) be amended as follows (additions are underscored; deletions are ~~stricken~~):

~~**Resolved**, that the American Dental Association, its officers, staff, council, etc. shall not assist in any manner any organization, agency, group or individual who is attempting to alter the laws of the state of a constituent society a state without the consent and approval of that the constituent society, provided that upon request of a responsible agency or individual, copies of official policies of the American Dental Association, which are matters of public record, may be made available to such agency or individual, and be it further~~

**Resolved**, that when the American Dental Association is aware of pending legislation within a state which is in opposition to existing Association policy or is otherwise detrimental to the best interests of the public, the Association shall inform the constituent society of the implications of such legislation, urge the constituent society to take appropriate action and offer assistance in addressing the issue.

Dr. Hutchison moved Resolution 43 (*Supplement*:5034) with the Committee recommendation to Vote Yes.

Dr. Sidney R. Tourial, Georgia, moved to amend Resolution 43 by maintaining the text in the second resolving clause so that the resolving clause would read as follows:

**Resolved**, that when the American Dental Association is aware of pending legislation within a state which is in opposition to existing Association policy or is otherwise detrimental to the best interests of the public, the Association shall inform the constituent society of the implications of such legislation, urge the constituent society to take appropriate action and offer assistance in addressing the issue.

In speaking to the amendment, Dr. Tourial stated, "The first resolving clause shows us that the ADA wants to help us. They want to help us stay out of problems by altering the laws that may go against what your state or constituent society has. The second resolving clause does similar things and would offer the ADA's help if any pending legislation would be detrimental to the Association or to the public. Therefore, we think that the second resolving clause cannot hurt and can only be helpful."

On vote, the proposed amendment was adopted.

Dr. Ariane R. Terlet, California, spoke in support of Resolution 43, as amended. She said, "I have more of a question. Who's going to do this? And how much is it going to cost? Because it seems to me that you're asking your legislative staff to review all legislation pending in the states and then notify the state as opposed to the state knowing that the legislation is going on and asking for help from the ADA."

In response to Dr. Terlet's question, Mr. Michael Graham, senior vice president, Government and Public Affairs, stated, "We actually do this now. It's just our protocol. We have a Department of State Government Affairs, and it's a matter of our protocol that we do this."

The Speaker asked, "The question about money, it's in the budget? If we appropriate it, we have SPA funding?" Mr. Graham responded, "We do it right now. No additional funds are necessary."

On vote, Resolution 43, as amended, was adopted.

**43H-2019. Resolved**, that the policy entitled Legislative Assistance by the Association (*Trans.*1977:948; 1986:530) be amended as follows (additions are underscored; deletions are ~~stricken~~):

~~**Resolved**, that the American Dental Association, its officers, staff, council, etc. shall not assist in any manner any organization, agency, group or individual who is attempting to alter the laws of the state of a constituent society a state without the consent and approval of that the constituent society, provided that upon request of a responsible agency or individual, copies of official policies of the~~

~~American Dental Association, which are matters of public record, may be made available to such agency or individual, and be it further~~

**Resolved**, that when the American Dental Association is aware of pending legislation within a state which is in opposition to existing Association policy or is otherwise detrimental to the best interests of the public, the Association shall inform the constituent society of the implications of such legislation, urge the constituent society to take appropriate action and offer assistance in addressing the issue.

**Amendment of Chapter V., Section E.2. of the Governance Manual – Pilot Programs** (Council on Ethics, Bylaws and Judicial Affairs Resolution 71): The Reference Committee reported as follows:

The Reference Committee concurs with the Board of Trustees and supports adoption of the following resolution.

The Standing Committee on Constitution and Bylaws approves the wording of Resolution 71 as submitted.

**71. Resolved**, that Chapter V., Section E.2. of the Governance Manual of the American Dental Association be amended as indicated (additions underscored):

#### CHAPTER V. BOARD OF TRUSTEES

\* \* \*

##### E. Powers

\* \* \*

2. Consistent with the exercise of its power to authorize limited scope pilot programs, approve guidelines relating to the conduct of the program when authorizing a pilot program. No pilot program authorized by the Board of Trustees shall exceed a period of three years without approval by the House of Delegates. The Board of Trustees shall annually report to the House of Delegates on any authorized pilot program during the program's duration that is inconsistent with any provision of the Bylaws.

Dr. Hutchison moved Resolution 71 (*Supplement:5077*) with the Committee recommendation to Vote Yes.

Dr. Ben W. Jernigan, Jr., Georgia, spoke against Resolution 71 stating, "We feel the existing language in the *Governance Manual* accurately reflects the intent of Resolution 41H, which was passed in 2015. The added language weakens the original resolution by only requiring the Board to report back to the House pilot programs that are inconsistent with the *Bylaws*. In my opinion, that is not what the original resolution required, which stated that the Board of Trustees should annually report pilot programs to the House without any notion that it was only pilot programs that violated the *Bylaws*."

Dr. James A. Smith, Oregon, and chair of the Council on Ethics, Bylaws and Judicial Affairs, spoke in support of Resolution 71 stating, "I want to explain that this resolution in 2015 was passed on consent and was originally planned, intended that pilot programs that stood contrary to our existing *Bylaws* could be run without requiring a two-thirds vote to change the *Bylaws* to allow to see if this pilot program, which may not be effective would, in fact, be something that would be supported by this body, by this organization. Due to technical issues, that language was dropped originally in 2015. There are numerous pilot projects that are done by this Association, and this doesn't change the fact that issues of significance that need to be reported to this body will continue to be done. This simply clarifies that it is the pilot programs that are contrary to existing *Bylaws* would be reported to the House of Delegates and ensure that there is proper oversight for that. So that doesn't preclude that other pilot programs as significant could report to this body. It just specifies that those that are contrary to the existing *Bylaws* would be reported on an annual basis."

On vote, Resolution 71 was adopted.

**71H-2019. Resolved**, that Chapter V., Section E.2. of the *Governance Manual* of the American Dental Association be amended as indicated (additions underscored):

CHAPTER V. BOARD OF TRUSTEES

\* \* \*

E. Powers

\* \* \*

2. Consistent with the exercise of its power to authorize limited scope pilot programs, approve guidelines relating to the conduct of the program when authorizing a pilot program. No pilot program authorized by the Board of Trustees shall exceed a period of three years without approval by the House of Delegates. The Board of Trustees shall annually report to the House of Delegates on any authorized pilot program during the program's duration that is inconsistent with any provision of the *Bylaws*.

**Response to Resolution 55H-2018: Establishing a Culture of Safety in Dentistry** (Council on Advocacy for Access and Prevention Resolution 78): The Reference Committee reported as follows:

The Reference Committee concurs with the Board of Trustees and supports adoption of the following resolution.

**78. Resolved**, that the appropriate ADA agency be tasked with implementing, in a measured and methodical manner, a three year framework for action that will begin to:

- Develop a curriculum on patient safety and encourage its adoption into training;
- Disseminate information on patient and dental team safety through a variety of in-person, print, web and social media communication vehicles on a regular basis;
- Recognize patient safety considerations in practice guidelines and in standards;
- Work collaboratively to develop community-based initiatives for error reporting and analysis; and
- Collaborate with other dental and healthcare professional associations and disciplines in a national summit on dentistry's role in patient safety.

and be it further,

**Resolved**, that an annual report be submitted to the ADA House of Delegates detailing progress in nurturing this culture of safety in order to raise awareness, while alleviating fear and anxiety associated with making the dental environment safe for patients, providers and the dental team.

Dr. Hutchison moved Resolution 78 (*Supplement:5088*) with the Committee recommendation to Vote Yes.

Dr. Christopher J. Cuomo, New York, moved to amend Resolution 78 in the first resolving clause by replacing the words "appropriate ADA agency" with the words "Council on Advocacy for Access and Prevention (CAAP)" and adding a resolving clause so that the Resolution would read as follows:

**Resolved**, that the ~~appropriate ADA agency~~ Council on Advocacy for Access and Prevention (CAAP) be tasked with implementing, in a measured and methodical manner, a three year framework for action that will begin to:

- Develop a curriculum on patient safety and encourage its adoption into training;
- Disseminate information on patient and dental team safety through a variety of in-person, print, web and social media communication vehicles on a regular basis;
- Recognize patient safety considerations in practice guidelines and in standards;
- Work collaboratively to develop community-based initiatives for error reporting and analysis; and

- Collaborate with other dental and healthcare professional associations and disciplines in a national summit on dentistry's role in patient safety.

and be it further

**Resolved**, that the Council on Advocacy for Access and Prevention (CAAP) be urged to use its existing workgroup.

and be it further,

**Resolved**, that an annual report be submitted to the ADA House of Delegates detailing progress in nurturing this culture of safety in order to raise awareness, while alleviating fear and anxiety associated with making the dental environment safe for patients, providers and the dental team.

In speaking to the amendment, Dr. Cuomo stated, "There's currently a workforce in place that's doing a great job. They've invested a lot of time, brought in specialists and consultants on safety. It seems appropriate to allow them to continue with their work. So we urge the CAAP allow them to do that. We don't know what the fiscal implications would be if another workforce were to be implemented or committee be urged to do that."

Discussion in support of the proposed amendment ensued.

On vote the proposed amendment was adopted.

On vote, Resolution 78, as amended, was adopted.

**78H-2019. Resolved**, that the ~~appropriate ADA agency~~ Council on Advocacy for Access and Prevention (CAAP) be tasked with implementing, in a measured and methodical manner, a three year framework for action that will begin to:

- Develop a curriculum on patient safety and encourage its adoption into training;
- Disseminate information on patient and dental team safety through a variety of in-person, print, web and social media communication vehicles on a regular basis;
- Recognize patient safety considerations in practice guidelines and in standards;
- Work collaboratively to develop community-based initiatives for error reporting and analysis; and
- Collaborate with other dental and healthcare professional associations and disciplines in a national summit on dentistry's role in patient safety.

and be it further

**Resolved**, that the Council on Advocacy for Access and Prevention (CAAP) be urged to use its existing workgroup.

and be it further,

**Resolved**, that an annual report be submitted to the ADA House of Delegates detailing progress in nurturing this culture of safety in order to raise awareness, while alleviating fear and anxiety associated with making the dental environment safe for patients, providers and the dental team.

### **Point of Personal Privilege**

Dr. Hutchison thanked the Speaker for his years of service as Speaker of the House of Delegates, stating, "I would like to echo the many comments from earlier today of the great job you've done for this House the past seven years. I think it's been fair, it's been well run, and I have a personal thank you for that. I've attend all seven of those Houses, and you've done a great job."

### **Unfinished Business**

**Addendum to Nominations to Councils and Commissions** (Board of Trustees Resolution 16a)

The Speaker announced that with the election of Dr. W. Mark Donald as ADA speaker of the House of Delegates, his seat on the Council on Dental Practice was now vacant. The Board of Trustees nominated Dr. Sherry R. Gwin to serve the remainder of Dr. Donald's unexpired term on the Council on Dental Practice, which expires at the close of the 2022 House of Delegates. The nomination was presented to the House in Resolution 16a (*Supplement:1025a*).

There being one nomination for the position, the Speaker declared Dr. Gwin elected to the Council on Dental Practice.

**16aH-2019. Resolved**, that Dr. Sherry R. Gwin, Mississippi, be elected to serve as the Fifth District Representative on the Council on Dental Practice for a term ending at the close of the 2022 House of Delegates.

## New Business

The Speaker announced that one item of New Business was submitted:

Resolution 92: Election Commission Rules Amendment (Ninth Trustee District) (*Supplement:6000*)

Items of New Business submitted less than 15 days prior to the opening of the annual session require a majority vote of the delegates present and voting in order to be considered.

On vote, Resolution 92 received a majority vote to be considered.

## Election Commission Rules Amendment (Ninth Trustee District Resolution 92)

**92. Resolved**, that *The Election Commission Rules Governing the Conduct of Campaigns for All ADA Elective Officers* be amended as follows: (Additions underscored, ~~deletions stricken~~):

Appendix 1, Section 22 related to Campaign Literature and Communications to Delegate and Alternate Delegates

22. Each campaign is permitted to individually initiate a telephonic (phone call or text) communication with each delegate and alternate delegate a single time for the purpose of campaigning, electioneering and soliciting votes following the receipt from the ADA of the list of certified delegate and alternate delegate contact information.

and be it further

**Resolved**, that Section 24 be amended:

Candidates may each schedule ~~up to three (3)~~ up to three (3) telephone or video conferencing forums or town hall events during the campaign. A candidate desiring to hold ~~up to three (3)~~ up to three (3) telephone or video conferencing town hall events shall communicate to the ADA the date of each event and the times at which each such event shall commence and end, together with the instructions and contact information necessary for participants to email and/or call with the questions they would like asked during the telephonic town hall. The ADA will announce the telephone or video conferencing town hall information to delegates and alternate delegates via ADA Connect and provide the information to the Election Commission members and staff. Candidates may also publicize the telephonic town halls they sponsor on any closed-group campaign Facebook page that they maintain.

Dr. Margaret S. Gingrich, Michigan, spoke in support of Resolution 92. She said, "Last year when we came to the House and asked for videoconferencing to be added to Election Commission Rules, it was referred. It resulted in the Election Commission Report, but no resolution resulted from this referral. The footnote on the bottom of page 5123 [of the Election Commission Report] states, 'The Election Commission would support an amendment to the campaign rules that would broaden the current rules allowing three telephone town halls by deleting the restriction of the number of events permitted and by allowing video town

hall events.’ The benefits are decreased cost of campaign travel, extending the reach of districts that are unable to have candidate visits, fairness for all districts and making the work of the House more expedient.”

Dr. James A. Smith, Oregon and chair of the Election Commission spoke in support of Resolution 92, stating, “... This is in keeping with the spirit of the Election Commission’s campaign task force that worked to consider alternatives to in-person candidate presentations that would continue to assist delegates in developing knowledge of candidates and their positions on issues while also lowering campaign costs which are considerable and are continuing to rise.”

Dr. Edwin A. del Valle Sepulveda, Puerto Rico, spoke against Resolution 92, stating, “...in spite of all the good things the first speaker said about this resolution, the fairness, the accessibility to every district, that it has no limits. ...my phone is bugged with text messages every time of the day, and it keeps me up many nights. So I really would be more inclined to support this if it had some limits.”

As a point of information, Dr. Bryan C. Edgar, Washington, asked, “Will this require the candidates to agree on having these or will the candidates be able to operate independently from each other and have these webinars?”

In response to Dr. Edgar’s question, Dr. James A. Smith, Oregon and chair of the Election Commission said, “No, those would not have to be coordinated.”

Dr. Rita Cammarata, Texas, moved to amend Resolution 92 in the second resolving clause by keeping the words “up to three (3)” so that the second resolving clause would read as follows:

**Resolved**, that Section 24 be amended:

Candidates may each schedule up to three (3) telephone or video conferencing forums or town hall events during the campaign. A candidate desiring to hold up to three (3) telephone or video conferencing town hall events shall communicate to the ADA the date of each event and the times at which each such event shall commence and end, together with the instructions and contact information necessary for participants to email and/or call with the questions they would like asked during the telephonic town hall. The ADA will announce the telephone or video conferencing town hall information to delegates and alternate delegates via ADA Connect and provide the information to the Election Commission members and staff. Candidates may also publicize the telephonic town halls they sponsor on any closed-group campaign Facebook page that they maintain.

In speaking to the amendment, Dr. Cammarata stated, “So if the strikethrough remains, it would allow for unlimited events that could become costly in both time and money. By maintaining the limitations, it allows for a campaign to conserve costs and the events can be budgeted. It also provides some limitations in the spirit of leveling the playing field. So, understand, we are for the videoconferencing. We just like them to be limited.”

Dr. Jonathan S. Berns, Michigan, spoke against the amendment stating, “The whole idea of doing videoconferencing is so that every state or every district could get a video forum together and see the candidates talk to us, and limiting it to three means that they could only do this for a few areas or few districts or few states. We want everybody to have access, so we need no limitation or very little limitation on how many forums could be done.”

As a point of information, a delegate from the floor asked, “Is the words that appear after ‘videoconferencing forums or town hall events during the campaign,’ those are exclusive by video and no one will be present? Was it intended to be all of those to be exclusively video events only?”

Dr. Gingrich responded, stating, “No, that is not limited to videoconferencing. It would mean like you could do Zoom, which has unlimited amount of people that are face-to-face at that particular time. But they recommended not putting a specific type of videoconferencing, because it may change as technology is such rapidly changing.”

Dr. Eric W. Knudsen, Michigan, spoke against the amendment, stating, “Scheduling is a nightmare. If you’re going to allow a candidate only three times to have a videoconference, you’re really restricted.”

Dr. Smith stated, “Just a point of information. Two things. One is that there is continued to be whether telephone or text only, a single phone call or text to a delegate or alternate delegate, so that would not be inundating individuals with phone calls or text. And then, two, there’s already Facebook appointments that are already worked into this currently, so that would not change in terms of the number—the limit of three for videoconferencing. That’s already part of that Facebook town hall, so that would not change that aspect either.”

As a point of information, Dr. Craig S. Armstrong, Texas, asked, “In the first line it says that ‘up to three telephone or videoconferencing forums or town hall events during the campaign.’ And then in the next sentence it says, ‘A candidate desiring to have up to three telephone or videoconferencing town hall events,’ so is it videoconferencing town hall event, a physical town hall event?”

Dr. Gingrich responded that the first two sentences in the second resolving should mirror each other so that both sentences include the words, “up to three telephone or videoconferencing forums or town hall events.” The Speaker accepted this editorial change, which was displayed to the House.

On vote, the proposed amendment was adopted.

A motion was made to vote immediately on Resolution 92, as amended. The motion to vote immediately was adopted by a two-thirds affirmative vote.

On vote, Resolution 92, as amended, was adopted.

**92H-2019. Resolved**, that *The Election Commission Rules Governing the Conduct of Campaigns for All ADA Elective Officers* be amended as follows: (Additions underscored, ~~deletions stricken~~):

Appendix 1, Section 22 related to Campaign Literature and Communications to Delegate and Alternate Delegates

22. Each campaign is permitted to individually initiate a telephonic (phone call or text) communication with each delegate and alternate delegate a single time for the purpose of campaigning, electioneering and soliciting votes following the receipt from the ADA of the list of certified delegate and alternate delegate contact information.

and be it further

**Resolved**, that Section 24 be amended:

Candidates may each schedule up to three (3) telephone or video conferencing forums or town hall events during the campaign. A candidate desiring to hold up to three (3) telephone or video conferencing forums or town hall events shall communicate to the ADA the date of each event and the times at which each such event shall commence and end, together with the instructions and contact information necessary for participants to email and/or call with the questions they would like asked during the telephonic town hall. The ADA will announce the telephone or video conferencing town hall information to delegates and alternate delegates via ADA Connect and provide the information to the Election Commission members and staff. Candidates may also publicize the telephonic town halls they sponsor on any closed-group campaign Facebook page that they maintain.

## Unfinished Business (Continued)

### Report of Reference Committee A (Continued)

Dr. Cody C. Graves, chair, Reference Committee A, returned to the podium to present the Reference Committee’s remaining items of business.

**Approval of the 2020 Budget** (Board of Trustees Resolution 33)

The Treasurer, Dr. Ted Sherwin, reported updated budget projections. With the financial implications of the House adopted resolutions, the 2020 budget resulted in a deficit of \$34,000. Given the minimal deficit, Dr. Sherwin reported that no additional dues change was needed above the proposed \$565 dues rate.

As a point of information, Dr. Paul R. Christian, Delaware, asked, "If we wanted to get rid of that \$34,000, what additional dues would be required?" In response, Dr. Sherwin said, "The reason we aren't saying dues increase, because if we round it, we'd round down. You have to have over \$50,000 to round up and have a dollar. So since we don't do cents, I'm recommending that we just stay where we are."

On vote, Resolution 33 was adopted.

**33H-2019. Resolved**, that the 2020 Annual Budget of revenues and expenses, including net capital requirements, be approved.

**Establishment of Dues Effective January 1, 2020** (Board of Trustees Resolution 34 and Eleventh Trustee District Resolution 34S-1): The Reference Committee reported as follows:

The Reference Committee heard no testimony regarding Resolution 34 and Resolution 34S-1. The Reference Committee supports adoption of Resolution 34 in lieu of Resolution 34S-1.

**34. Resolved**, that the dues of ADA active members shall be \$565.00, effective January 1, 2020.

Dr. Graves moved Resolution 34 (*Supplement:2096*) in lieu of Resolution 34S-1 (*Supplement:2096a*) with the Committee Recommendation to Vote Yes.

Resolution 34 required a sixty percent affirmative vote.

On vote, Resolution 34 was adopted in lieu of Resolution 34S-1.

**34H-2019. Resolved**, that the dues of ADA active members shall be \$565.00, effective January 1, 2020.

**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.

**Points of Personal Privilege**

As retiring Speaker, Dr. Glen Hall, neared the completion of his tenure of Speaker of the House of Delegates, Dr. Graves thanked the Speaker for his service as Speaker of the House of Delegates, stating, "Mr. Speaker, I represent a state that owes you a deep amount of gratitude. The numerous years that you have run the Texas Dental Association House of Delegates and again here at ADA. It is with great honor that I ask the Texas delegation to please stand and give you one more round of applause and just a few seconds later, if the rest of the delegation wouldn't mind joining in, we would deeply appreciate it. We would like to thank you, sir."

President Cole presented Dr. Hall with a plaque, stating, "... I'm going to approach the center podium and give you this plaque on behalf of our organization for all of your years of service to show our gratitude." The

Speaker thanked Dr. Cole. He also thanked his wife, Carol, stating, "You can't do this job without great support at the office and at home."

Lastly, Dr. Hall called speaker-elect, Dr. Donald to the center podium to present him with a pin and, stated, "With this office comes great power, and we expect you to use it wisely. In addition, the Board has authorized me \$1.98 for this pin, to remind you to exercise that power with humility." Dr. Donald, thanked Dr. Hall and said, "...you are the gold standard of speakers, and I will always hold you in high esteem..."

### **Adjournment**

Dr. Samantha Shaver, Kentucky, moved to adjourn the 160th Annual Session of the ADA House of Delegates. Without objection, the Speaker declared the 160th Annual Session of the ADA House of Delegates adjourned *sine die* at 3:23 p.m. on Monday, September 9, 2019.

## 15H-2019—APPENDIX 1

**AMENDMENT TO THE ADA GOVERNANCE MANUAL: SECTION ON SPECIAL ASSESSMENTS AND RELATED MATTERS****B. DUES, SPECIAL ASSESSMENTS AND RELATED FINANCIAL MATTERS**  
(new language=underscored; deletions=~~stricken~~):

1. Dues. Under the ADA *Bylaws*, the House of Delegates has the duty to annually set the dues of active members for the ensuing year. Dues are due and payable on January 1, except where a member has opted to pay dues in installments pursuant to a plan offered by the member's constituent, in which case, dues are paid according to the plan's requirements.

The schedule of annual dues for each of the membership categories specified in the ADA *Bylaws* is as follows:

- a. Active Members:
  - i. From degree award through conclusion of the first full year following an award of a D.D.S. or D.M.D. degree the member is exempt from the payment of dues.
  - ii. Second full year following degree award: ~~Twenty-five percent (25%)~~ Fifty percent (50%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*;
  - iii. Third full year following degree award: ~~Fifty percent (50%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*;~~
  - iv. ~~Fourth full year following degree award: Seventy-five percent (75%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*; and~~
  - v. ~~Fifth full year following degree award and thereafter: One hundred percent (100%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*.~~
  - iv. Members becoming active members after July 1, except for those whose membership has lapsed for failure to pay the current year's dues and/or any special assessment, shall pay fifty percent (50%) of any annual dues then in effect. Those members becoming active members after October 1, except for those whose membership has lapsed for failure to pay the current year's dues and/or any special assessment, shall be exempt from the payment of the any annual dues then in effect.

\*\*\*

- c. Life Members:
 

~~The obligation of life members to pay dues is the same as for active members, except that i- Seventy-five percent (75%) of active member dues as set by the House of Delegates pursuant to the ADA *Bylaws*. ii- Life members who also meet the eligibility requirements for retired membership shall be exempt from the payment of dues.~~
- d. Student Members:
  - i. Pre-doctoral student members: Five Dollars (\$5.00).
  - ii. Post-doctoral students and residents: ~~Thirty Dollars (\$3.00)~~ shall be exempt from the payment of dues.

\*\*\*

2. Special Assessments: Pursuant to the ADA *Bylaws*, the House of Delegates has the power to levy special assessments. Any special assessment for a calendar year is due and payable on January 1, except where a member has opted to pay in installments pursuant to a plan offered by the member's constituent, in which case, the special assessment is paid according to the plan's requirements. The schedule of special assessment allocation for each of the membership categories specified in the ADA *Bylaws* is as follows:

a. Active Members:

- i. From degree award through conclusion of the first full year following an award of a D.D.S. or D.M.D. degree the member is exempt from the payment of any special assessment then in effect.
- ii. Second full year following degree award: ~~Twenty five percent (25%)~~ Fifty percent (50%) of any special assessment then in effect;
- iii. Third full year following degree award: ~~Fifty percent (50%) of any special assessment then in effect;~~
- iv. ~~Fourth full year following degree award: Seventy five percent (75%) of any special assessment then in effect; and~~
- v. ~~Fifth full year following degree award and thereafter: One hundred percent (100%) of any special assessment then in effect.~~

\*\*\*

c. Life Members:

- i. ~~Seventy five percent (75%) of any special assessment then in effect. The obligation of life members to pay any special assessment then in effect is the same as for active members, except that if~~ Life members who also meet the eligibility requirements for retired membership shall be exempt from the payment of special assessments.

\*\*\*

4. Limited Dues and Special Assessment Reduction Programs:

- a. New Graduate Dues Reduction Deferral. For dentists who are engaged full time in an advanced training program of not less than one academic year's duration, post-doctoral or residency program while eligible for the new graduate active member dues and special assessment reduction program outlined above, the applicable reduced dues rate shall be deferred until completion of post-doctoral or residency program. Commencing at the start of the calendar year after the dentist completes the program, the dentist shall recommence paying dues and any special assessment for active members at the reduced dues rate where the dentist left off in the progression. During the period such dentist is engaged full-time in an advanced training course of not less than one (1) academic year's duration, post-doctoral or residency program, the dues and special assessment exemption provisions for post-doctoral students and residents shall apply.

## Notes

# Continuing Education Program

## Notes

# Continuing Education Program

Moscone Convention Center, San Francisco, CA  
September 4-8, 2019

The 2019 Annual Meeting Continuing Education Program was held September 4-8, 2019 at the Moscone Convention Center.

The Continuing Education Program was under the direction of the Committee on Annual Meetings and composed of the following members:

C. Roger Macias, Jr., General Chair, San Antonio, Texas; Kenneth D. McDougall, Chair, 10th District, 2019 Board of Trustees Liaison, Jamestown, North Dakota; Nanette C. Tertel, 2019 Continuing Education Chair, Toledo, Ohio; Lauren E. Vitkus, 2019 NDC Consultant, Victor, NY; Paul F. Kirkegaard, Jr., 2020 Continuing Education Chair-Designate, Saint Paul, Minnesota; Tyler Robers, 2019 ASDA Liaison,

non-voting member, Hartford, Wisconsin; Dennis D. Shinbori, 2019 CLA General Chair, San Francisco, California; H. Charles McKelvey, 2021 General Chair-Designate, Twain Harte, California; Bertram J. Hughes, 2020 CLA General Chair, Gainesville, Florida; Robert L. Skinner, 2021 Continuing Education Chair-Designate, Fort Smith, Arkansas; James D. Stephens, Chair-Designate, 13<sup>th</sup> District, 2020 Board of Trustees Liaison, Palo Alto, California; Stephen T. Radack, III, Erie, Pennsylvania; Robert L Blackwell, Alton, Illinois; Melanie Love, Falls Church, Virginia; Deborah Weisfuse, New York, New York

David J. Cantalupo, director, Chicago, Illinois

The following were presenters for the 2019 Continuing Education Program:

Aalam, Alina Krivitsky  
Abt, Elliot  
Agarwal, Tarun  
Ahmed, Ayman  
Mohamed  
Albino, Judith  
Albrecht, Cathryn  
Allen, Finbarr  
Alonge, John L.  
Alvarado, Alex  
Asadi, Homayon  
Aschheim, Kenneth  
Astoeti, Tri Erri  
Atnip, Stact  
Baccouche, Zied  
Banerjee, Avijit  
Barsley, Robert  
Bartold, P. Mark  
Bassett, Joyce  
Belibasakis, Georgios  
Bendit, Judy Z.  
Benjamin, Scott D.  
Bentahar, Zakaria  
Berley, Ken  
Bornstein, Michael

Borysewicz, Mary  
Brady, Lee Ann Ann  
Breschi, Lorenzo  
Brodbeck, Urs R.  
Brown, Chris  
Brown, Ronni E.  
Brown, Tanya A.  
Brucia, Jeff  
Bryce, Romal  
Budenz, Alan W.  
Bulnes, Christopher  
Camacho, Diego A.  
Cantamessa, Sophie  
Carstensen, Steve  
Caruso, Timothy  
Chaffee, Benjamin  
Cheung, William  
Choquette, Gisele  
Christensen, Lars  
Clark, Janell  
Cole, Jeffrey M.  
Connor, Margaret  
Constante, Jo Ann  
Convissar, Robert  
Cox, Darren

Croft, Kevin  
Curley, Arthur W.  
Czerepak, Charles  
Dartevelle, Sophie  
Davis, Karen  
Del Vecchio,  
Alessandro  
Dewart, Kirk  
Dhingra, Ajay K.  
DiBona Pastan,  
Christina  
Dobrin, Lawrence  
Dommisch, Henrik  
Dorney, Alan B.  
Duncan, Teresa  
Dye, Bruce A.  
Ebert, Suzanne M.  
Emerich, Katarzyna  
Engelhardt-Nash,  
Debra  
Epstein, Joel  
Farrell, Chris  
Featherstone, John  
Feuerstein, Paul  
Finkelstein, Allen

Gecha, Valentina  
Gedrange, Tomasz  
Geiermann, Steven  
Geisinger, Maria L.  
Geurs, Nico  
Glassman, Paul  
Glickman, Gerald  
Glick, Michael  
Gökbuget, Aslan  
Yasar  
Gold, Steven A.  
Gray, Brian  
Grisdale, Jim  
Grover, Jane  
Guillet, Julie  
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Harold, Richard S.  
Harrell, William E.  
Harris, Ronald  
Hart, Thomas C.  
Hatcher, David  
Hawkins, Mel  
Helgeson, Michael

Henry, Kevin	Low, Samuel B.	Patton, Lauren	Shuman, Lou
Heppner, Fred E.	MacDonald, Victoria	Perez, Daniel E.	Slayton, Rebecca
Herman, Gary	MacLean, Jeanette	Peters, Ove	Smith, Andrew
Hermanides, Leon	Madurantakam, Parth	Pham, David C.	Soxman, Jane A.
Herrera, David	Maggiore, Francesco	Pietruski, Jan K.	Sprenger, Marc
Hofstede, Theresa	Mahn, Eduardo,	Platt, Jeffrey A.	Stadlinger, Bernd
Horst, Jeremy	Makino, Yuka	Pleva, David J.	Stanley, Miguel
Hungate, Ryan	Malcmacher, Louis	Pöld, Ave	Stumpel, Lambert
Hurley, Sara	Malmquist, Jay p.	Potter, Brad	Suzuki, Jon B.
Ijarogbe, Olabode	Malone, Sinead	Pow, Edmond	Suzuki, Kevin
Inoue, Takashi	Maragliano-Muniz,	Psaltis, Gregory	Svirsky, John A.
Intlekofer, Paul	Pamela	Radu, Michael	Swirsky, Eric
Ioannidou, Effie	Massad, Joseph J.	Ragan, Michael R.	Tataryn, Rod W.
Iyer, Parvati H.	Mathur, Manu Raj	Rajan, Naren	Taxin, Christine
Jablow, Marty	Mathur, Vijay Prakash	Ramos-Gomez,	Thacker, Sejal
Jaecks, Kelli	Matinlinna, Jukka P.	Francisco	Thompson , Lonni J.
Jameson, Cathy	Mattheos, Nikos	Rao, Arathi	Tibballs, John E.
Jepsen, Karin	Maybery, Melanie E.	Ratner, Craig	Tomotaka , Takeda
Jepsen, Søren	McClellan, Dawn	Renshaw, Nina	Tsakos, Georgios
Jin, Lijian	McHugh, Dennis	Renvert, Stefan	Tseu, Andrew
Jobe, Christie	McNickle, Ian	Revitte, Christine	Tsubota, Kenji
Jones, Judith Ann	Mehl, Albert	Ricks, Timothy L.	van Dyk, William A.
Juliani, David	Melo, Paulo R.	Riley, Amber D.	Varenne, Benoit
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Keels, Martha Ann	Molinari, John A.	Ross Reiner, Linda	Wann, Olivia M.
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Kessler, Brett H.	Orlando	Rozylo-Kalinowska,	Weinsten, Phillip
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Kleive, Mark	Moussally, Christian	Rubinstein, Mitchell	Whitman, Sidney
Komabayashi,	Moynihani, Paula	Saade, Antoine	Williams, David
Takashi	Murakami, Shinya	Sabbagh, Joseph	Williams, John N.
Kong, Hyung-Jun	Nader, Nabih Antoine	Sabino, Gregory J.	Williams, Larry N.
Kruger, Jonathon	Nagy, Katalin	Saenz Barboza, Jairo	Williams, Leslee
Kugel, Gerard	Ng, Jonathan	A.	Woodmansey, Karl
Lambert, Douglas L.	Ng, Samson	Salierno, Christopher	Yamalik, Nermin
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Liu, Yi	Panchal, Neeraj	Shirley, Brett	S.
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Neighbors, Bonita D., 2021,  
Aldie, Virginia  
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2022, Charleston, West  
Virginia  
Risner-Bauman, Alicia, 2019,  
Horseheads, New York  
Vakil, Shamik S., 2022,  
Charlotte, North Carolina  
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Sioux Falls, South  
Dakota  
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Coral Gables, Florida  
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Glen Allen, Virginia  
Karp, William H., 2019,  
Fayetteville, New York  
Kenyon, David J., 2019,  
Altoona, Wisconsin  
Lawson, Amber P., 2022,  
Macon, Georgia  
Mansour, Sam, 2021, Erie,  
Pennsylvania  
Manzanares, David J., 2020,  
Albuquerque, New  
Mexico  
Pitmon, Stephen M., 2021,  
Colchester, Vermont

Raum, Rhett E., 2021, *ad*  
*interim*, Lafayette,  
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Woodridge, Illinois  
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Chicago, Illinois

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Greenwich, Rhode Island  
Chung, Kenneth L., 2020,  
Milwaukie, Oregon  
Dens, Kevin W., 2022,  
Brainerd, Minnesota  
Dougherty, William V., III,  
2022, Falls Church,  
Virginia  
Hollingsworth, James W.,  
2020, Newton,  
Mississippi  
Makowski, Martin J., 2019,  
Clinton Township,  
Michigan  
Maldonado, Yvonne E., 2021,  
El Paso, Texas  
Markarian, Randall C., 2021,  
Swansea, Illinois  
Mihalo, Mark J., 2019, Ogden  
Dunes, Indiana  
Olenwine, Cynthia, 2020,  
Nazareth, Pennsylvania  
Porcelli, Eugene G., 2022,  
Garden City, New York  
Scott, L. King, 2022, West  
Monroe, Louisiana  
Stuefen, Sara E., 2019,  
Vinton, Iowa\*  
Watson, Hope E., 2021,  
Maryville, Tennessee  
Weber, Walter G., 2021,  
Monte Sereno, California

Aravamudhan, Krishna,  
*director*, Chicago, Illinois

#### Dental Education and Licensure

Gehani, Rekha C., 2020,  
(ADA), *chair*, Jackson  
Heights, New York  
Niessen, Linda C., 2021  
(ADEA), *vice chair*,  
Davie, Florida  
Boden, David F., 2020,  
(ADA), Port Saint Lucie,  
Florida  
Cassella, Edmund A., 2019,  
(ADA), Honolulu, Hawaii  
DiFranco, Geri Ann, 2020  
(AADB), Park Ridge,  
Illinois  
Donoff, R., Bruce, 2020,  
(ADEA), Boston,  
Massachusetts  
Hammer, Daniel A., 2019,  
Fort Worth, Texas\*  
Hangorsky, Uri, 2022,  
(ADEA), Philadelphia,  
Pennsylvania  
Hardesty, Willis "Stan" S., Jr.,  
2022 (ADA), *ad interim*,  
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Korzeb, Jennifer, 2019,  
(ADA), Methuen,  
Massachusetts  
Lepowsky, Steven M., 2019  
(ADEA), Farmington,  
Connecticut  
Lim, Jun S., 2021 (ADA), *ad*  
*interim*, Chicago, Illinois  
Litaker, William M., Jr., 2021,  
(AADB), Gastonia, North  
Carolina  
Miles, Maurice S., 2019,  
(AADB), Bowie, Maryland  
Nielson, David L., 2022  
(AADB), Anchorage,  
Alaska  
Plemons, Jacqueline M.,  
2021 (ADA), Dallas,  
Texas  
Thomas-Moses, Donna, 2022  
(ADA), Carrollton,  
Georgia  
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Chicago, Illinois

---

\* New Dentist member

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 Liddell, Rudolph T., III, 2020, *vice chair*, Brandon, Florida  
 Aflatooni, Nima, 2020, Gold River, California  
 Berkley, Jeffrey S., 2021, Orange, Connecticut  
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 Connell, Christopher M., 2019, Lyndhurst, Ohio  
 Donald, W. Mark, 2022, Louisville, Mississippi  
 Hale, Hal E., 2019, Andover, Kansas  
 Ho, Duc M., 2021, Katy, Texas  
 Hoddick, James A., 2022, Tonawanda, New York  
 House, Allison B., 2022, Phoenix, Arizona  
 Liang, Christopher G., 2021, Potomac, Maryland  
 Limberakis, Cary J., 2021, Abington, Pennsylvania  
 Medovic, Michael D., 2020, Wheeling, West Virginia  
 Mikell, Julia K., 2019, Columbia, South Carolina  
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 Saba, Michael, Union, New Jersey\*  
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**Ethics, Bylaws and Judicial Affairs**

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 Browder, Larry F., 2020, Montgomery, Alabama

Burns, Jill M., 2021, Richmond, Indiana  
 Clark, Alma J., 2022, San Quentin, California  
 Cohen, Donald F., 2020, Houston, Texas  
 Compton, Lindsay M., 2019, Arvada, Colorado\*  
 Cranford, William D., Jr., 2022, Rock Hill, South Carolina  
 Griffin, Seth W., 2020, Benton Harbor, Michigan  
 Howley, Thomas A., Jr., 2019, Perkiomenville, Pennsylvania  
 Johnson, Jay "Drew" A., 2022, Cocoa, Florida  
 Jonke, Guenter J., 2021, Stonybrook, New York  
 Patel, Onika R., 2021, Scottsdale, Arizona  
 Patel, Vishruti M., 2019, Plainfield, Illinois  
 Rice, Marvin E., 2019, Mexico, Missouri  
 Soileau, Kristi M., 2020, New Orleans, Louisiana  
 Wilson, Robert J., Jr., 2021, Gaithersburg, Maryland  
 Elliott, Thomas C., Jr., *director*, Chicago, Illinois

**Government Affairs**

Armstrong, Craig S., 2019, *chair*, Houston, Texas  
 Fijal, Phillip J., 2020, *vice chair*, Des Plains, Illinois  
 Bishop, Deborah S., 2020, Huntsville, Alabama  
 Cheek, Daniel K., 2019, North Chapel Hill, Carolina  
 Cohlma, Matthew, 2022, Oklahoma City, Oklahoma  
 Desrosiers, Mark B., 2020, Columbia, Connecticut  
 Hisel, John E., Jr., 2022, Kuna, Idaho  
 Kalarickal, Zacharias J., 2020, Wesley Chapel, Florida

Knowles, Lisa L., 2020, *ad interim*, East Lansing, Michigan  
 Medrano-Saldana, Lauro, 2019, Valley Stream, New York  
 Messina, Matthew J., 2021, Columbus, Ohio  
 Nguyen, Robin M., 2019, Trinity, Florida\*  
 Reitz, John V., 2021, Reading, Pennsylvania  
 Stanislav, Leon E., 2022, Clarksville, Tennessee  
 Terlet, Ariane, 2019, Berkeley, California  
 Vitale, Mark A., 2022, Edison, New Jersey  
 White, David M., 2021, Reno, Nevada  
 Willett, Emily S., 2021, Lincoln, Nebraska  
 Yaghoubi, Roxanne, *director*, Washington, D.C.

**Members Insurance and Retirement Programs**

Ellison, Naomi L., 2019, *chair*, Los Angeles, California  
 Johnston, Jon J., 2020, *vice chair*, Punxsutawney, Pennsylvania  
 Ahern, John P., 2021, Derry, New Hampshire  
 Jacob, Hubert J., 2021, Cincinnati, Ohio  
 Jolly, Sr., Robert L., 2019, North Little Rock, Arkansas  
 Kido, Scott H., 2020, Nampa, Idaho  
 Kilcollin, Katie L., 2019, Union, West Virginia  
 Luquis-Aponte, Wilma, 2021, El Paso, Texas  
 Matin, Britany F., 2019, Auburn, Alabama\*  
 Olenyn, Paul T., 2021, Burke, Virginia  
 Pirmann, Peter J., 2019, Carbondale, Illinois  
 Sterritt, Frederic C., 2020, Raritan, New Jersey

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\* New Dentist member

Sokolowski, Joseph E., 2021,  
Saint Louis, Missouri  
Thompson, Michael R., 2021,  
Scottsdale, Arizona  
Tota, Christopher M., 2020,  
Hawthorne, New York  
White, Cecil, Jr., 2020,  
Atlantic Beach, Florida  
Wood, C. Rieger, III, 2021,  
Tulsa, Oklahoma  
Tiernan, Rita, *senior  
manager*, Chicago,  
Illinois

### Membership

Irani, Karim, 2019, *chair*,  
Beverly Hills, California  
Freedman, I. Jay, 2020, *vice  
chair*, Abington,  
Pennsylvania  
Berg, Tamara S., 2022,  
Yukon, Oklahoma  
Blew, Bryan C., 2021, Moline,  
Illinois  
Bogan, Kyle D., 2022,  
Delaware, Ohio  
Chatterjee Kirk, Pia, 2020,  
Jackson, Mississippi  
Czerniak, Lauren, 2019,  
Toledo, Ohio\*  
Eggnatz, Michael D., 2022,  
Weston, Florida  
Hanlon, Mary Jane, 2020,  
Kennebunkport, Maine  
Kahl, Jeffrey A., 2021,  
Colorado Springs,  
Colorado  
Kampfe, Mark I., 2020, Rapid  
City, South Dakota  
Ketron, Summer C., 2021,  
Lubbock, Texas  
Mutschler, Mark D., 2022,  
Oregon City, Oregon  
Patel, Meenal H., 2019, Cary,  
North Carolina  
Riordan, Danielle M., 2020,  
St. Peters, Missouri  
Skolnick, Jay, 2021, Webster,  
New York  
Tigani, Stephen, 2019,  
Washington, D.C.  
Vitek-Hitchcock, Alexa, 2019,  
DeWitt, Michigan  
Bronson, Elizabeth, *senior  
manager*, Chicago,  
Illinois

### Scientific Affairs

Mariotti, Angelo, 2019, *chair*,  
Columbus, Ohio  
Geisinger, Maria L., 2020,  
*vice chair*, Birmingham,  
Alabama  
Alapati, Satish B., 2021,  
Chicago, Illinois  
Bedran-Russo, Ana K., 2021,  
Chicago, Illinois  
Dionne, Raymond A., 2022,  
New Bern, North Carolina  
Fontana, Margherita R.,  
2020, Ann Arbor,  
Michigan  
Frazier, Kevin B., 2022,  
Augusta, Georgia  
Gonzalez-Cabezas, Carlos,  
2022, Ann Arbor,  
Michigan  
Hargreaves, Kenneth M., San  
Antonio, Texas  
Kademani, Deepak, 2019,  
Minneapolis, Minnesota  
Keels, Martha Ann, 2020,  
Chapel Hill, North  
Carolina  
Lawson, Nathaniel C., 2019,  
Birmingham, Alabama\*  
Madurantakam,  
Parthasarathy A., 2021,  
Richmond, Virginia  
Mascarenhas, Ana Karina,  
2022, Fort Lauderdale,  
Florida  
Park, Jacob G., 2020, *ad  
interim*, San Antonio,  
Texas  
Parker, William, 2019, Davis,  
Florida  
Patton, Lauren L., 2021,  
Chapel Hill, North  
Carolina  
Tinanoff, Norman, 2019,  
Lutherville, Maryland  
Lyznicki, James M., *senior  
manager*, Chicago,  
Illinois

### Commissions

#### Continuing Education

#### Provider Recognition

Rosenthal, Nancy R., 2019,  
(ADA), *chair*, Huntington  
Valley, Pennsylvania

Reed, Susan, 2020, *vice  
chair*, (AAPHD),  
Charleston, South  
Carolina  
Ball, John D., 2022 (ACP),  
Kansas City, Missouri  
Bennett, Jeffrey D., 2019,  
(AAOMS), Avon, Indiana  
Burgess, Karen, 2022  
(ASCDE), Okemos,  
Michigan  
Cipes, Monica H., 2021  
(AAPD), West Hartford,  
Connecticut  
Cuevas-Nunez, Maria C.,  
2021 (AAOMP), Downers  
Grove, Illinois  
DeWood, Gary M., 2021  
(ADA), Scottsdale,  
Arizona  
Hammond, Barry, 2019,  
Evans, Georgia  
Keiser, Karl, 2021, (AAE),  
Boerne, Texas  
Kim, David M., 2022 (AAP),  
Boston, Massachusetts  
Lipp, Mitchell J., 2019, New  
York, New York  
Parker, Steven E., 2021  
(ADA), Massillon, Ohio  
Randall, Ken, 2020 (ADA) *ad  
interim*, Chattanooga,  
Tennessee  
Sadrameli, Mitra, 2022  
(AAOMR), Chicago, IL  
Verma, Arpana S., 2019,  
(AADB), Frederick,  
Maryland  
Borysewicz, Mary, *director*,  
Chicago, Illinois

#### Dental Accreditation

Jee, Arthur Chen-Shu, 2020,  
(AADB), *chair*, Laurel,  
Maryland  
Hicks, Jeffery, 2021  
(SCDA/ADEA), *vice  
chair*, San Antonio,  
Texas  
Agar, John, 2021, (ACP),  
Farmington, Connecticut  
Callahan Barnard, Susan,  
2019, (ADHA), Paramus,  
New Jersey

Casser, Linda, 2022 (Public), Elkins Park, Pennsylvania  
 Cushing, David, P., 2019, (Public), Princeton, New Jersey  
 Flaitz, Catherine, M., 2019, (AAPD), Columbus, Ohio  
 Friedrichsen, Steven, 2020, (ADEA), Pomona, California  
 Geist, James, R., 2019, (AAOMR), Bloomfield, Michigan  
 Hasty, Christopher M., 2021, (ADA), Tifton, Georgia  
 Haubrick, Kevin D., 2022 (Public), Cypress, Texas  
 Hebl, Monica M., (ADA), *ad interim*, Milwaukee, Wisconsin  
 Hellstein, John W., 2022 (AAOMP), Iowa City, Iowa  
 Hershey, H. Garland, Jr., 2019, (AAO), Chapel Hill, North Carolina  
 Jackson, Adolphus, 2021 (AADB), Birmingham, Alabama  
 Javed, Tariq, 2019, (ADEA), Mount Pleasant, South Carolina  
 Johnson, Bradford, 2020, (AAE), Chicago, Illinois  
 Katancik, James Allen, 2022 (AAP), Portland, Oregon  
 Kinney, Bruce, 2019, (AADB), Yakima, Washington  
 Levy, Steven, 2020, (AAPHD), Iowa City, Iowa  
 McClemens, Charles, 2021 (NADL), Eau Claire, Wisconsin  
 Mo, Nancy, 2019, (ASDA/ADEA), Brooklyn, New York  
 Nelson, William, 2021 (AAOMS), Green Bay, Wisconsin  
 Rotter, Bruce E., 2022 (ADEA), Alton, Illinois  
 Stentiford, Deanna, 2020, (ADAA), Ocala, Florida

Schwartz, Timmothy J., 2019 (ADA), Pekin, Illinois  
 Shaffer, Marybeth D., 2022 (AADB), Columbiana, Ohio  
 Stein, Alan R., 2022 (ADA), Northridge, California  
 Stentiford, Deanna, 2020 (ADAA), Ocala, Florida  
 Unser, Glenn, J., 2019, (Public), Torrance, California  
 Wolinsky, Lawrence, 2021 (ADEA), Dallas, Texas  
 Tooks, Sherin, Ed.D., M.S., *director*, Chicago, Illinois

#### National Dental Examinations

Robinson, William F., 2020, (AADB), *chair*, Tampa, Florida  
 Leone, Cataldo, 2020, (ADEA), *vice chair*, Boston, Massachusetts  
 Allaire, Joanna, 2022 (ADHA), The Woodlands, Texas  
 Haley, Cheryl D., 2019, (ADA), Ozark, Missouri  
 Irons, Roy L., 2021, (AADB), Gulfport, Mississippi  
 Kerst, Jeffrey, 2019 (ASDA Student Observer), New Orleans, Louisiana  
 King, Michael E., 2022 (ADA), Woodbridge, Virginia  
 Maggio, Frank A., 2021 (AADB), Dundee, Illinois  
 Nadershahi, Nader A., 2019, (ADEA), San Francisco, California  
 Ragunathan, Kanthasamy, 2021, (ADA), Canton, Ohio  
 Rensch, Brandon (ASDA Student Observer), Omaha, Nebraska  
 Sanders, R. Michael, 2022, Las Vegas, Nevada  
 Thomas, Wesley Delaine, 2021, (AADB), Washington, DC

Weiss, Leonard P., 2019, (AADB), Beachwood, Ohio  
 Weiss, Leonard P., 2019 (AADB), Beachwood, Ohio  
 Zambon, Joseph J., 2021 (ADEA), Buffalo, New York  
 Waldschmidt, David, *director and secretary*, Chicago, Illinois

#### Recognition of Dental Specialties and Certifying Boards

Norman, Charles H., III, 2021 (ADA), *chair*, Greensboro, North Carolina  
 Boyle, James M., III, 2020, (AAOMS), *vice chair*, York, Pennsylvania  
 Aldredge, Wayne A., 2021, (AAP), Holmdel, New Jersey  
 Altman, Donald S., 2020, (AAPHD), Mesa, Arizona  
 Battaglia, Joseph A., 2021, (ADA), Wayne, New Jersey  
 Benz, James D., 2021, (ADA), Chicago, Illinois  
 Broughten, Renee M., 2022 (Public), Bloomington, Minnesota  
 Cooley, Ralph A., 2022 (ADA), Houston, Texas  
 Delarosa, Robert, 2019, Baton Rouge, Louisiana  
 Friedel, Alan E., 2022 (ADA), Hollywood, Florida  
 Ganzberg, Steven, 2019 (American Society of Dentist Anesthesiologists) *interim*, Los Angeles, California  
 Gohel, Anita, 2021 (AAOMR), Dublin, Ohio  
 Henner, Kevin A., 2019 (ADA), Deer Park, New York  
 Hering, Denise L., 2020 (ADA), Columbus, Ohio

Johnson, William T., 2022  
(AAE), Iowa City, Iowa  
Kiesling, Roger L., 2020  
(ADA), Helena, Montana  
Kwasny, Andrew J., 2020  
(AAO), Fairview,  
Pennsylvania  
McAllister, Brian S., 2019  
(ADA) *interim*,  
Middletown, Delaware  
Tuminelli, Frank J., 2022  
(ACP), Great Neck, New  
York  
Wright, John M., M.S., 2019  
(AAOMP), Dallas, Texas  
Zust, Mark R., 2019 (ADA),  
Saint Peters, Missouri  
Baumann, Cathy, *director*,  
Chicago, Illinois

### **Standing Committees**

#### **Advisory Committee on Annual Meetings**

McDougall, Kenneth, 2019,  
*chair*, Jamestown, North  
Dakota  
Stephens, James D., 2020,  
*vice chair*, Palo Alto,  
California  
Macias, C. Roger, Jr., 2019,  
*general member and  
chair of the 2019  
meeting*,  
San Antonio, Texas  
Tertel, Nanette C., 2020,  
*general member, 2019  
program chair and chair  
of the 2020 meeting*,  
Toledo, Ohio  
Blackwell, Robert L., 2021,  
Alton, Illinois  
Hughes, Bertram J., 2020  
*local arrangements  
member*, Gainesville,  
Florida  
Kirkegaard, Paul F., 2019,  
Saint Paul, Minnesota  
Love, Melanie R., 2023, Falls  
Church, Virginia  
McKelvey, H. Charles, 2022,  
Twain Harte, California  
Radack, III, Stephen T.,  
2019, Erie, Pennsylvania

Shinbori, Dennis D., 2019  
*local arrangements  
member*, San Francisco,  
California  
Skinner, Robert L., 2023, Fort  
Smith, Arkansas  
Vitkus, Lauren E., Victor,  
New York\*  
Weisfuse, P. Deborah, 2021,  
New York, New York  
Cantalupo, David, *director*,  
Chicago, Illinois

#### **New Dentist Committee**

Jarvis, Raymond A., 2019,  
*chair*, Shreveport,  
Louisiana  
Mattingly, Emily A., 2020,  
*vice chair*, Chillicothe,  
Missouri  
Compton, Lindsay M., 2021,  
Arvada, Colorado  
Czerniak, Lauren M., 2019,  
Toledo, Ohio  
Fallon, Andrea C., 2019,  
Westfield, Massachusetts  
Feldman, Steven G., 2022,  
Rockville, Maryland  
Fukuoka, Brooke M., 2022,  
Jerome, Idaho  
Greene, Colleen, 2020,  
Milwaukee, Wisconsin  
Hall, Daniel W., 2021,  
Piedmont, South Carolina  
Kai, Kevin Y., 2022, San  
Francisco, California  
Matin, Britany F., 2020,  
Auburn, Alabama  
Nguyen, Robin, 2019, Trinity,  
Florida  
Shisler, Adam C., 2020,  
Houston, Texas  
Stuefen, Sara E., 2020,  
Vinton, Iowa  
Vitkus, Lauren E., 2021,  
Victor, New York  
Walbridge, Seth A., 2022,  
Easton, Pennsylvania  
Youel, Ben C., 2021,  
Chicago, Illinois  
Lavick, Tera, *director*,  
Chicago, Illinois

#### **Committee on Local Arrangements**

Shinbori, Dennis, 2019 CLA  
*general chair*, San  
Francisco, CA  
Van Sicklen, James, 2019  
CLA *vice chair*, Stockton,  
CA  
Duhn, Stafford, Programs *co-  
chair*, San Francisco, CA  
Jang, Jeffrey, Operations, *co-  
chair*, San Francisco, CA  
Lee, William, Operations, *co-  
chair*, San Francisco, CA  
Werner, Erich, Programs, *co-  
chair*, Los Gatos, CA

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\* New Dentist member

**Annual Session Volunteers**

Abari, Brandon  
 Aclan, Daniel  
 Agarwal, Swati  
 Agrawal, Priyadarshini  
 Alejandrino-Buell, Marie  
 Ali-Rubaie, Zainab  
 Alston, Pamela  
 Ambus, Toni  
 Azimzadeh, Nasrin  
 Balaji, S.M.  
 Banerjee, Reeti  
 Banta, Gilda  
 Becker, Shari  
 Benjamin, Hibret  
 Bentley, Carsen  
 Benton, Kim  
 Berd, Josh  
 Beteta, Stephanie  
 Bishop, Timothy  
 Boyd, Randall  
 Brown, Carolyn  
 Buitrago Huertas, Edlin  
 Cai, Qixia  
 Cajimat, Jennifer  
 Canham, Leslie  
 Carlson-Larson, Ruby  
 Chan, Clifton  
 Chan, Raymond  
 Chan, Wai  
 Chang, Kara  
 Chang, Grace  
 Chann, Gina  
 Chaudhari, Kaushal  
 Chee, Warren  
 Chen, Phyllis  
 Cheung, Eric  
 Chittam, Harish  
 Chow, P.  
 Choy, Russell  
 Chua, Derrick  
 Chuang, Rita  
 Chun, Brian  
 Chuong, Christopher  
 Clauson, Tamara  
 Cohil, Kirk  
 Comeau, Jules  
 Copeland, Frances  
 Corvacho, Kevin  
 Creasey, Jean  
 Danford, Michael  
 Deauna, Jessica  
 Diaz, Luisa  
 Do, Andrea  
 Dominiak, Marzena

Doyle, Ronda  
 Duebbert, Ingrid  
 Dumas, Stevan  
 Edwards, Letitia  
 Ehsan, David  
 Elahi, Nushrah  
 Elam, Deborah  
 Elkhatib, Sherif  
 Elkhatieb, Amro  
 Engel, Amy  
 Eom, Daeun  
 Escutin, Peter  
 Evans, Susan  
 Fa, Bernadette  
 Fan, Stephen  
 Farazpey, Alireza  
 Fassihi, Ali  
 Fat, J.C.  
 Fat, Shareen  
 Fathipour, Bitia  
 Fei, Angela  
 Feldman, James  
 Fitzpatrick, Courtney  
 Fong, Robert  
 Fong, John  
 Freeman, Daniel  
 Fritz, Ronald  
 Gaba, Corrina  
 Gao, Yan  
 Gee, John  
 Ghotra, Jai-Inder  
 Glissman, Chelsea  
 Godet, Yvette  
 Godil, Farin  
 Gomez, Patrick  
 Hall, LaJuan  
 Han, James  
 Hart, Brad  
 Hebel, Lauren  
 Henell, Lindi  
 Hijazi, Adelaida  
 Hirano, Hiroyuki  
 Hite, Don  
 Hitzfield, John  
 Horst, Orapin  
 Hsiao, Shih Yen Paul  
 Hu, Ana  
 Iqbal, Hassan  
 Jacobsen, Peter  
 Jang, Corey  
 Jang, Gail  
 Jang, Andrew  
 Javidan-Nejad, Salvia  
 Jawad, Michele  
 Jayakumar, Sruthi  
 Jow, Helen

Jung, Changhyun  
 Kailondo, Georgian  
 Kao, Wesley  
 Karir, Lata  
 Kaufman, Stanley  
 Kaza, Murthy  
 KC, Anjalika  
 Khan, Zafrulla  
 Kim, Saewon  
 Koffi Gnagne, Yolande  
 Kouchi, Jerold  
 Kumar, Purnima  
 Laflamme, Michael  
 Lagos, Joanne  
 Lai, Ross  
 Laing, Kevin  
 Larin, Lilia  
 Le, Oanh  
 Le, Andrew  
 Lee, Natasha  
 Lee, Sonho  
 Leong, Lester  
 Lesniak, Rosanna  
 Leung, John  
 Lew, Michael  
 Liu, Yidi  
 Lo, Victoria  
 Los, Stephen  
 Louie, Baldwin  
 Low, Lester  
 Lum, Darwin  
 Lyon, Cindy  
 Madera, Leonora  
 Magtanong-Madrid, Rachelle  
 Mahida, Kartik  
 Malin, Andrea  
 Mamidi, Jyothirmayi  
 Marcus, Dena  
 Marks, Clifford  
 Martini, Stephanie  
 Mascolo, Alysia  
 Masters, Antonette  
 Maxwell, Silvia  
 McKelvey, Gloria  
 Meadows, Coleman  
 Menage Bernie, Kristy  
 Mramor, Andrew  
 Nath, Avantika  
 Nazeri, Sina  
 Nguyen, Thucdan  
 Nguyen, Anh  
 Nour, Razan  
 Oliver, Janice  
 Osuna, Tricia  
 Oswal, Punita  
 Parrone, Martina

Patel, Hema  
Patel, Sanjay  
Patel, Rita  
Patel, Rishin  
Pham, Christine  
Phan, Nam  
Phen, Jordan  
Plotkin, Norman  
Polonsky, Gregory  
Porco, Mark  
Quilici, Garrett  
Radcliffe, Lawrence  
Raff, Curtis  
Ragadio, Delia  
Rajpal, Manoj  
Ramley, Stanley  
Rashid, A  
Raval, Nilixa  
Robinson, Katie  
Saber, Nick  
Sakagawa, Gerin  
Salimi, Sima  
Samant, Asha  
Sangsurasak, Sumalee  
Saroyan, Jack  
Sato, Mendel  
Saville, Suzanne  
Schafer, M.  
Schmidt, Eric  
Schneider, George  
Sekiguchi, Jill  
Senseny, Charlotte

Shaffer, Marybeth  
Shah, Erin  
Shah, Rutu  
Shapira, Eric  
Sheu, Jessica  
Shinbori, Nicole  
Shinkawa, Nicole  
Shultz, Mark  
Singh, Harpreet  
Sipin, Joseph  
Soderstrom, Susan  
Sooahoo, Gerald  
Surdi, Ronald  
Swearingen, John  
Taheri, Nazlie  
Tai, Alice  
Tan, Johanna  
Tang, Hanna  
Taniguchi, Staci  
Taura, Clint  
Thai, Rachel  
Thakur, Yogita  
Thomason, Ethelyn  
Thompson, Maria  
Tittle, Kenneth  
Tom, Franson  
Tran, Pauline  
Treppa, Lindsay  
Tyler, Claire  
Tyler, Eric  
Urata, Janelle  
Uriu, Gary

Ventura, Diana  
Vlachos, Anthoula  
Voong, Lily  
Wen, Jing  
Wilson, Precious  
Win, Lynnelle  
Wong, Jeffrey  
Wong, Ming  
Wong, Sandy  
Wong, Les  
Wong, Ralan  
Wu, Janet  
Wu, Arthur  
Yamamoto, Takeo  
Yarborough, Craig  
Yee, Calvin  
Yee, Julie  
Yee, Barbara  
Yee, Sylvia  
Yee, Tammy  
Yee, Brad  
Yee, Alexis  
Yim, William  
Yoon, Ji Won  
Yoon, Kyung  
Young, Douglas  
Yuen, Annie  
Zabek, Gregory  
Zhang, Yan  
Zhang, David

# Appendix

## Notes

# Historical Record

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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

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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. Burkhart	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	Bernerd 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. Saddoris	1987	Las Vegas
1987–88	James A. Saddoris	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
2017–18	Joseph P. Crowley	K. T. O'Loughlin	Ronald P. Lemmo	2018	Honolulu
2018–19	Jeffrey M. Cole	K. T. O'Loughlin	Ted Sherwin	2019	San Francisco

#### Living Former Presidents, American Dental Association

<b>Term</b>	<b>President</b>	<b>Term</b>	<b>President</b>
1986–1987	Joseph A. Devine	2006–2007	Kathleen Roth
1988–1989	Arthur A. Dugoni	2007–2008	Mark J. Feldman
1993–1994	James H. Gaines	2008–2009	John S. Findley
1994–1995	Richard W. D'Eustachio	2009–2010	Ronald L. Tankersley
1995–1996	William S. Ten Pas	2010–2011	Raymond F. Gist
1996–1997	Gary Rainwater	2011–2012	William R. Calnon
1997–1998	David A. Whiston	2012–2013	Robert A. Faiella
2001–2002	D. Gregory Chadwick	2013–2014	Charles H. Norman
2002–2003	T. Howard Jones	2014–2015	Maxine Feinberg
2003–2004	Eugene Sekiguchi	2015–2016	Carol Gomez Summerhays
2004–2005	Richard Haught	2016–2017	Gary L. Roberts
2005–2006	Robert M. Brandjord	2017–2018	Joseph P. Crowley
2006–2007	Kathleen Roth	2018–2019	Jeffrey M. Cole

## 2019 House of Delegates Attendance Record

	Meetings					Meetings			
	Registered	1	2	3		Registered	1	2	3
<b>Air Force</b>									
<b>Delegates 2</b>									
Grabowski, Douglas, Fairfax, VA	•		•	•	Patel, Onika, Phoenix	•		•	•
Nuttall, Christopher, Vacaville, CA	•		•	•	Robertson, Kirk, Flagstaff	•		•	•
<b>Alternate</b>									
Smith, Christopher, Southern Pines, NC	•		•		Roda, Robert, Scottsdale	•		•	•
<b>Alabama</b>									
<b>Delegates 5</b>									
Bishop, Deborah, Huntsville	•		•	•	Shanahan, Bryan, Flagstaff	•		•	•
Browder, Larry, Montgomery	•		•	•	<b>Alternates</b>				
Gardner, Stacey, Huntsville	•		•	•	Caputo, Anthony, Tucson	•			
Ingram, William, Huntsville	•		•	•	Enos, Jennifer, Chandler	•			
Marshall, Rodney, Tuscaloosa	•		•		Hammi Blue, Ann, Phoenix	•			
<b>Alternates</b>									
Gamotis, Robert, Opelika	•				Harvey, Brien, Tucson	•			
Kent, Leigh, Birmingham	•		•		Hughes, Mark, Glendale	•			
Jones, Robert, Montgomery	•				Lear, Lisa, Tucson	•			
Moore, Lauren, Mobile	•				Snyder, Randolph, Yuma	•			
Phillips, James, Auburn	•				Wood, Susan, Paradise Valley	•			
<b>Alaska</b>									
<b>Delegates 2</b>									
Robinson, Julie, Anchorage	•		•	•	<b>Arkansas</b>				
Willis, Heather, Fairbanks	•		•	•	<b>Delegates 3</b>				
<b>Alternate</b>									
Arneson, James, Kodiak	•				Fiddler, Terry, Conway	•		•	•
<b>American Student Dental Association</b>									
<b>Delegates 5</b>									
Binder, Laura, Corpus Christi, TX	•		•	•	Skinner, Robert, Fort Smith	•		•	•
Huang, Kai, Orlando, FL	•		•	•	Whitis, H. Warren, Osceola	•		•	•
Pandya, Anisha, Boston, MA	•		•	•	<b>Alternates</b>				
Tokarski, Matt, Woodridge, IL	•		•	•	Golden, Kristi, Hot Springs	•			
Valentin, Karina, Chicago, IL	•		•	•	Kosmitis, Kim, Pine Bluff	•			
<b>Alternates</b>									
Desai, Aditi, Houston, TX	•				Osborne, Richard, Fayetteville	•			
Eichler, Grace, Charleston, SC	•				<b>Army</b>				
Gresham, Makayla, Morgantown, WV	•				<b>Delegates 2</b>				
Rensch, Brandon, Omaha, NE	•		•		Patterson, Craig, San Antonio, TX	•		•	•
Shapiro, Sydney, New York, NY	•				Tanner, Stephen, Fairfax, VA	•		•	•
<b>Arizona</b>									
<b>Delegates 8</b>									
Curtis, Eric, Safford	•		•	•	<b>Alternates</b>				
House, Allison, Phoenix	•		•	•	Standage, Richard, El Paso, TX	•			
Olsen, Fred, Phoenix	•		•	•	Tucker, Melissa, Lawton, OK	•			
Pafford, Gregory, Phoenix	•		•	•	<b>California</b>				
<b>Delegates 71</b>									
					Ackerman, Gary, Carmichael	•		•	•
					Aflatooni, Nima, Gold River	•		•	•
					Barnes, Richard, Visalia	•		•	•
					Bell, Brian, Tulare	•		•	•
					Bellamy, Wallace, Elk Grove	•		•	•
					Blake, John, Long Beach	•		•	•
					Brattesani, Cynthia, San Francisco	•		•	•
					Campbell, Matthew, Sacramento	•		•	•
					Carney, Kerry, Benicia	•		•	•
					Carrington, Adrian, Sacramento	•		•	•
					Cassat, D. Douglas, San Diego	•		•	•
					Christiansen, Douglas, San Diego	•		•	•
					Clark, Alma, Hayward	•		•	•
					Creasey, Jean, Nevada City	•		•	•

• 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
Crowson, Steven, Chico	•	•	•	•	Taylor, John, Ladera Ranch	•	•	•	•
Davidson, Daniel, San Francisco	•	•	•	•	Terlet, Ariane, Berkeley	•	•	•	•
De Tomasi, Dennis, Clearlake	•	•	•		Thenard, Sharine, Alameda	•	•	•	
Demichelis, Elizabeth, Modesto	•	•	•	•	Tippett-Whyte, Judee, Stockton	•	•	•	•
Dougan, Gary, Long Beach	•	•	•	•	Townsend, Julia, Los Gatos	•	•	•	•
Duffala, Gail, San Francisco	•	•	•	•	Wallis, Kenneth, Santa Clara	•	•	•	•
Ehrler, Clelan, Redlands	•	•	•	•	Weber, Walter, Monte Sereno	•	•	•	•
Elkhatieb, Amro, Lodi	•	•	•	•	Woo, Debra, Boulder Creek	•	•	•	•
Ellison, Naomi, Los Angeles	•	•	•	•	<b>Alternates</b>				
Felsenfeld, Alan, Los Angeles	•	•	•	•	Abeldt, Philip, Elk Grove	•			
Finney, Debra, Folsom	•	•	•	•	Altrock, Christine, San Diego	•			
Ford, Jonathan, Huntington Beach	•	•	•	•	Ayson, Paul, Visalia	•			
Frawley, Michele, Los Angeles	•	•	•	•	Benedict, Nannette, Scotts Valley	•			
Gandola, Robert, San Diego	•	•	•	•	Chan, Raymond, San Lorenzo	•			
Gereis, Mahfouz, Panorama City	•	•	•		Chen, Esther, Buena Park	•			
Glasband, Gary, Long Beach	•	•	•	•	Courtney, Martin, Northridge	•			
Hanlon, Robert, Escondido	•	•	•	•	Gowda, Ramesh, Anaheim	•			
Harrison, Kenneth, Loma Linda	•	•	•	•	Habjan, Denise, Santa Ana	•			
Herman, Gary, Los Angeles	•	•	•	•	Hirota, Misako, National City	•			
Hughson-Otte, Virginia, Indio	•	•	•	•	Judd, Bryan, Roseville	•			
Irani, Karin, San Fernando	•	•	•		Kim, Pilseong, Los Angeles	•			
Jenkins, Daniel, Chino Hills	•	•	•	•	Leung, Chi, Glendale	•			
Keating, Kevin, Sacramento	•	•	•	•	Low, Lyndon, Stockton	•			
Kend, Steven, Torrance	•	•	•	•	Mazdeyasnan, Afshin, Northridge	•			
Kim, Scott Y., Los Angeles	•	•	•	•	McCutcheon, Carol, Los Gatos	•			
Lad, Sunjay, Temple City	•	•	•	•	Menold, Geralyn, Hollister	•			
Lee, Natasha, San Francisco	•	•	•		Nakamura, Wayne, Ontario	•			
Lojeski, Stephen, Upland	•	•	•	•	Namazikhah, Sadegh, Encino	•			
Lyon, Cindy, Murphys	•	•	•	•	Steiner, Ann, Palos Verdes Estates	•			
Marcos, Carliza, San Carlos	•	•	•	•	Ton, Thanh Tam, Arcadia	•			
Marongiu, Nicholas, La Jolla	•	•	•	•	Tran, Amy, San Gabriel	•			
Middleton, Gerald, Riverside	•	•	•	•	Wong, Benson, South San Francisco	•			
Nadershahi, Nader, San Francisco	•	•	•	•					
Nagy, Richard, Santa Barbara	•	•	•		<b>Colorado</b>				
Nour, Noha, Tustin	•	•	•	•	<b>Delegates 10</b>				
Pascarella, Jonathan, Red Bluff	•	•	•	•	Kahl, Jeffrey, Colorado Springs	•	•	•	•
Patel, Sanjay, Pittsburg	•	•	•	•	Kaufmann, Stephenie, Woodland Park	•	•	•	•
Patel, Virenchandra, Folsom	•	•	•	•	Kessler, Brett, Denver	•	•	•	
Pendurkar, Shakalpi, Los Gatos	•	•	•	•	Kunzman, Nathaniel, Greeley	•	•	•	•
Reed, John, Stockton	•	•	•	•	Mauterer, Carrie, Thornton	•	•	•	•
Robinson, Lindsey, Grass Valley	•	•	•	•	Murray, Rhett, Aurora	•	•	•	•
Rollofson, Christy, Elk Grove	•	•	•	•	Paisley, Ian, Brighton	•	•	•	
Sanderson, James, Dixon	•	•	•	•	Peters, Kenneth, Aurora	•	•	•	•
Sandretti, Stephanie, Fair Oaks	•	•	•	•	Schoch, Sheena, Hayden	•	•	•	•
Senseny, Charlotte, Torrance	•	•	•	•	Schoemaker, Jeane, Fort Morgan	•	•	•	•
Shue, Brian, Brawley	•	•	•	•	<b>Alternates</b>				
Soderstrom, Andrew, Modesto	•	•	•	•	Ciula, Ewelina, Denver	•			
Stein, Alan, Northridge	•	•	•	•	Foster, Karen, Greenwood Village	•			
Taira, Mark, Los Angeles	•	•	•	•	Jackson, David, Boulder	•			

• Delegate or alternate attended the meeting; + Delegate or alternate attended a portion of the meeting.

	Registered	Meetings		
		1	2	3
Morrow, Carol, Colorado Springs	•			
Pearson, Justin, Englewood	•			
Varley, Michael, Highlands Ranch	•			
<b>Connecticut</b>				
<b>Delegates 7</b>				
Berkley, Jeffrey, West Haven	•	•	•	•
Fried, David, Yalesville	•		•	•
Knapp, Jonathan, Bethel	•	•	•	•
Le, Tam, Hamden	•	•	•	•
Mooney, John, Putnam	•		•	•
Natelli, Albert, Southington	•	•	•	•
Ungerleider, Michael, Granby	•	•	•	•
<b>Alternates</b>				
Brady, Thomas, Clinton	•			
Brenner, Bethaney, Burlington	•			
Delessio-Matta, Annemarie, Southbury	•	•		
Desrosiers, Mark, Columbia	•			
Dubin, Gary, Madison	•			
Hindin, Allen, Danbury	•			
Riddle, Richard, Southington	•	•		
<b>Delaware</b>				
<b>Delegates 2</b>				
Calhoon, Charles, Wilmington	•	•	•	•
Williams, Erika, Wilmington	•	•	•	•
<b>Alternates</b>				
Christian, Paul, Middletown	•			
Maher, Rachel, Wilmington	•			
<b>District of Columbia</b>				
<b>Delegates 2</b>				
Grogan, Patrick, Washington	•	•	•	•
Tigani, Stephen, Washington	•	•	•	•
<b>Alternates</b>				
Cram, Sally, Washington	•			
Noguera, Angela, Washington	•			
<b>Florida</b>				
<b>Delegates 22</b>				
Ackley, Eva, New Port Richey	•	•	•	•
Bird, Gerald, Cocoa	•	•	•	•
Brown, Andrew, Jacksonville	•	•	•	•
Bulnes, Christopher, Tampa	•	•	•	•
Carr Bustillo, Natalie, Riverview	•	•	•	•
Cochran, Stephen, Jacksonville	•	•	•	•
Eggnatz, Michael, Weston	•	•	•	•
Glerum, Karen, Boynton Beach	•	•	•	•
Hoffman, Charles, Jupiter	•	•	•	•

	Registered	Meetings		
		1	2	3
Hughes, Bertram, Gainesville	•		•	•
Jernigan, Kim, Pensacola	•	•	•	•
Kalarickal, Zacharias, Wesley Chapel	•	•	•	•
Liddell, Rudolph, Brandon	•	•	•	•
Limosani, Mark, Weston	•	•	•	•
Ottley, Jeffrey, Milton	•	•	•	•
Paramore, Jolene, Panama City	•	•	•	•
Paul, John, Lakeland	•	•	•	•
Payne, Robert, Marianna	•	•	•	•
Terry, Beatriz, Miami	•	•	•	•
Thiems-Heflin, Suzanne, Ocala	•	•	•	•
Trotter, Linda, Jacksonville Beach	•	•	•	•
Zuknick, Stephen, Brandon	•	•	•	•
<b>Alternates</b>				
Baratta, Lauren, Fleming Island	•			
Boden, David, Port Saint Lucie	•			
Brown, Thomas, Ponte Vedra Beach	•			
Cordoba, John, Lake Mary	•			
Hall, Jeannette, Miami	•			
Harrison, F. Reese, Lynn Haven	•			
Henley, Christopher, Jacksonville	•			
Ilkka, Don, Leesburg	•			
Johnson, Jay, Cocoa	•			
Kolos, George, Fort Lauderdale	•			
Lynn, Casey, Valrico	•			
Marcus, Gina, Coral Gables	•			
Miller, Paul, New Port Richey	•			
Nguyen, Robin, Trinity	•			
Niessen, Linda, Davie	•			
Palo, Paul, Winter Haven	•			
Romano, Rodrigo, South Miami	•			
Stevenson, Richard, Jacksonville	•			
Stilley, Jessica, New Port Richey	•			
<b>Georgia</b>				
<b>Delegates 10</b>				
Babo, Evis, Atlanta	•	•	•	•
Carpenter, Robert, Columbus	•	•	•	•
Hasty, Christopher, Tifton	•	•	•	•
Jagor, Thomas, Atlanta	•	•	•	•
Jernigan, Ben, Decatur	•	•	•	•
Lawson, Amber, Macon	•	•	•	•
Lopez, James, Columbus	•	•	•	•
Powell, Zachary, Saint Simons Island	•	•	•	•
Sword, Rhoda, Augusta	•	•	•	•
Thomas-Moses, Donna, Carrollton	•	•	•	•
<b>Alternates</b>				
Adkins, Chris, Stockbridge	•			
Benson, Henry, Atlanta	•			

• Delegate or alternate attended the meeting; + Delegate or alternate attended a portion of the meeting.

	Meetings					Meetings			
	Registered	1	2	3		Registered	1	2	3
Bradberry, R. David, Marietta	•				Reedy, Lyle, Freeport	•	•	•	•
Halpern, Stanley, Woodstock	•				Tiersky, Terri, Skokie	•	•	•	•
Mann, Marshall, Rome	•				Van Scoyoc, Stacey, Bloomington	•	•	•	•
Rainge, Annette, Augusta	•				<b>Alternates</b>				
Shatz, Peter, Marietta	•				Amirsoltani, Shafa, Elmwood Park	•			
Tourial, Sidney, Atlanta	•				Caraba, Brian, Glenview	•			
Vaughn, Ryan, Flowery Branch	•				Gibson, Yendis, North Chicago	•			
Wells, Erik, Athens	•				Hardy, Marcia, Decatur	•			
<b>Hawaii</b>					Jallad, Mahmoud, Herrin	•			
<b>Delegates 3</b>					Juluri, Ravichandra, Dunlap	•			
Cassella, Edmund, Honolulu	•	•	•	•	Kozal, John, Summit Argo	•			
Nunokawa, Neil, Wailuku	•	•	•	•	Lewis, David, Glenview	•			
Shimizu, Curt, Honolulu	•	•	•	•	Osmanski, Richard, Crystal Lake	•			
<b>Alternates</b>					Palliser, Paul, Cary	•			
Baysa, Robert, Mililani	•				Perlman, Sharon, Chicago	•			
Lee, Christopher, Honolulu	•				Ploskonka, Mark, Midlothian	•			
Lum, Dayton, Pearl City	•				Red, Clarence, Joliet	•			
<b>Idaho</b>					Richards, Anne, Rock Island	•			
<b>Delegates 3</b>					Schneider, Thomas, Chicago	•			
Hisel, John, Boise	•	•	•	•	Simon, William, Chicago	•			
Newton, Joel, Twin Falls	•	•	•	•	Smoron, Scott, Mount Prospect	•			
Penberthy, Timothy, Post Falls	•	•	•	•	White, Lawrence, Chicago	•			
<b>Alternates</b>					Williams, David, Northbrook	•			
Fukuoka, Brooke, Jerome	•				Yasunaga, Hannah, Decatur	•			
Miller, James, Post Falls	•				<b>Indiana</b>				
Shelton Wagers, Jill, Boise	•				<b>Delegates 9</b>				
<b>Illinois</b>					Burns, Jill, Richmond	•	•	•	•
<b>Delegates 20</b>					Fridh, Daniel, La Porte	•		•	•
Barnfield, Terry, Salem	•	•	•	•	Hollar, Steven, Warsaw	•	•	•	•
Benz, James, Chicago	•	•	•	•	Holm, Steven, Portage	•	•	•	•
Blew, Bryan, Moline	•	•	•	•	John, Vanchit, Indianapolis	•	•	•	•
Boghosian, Alice, Park Ridge	•	•	•	•	Leighty, Chad, Marion	•	•	•	•
Bona, Richard, Lansing	•	•	•	•	Mihalo, Mark, La Porte	•	•	•	•
Bordenave Bishop, Susan, Peoria	•	•	•	•	Stolarz, Jeffrey, Whiting	•	•	•	•
Bryniarski, James, Riverside	•	•	•	•	Wolf, David, Indianapolis	•	•	•	•
Ciebien, Gerald, Riverside	•	•	•	•	<b>Alternates</b>				
Fijal, Phillip, Des Plaines	•	•	•	•	Bergdoll, Allison, Fort Wayne	•			
Furusho, Cissy, Chicago	•	•	•	•	Celis, Lorraine, South Bend	•			
Hale, Denise, Palos Hills	•	•	•	•	Hine, William, Brownsburg	•			
Kay, Douglas, Oakbrook Terrace	•	•	•	•	Kolkman, Matthew, Fort Wayne	•			
Larsen, Christopher, Moline	•	•	•	•	Maupin, Heather, Plainfield	•			
Maggio, Frank, Elgin	•	•	•	•	Ranieri, Gene, Highland	•			
Nicholas, Dean, Lombard	•	•	•	•	Roberts, John, Connersville	•			
Pappas, Renee, Prospect Heights	•	•	•	•	Yoder, Benjamin, Fort Wayne	•			
Rawson, Kenneth, Glen Carbon	•	•	•	•					

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	Registered	Meetings		
		1	2	3
<b>Iowa</b>				
<b>Delegates 5</b>				
Berens, Cassie, Atlantic	•	•	•	•
Hedlund, Shawn, Iowa City	•	•	•	•
Hehr, Nathan, Mason City	•	•	•	•
Kouri, Zachary, Des Moines	•	•	•	
Peckosh, Valerie, Dubuque	•	•	•	•
<b>Alternates</b>				
Johnsen, David, Iowa City	•			
Stuefen, Sara, Vinton	•			
<b>Kansas</b>				
<b>Delegates 4</b>				
Fales, John, Olathe	•	•	•	•
Roufs, Brett, Newton	•	•	•	•
Sherwood, Cynthia, Independence	•		•	•
Siebrasse, Jon, Parsons	•	•	•	•
<b>Alternates</b>				
Hamel, David, Marysville	•			
Jenkins, Jill, Overland Park	•			
Reavis, Allen, Atchison	•	•		
<b>Kentucky</b>				
<b>Delegates 5</b>				
Howard, H. Fred, Harlan	•	•	•	•
Lee, William, Lexington	•	•	•	•
Price, Dennis, Louisville	•	•	•	•
Shaver, Samantha, Louisville	•	•	•	•
Wall, Kevin, Bellevue	•	•	•	•
<b>Alternates</b>				
Curry, Barry, Owensboro	•			
Moats, Mark, Henderson	•			
Rich, Jonathan, Dry Ridge	•			
<b>Louisiana</b>				
<b>Delegates 6</b>				
Chaney, Mark, New Orleans	•	•	•	
Daly, Nelson, Baton Rouge	•	•	•	•
Luminais, Kenneth, Thibodaux	•	+	•	•
Scott, King, West Monroe	•	•	+	•
Soileau, Kristi, New Orleans	•	•	+	+
Weaver, Stephanie, Lake Charles	•	•	•	
<b>Alternates</b>				
Basinger, Brian, Shreveport	•		+	
Carlton, David, Alexandria	•			
Garrett, Marty, Baton Rouge	•	+		
Hebert, Catherine, Mandeville	•		+	+
Hildebrandt, David, Slidell	•		•	

	Registered	Meetings		
		1	2	3
Savoie, Lance, Abbeville	•			•
<b>Maine</b>				
<b>Delegates 2</b>				
Rand, Craig, Brewer	•	•	•	•
Shenkin, Jonathan, Augusta	•	•	•	•
<b>Alternates</b>				
Kerr, David, Portland	•			
Tourigny, Dean, Biddeford	•			
<b>Maryland</b>				
<b>Delegates 7</b>				
a'Becket, Thomas, Millersville	•	•	•	•
Brown, Wendy, Columbia	•	•	•	•
Christopher, Ann, Baltimore	•	•	•	•
Liang, Christopher, Potomac	•	•	•	•
Rogers, Rick, Frederick	•	•	•	•
Romaine, Diane, Frostburg	•	•	•	•
Wilson, Robert, Gaithersburg	•	•	•	•
<b>Alternates</b>				
Allen, Gregory, Salisbury	•			
Nokkeo, Jay, Gaithersburg	•			
Nuger, Marc, Glen Burnie	•			
Shevenell, Marlene, Annapolis	•			
Ziara, Celeste, Princess Anne	•			
<b>Massachusetts</b>				
<b>Delegates 16</b>				
Bailey, Meredith, Boston	•	•	•	•
Boss, John, Lowell	•	•	•	•
Gamache, Paul, Pittsfield	•	•	•	•
Gobichettyalayam, Sathish, Fall River	•	•	•	•
Gusha, John, Holden	•	•	•	•
Hanlon, Mary Jane, Boston	•	•	•	•
Howells, Philip, Northborough	•		•	•
Lustbader, David, Quincy	•	•	•	•
Marchand, Richard, Yarmouth Port	•	•	•	•
Maslowski, James, West Springfield	•	•	•	•
Massod, Linda, Danvers	•	•	•	
McGrath, Paul, Hyannis	•	•	•	•
Moriarty, Janis, Malden	•	•	•	•
Paul, Mina, Roslindale	•	•	•	•
Trowbridge, Thomas, Lowell	•	•	•	•
Zolot, Howard, North Andover	•	•	•	•
<b>Alternates</b>				
Abdulwaheed, Abdullaibrahim, Quincy	•			
Cohen, Barry, Winthrop	•			
Eddy, Arthur, Shirley	•	•		

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Fisher, John, Salem	•				Zenk, James, Starbuck	•			
Lee, James, Lexington	•								
Martin, Raymond, Mansfield	•				<b>Mississippi</b>				
Pratap, Anandi, Weston	•				<b>Delegates 3</b>				
					Donald, W. Mark, Louisville	•	•	•	•
<b>Michigan</b>					Hollingsworth, James, Newton	•	•	•	•
<b>Delegates 18</b>					Scarborough, A. Roddy, Richton	•	•	•	•
Benivegna, Vincent, East Lansing	•	•	•	•	<b>Alternates</b>				
Berns, Jonathan, West Branch	•	•	•	•	Alford, William, Senatobia	•			
Christy, Todd, Berrien Springs	•	•	•	•	Holman, John, Tupelo	•			
Gingrich, Margaret, Big Rapids	•	•	•	•	Mauldin, Barbara, Petal	•			
Gorecki, Christopher, Warren	•	•	•	•					
Hennessy, Rhonda, Linden	•	•	•		<b>Missouri</b>				
Knowles, Lisa, East Lansing	•	•	•	•	<b>Delegates 7</b>				
Knudsen, Eric, Escanaba	•	•	•	•	Butler, Robert, Webster Groves	•	•	•	•
Lizzio, Vincent, Canton	•	•	•	•	Fitzpatrick, Amanda, Macon	•	•	•	•
Maihofer, Michael, Roseville	•	•	•	•	Meyer, Ashley, Springfield	•	•	•	
Mashni, Jason, East Lansing	•	•	•	•	Raman, Prabu, Kansas City	•	•	•	•
Mayberry, Melanie, Rochester Hills	•	•	•	•	Roseman, Lori, Saint Peters	•	•	•	•
Meraw, Stephen, Warren	•	•	•	•	Sokolowski, Joseph, Saint Louis	•	•	•	•
Patchak, William, Jackson	•	•	•	•	Tait, Robert, Grandview	•	•	•	•
Peters, Debra, Grand Rapids	•	•	•	•	<b>Alternates</b>				
Shunk, Clayton, Sault St Marie	•	•	•	•	Burke, Mary, Saint Louis	•			
Smiley, Christopher, Grand Rapids	•	•	•	•	Dear, David, Versailles	•			
Vitek-Hitchcock, Alexa, Dewitt	•	•	•	•	Pyle, Marsha, Kansas City	•			
<b>Alternates</b>					Rapini, Vincent, Saint Louis	•			
Bishop, Larissa, Wyoming	•				Rechtin, Theodore, Bridgeton	•			
Colbert, Curles, Farmington Hills	•				White, Connie, Kansas City	•			
DeHaan, David, Lake Orion	•								
Holdwick, Gabriel, Harbor Beach	•				<b>Montana</b>				
Johnston, Mark, Lansing	•				<b>Delegates 2</b>				
Kohen, Jerry, West Bloomfield	•				Gillette, Jane, Bozeman	•	•	•	•
Makowski, Martin, Clinton Township	•				Lindemann, Kurt, Kalispell	•	•	•	•
Tulak-Gorecki, Michele, Warren	•				<b>Alternates</b>				
					Hadnot, Douglas, Lolo	•			
<b>Minnesota</b>					Tanguay, Jason, Bozeman	•			
<b>Delegates 9</b>									
Andersen, David, Park Rapids	•	•	•	•	<b>Navy</b>				
Cziok, Amber, Litchfield	•	•	•	•	<b>Delegates 2</b>				
Dens, Kevin, Baxter	•	•	•	•	Huber, Jayson, Rockville, MD	•	•	•	•
Flynn, Michael, Winona	•	•	•	•	Shaffer, Gayle, Rockville, MD	•	•	•	•
Kurkowski, Michael, Shoreview	•	•	•	•	<b>Alternates</b>				
McDonnell, Stephen, Saint Paul	•	•	•	•	Hernandez-Feldpausch, Marina, Ridgecrest, CA	•			
Nickman, James, North Oaks	•	•	•	•	Lee, Rebecca, Vienna, VA	•			
Rao, Aruna, Minneapolis	•	•	•						
Williams, Douglas, Bemidji	•	•	•	•	<b>Nebraska</b>				
<b>Alternates</b>					<b>Delegates 3</b>				
Aguirre, Alejandro, Plymouth	•				Hinrichs, R. Mark, Lincoln	•	•	•	•
Remakel, Jeffrey, Golden Valley	•	•			Morrison, Scott, Omaha	•	•	•	•

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
West, Debra, Omaha	•	•	•	•	Small, Kaitlin, Lawrenceville	•			
<b>Alternates</b>					Sterritt, Frederic, Neshanic Station	•			
Thomsen, Brett, Omaha	•								
Tusha, Kenneth, Verdigre	•								
<b>Nevada</b>					<b>New Mexico</b>				
<b>Delegates 3</b>					<b>Delegates 2</b>				
Dragon, Richard, Gardnerville	•	•	•	•	Goad, J. Dale, Carrizozo	•	•	•	•
Saxe, Steven, Las Vegas	•	•	•		Manz, Julius, Farmington	•	•	•	•
White, David, Reno	•	•	•	•	<b>Alternates</b>				
<b>Alternates</b>					Sparks, Michael, Albuquerque	•			
Funke, Mark, Carson City	•				Thompson, Jennifer, Farmington	•			
Sanders, Robert, Las Vegas	•				<b>New York</b>				
<b>New Hampshire</b>					<b>Delegates 36</b>				
<b>Delegates 2</b>					Albicocco, Paul, Staten Island				
Jackson, Lindsey, Gorham	•	•	•	•	Andolina, Richard, Hornell	•	•	•	•
Rosato, Richard, Concord	•	•	•	•	Baim, Loren, Glens Falls	•	•	•	•
<b>Alternates</b>					Barnashuk, Frank, Orchard Park	•	•	•	•
Kennell, Melissa, Gilford	•				Buchalter, Alyson, Brooklyn	•	•	•	•
Osofsky, Joshua, Milford	•				Cuomo, Anthony, Carmel	•	•	•	•
<b>New Jersey</b>					Damelio, Steven, Penfield				
<b>Delegates 14</b>					Donnarumma, Glen, Tonawanda				
Ambrosio, Maria, Wayne	•	•	•	•	Dowd, Brendan, Buffalo	•	•	•	•
Babinowich, Fredrick, Mercerville	•	•	•	•	Essig, Steven, Ghent	•	•	•	•
Carotenuto, Frank, Roselle Park	•	•	•	•	Frustino, Jennifer, Buffalo	•	•	•	•
Chenman, Alan, Linwood	•	•	•	•	Fujimoto, Luis, New York	•	•	•	•
Clemente, Elizabeth, Skillman	•	•	•	•	Gehani, Rekha, Jackson Heights	•	•	•	•
Dietz, Andrew, Haddon Heights	•	•	•	•	Giordano, Louis, Endwell	•	•	•	•
Divincenzo, Giorgio, Jersey City	•	•	•	•	Gounardes, Steven, Brooklyn	•	•	•	•
Greenbaum, Steven, Warren	•	•	•	•	Harrison, Wayne, Saratoga Springs	•	•	•	•
Hersh, Robert, Freehold	•	•	•	•	Henner, Kevin, Deer Park	•	•	•	•
Kahn, Richard, New Brunswick	•	•	•	•	Jacobo, Amarilis, Bronx	•	•		
Roshong, Bryon, Dumont	•	•	•	•	Jacobs, James, New York	•	•	•	•
Rossi, Thomas, Roseland	•	•	•	•	Jonke, Guenter, Stony Brook	•	•	•	•
Shekitka, Robert, Newark	•	•	•		Karp, William, Manlius	•	•	•	•
Weiner, Mitchell, Kendall Park	•	•	•	•	Ledner, Jay, Little Neck	•	•	•	•
<b>Alternates</b>					Lewenson, Richard, Hastings On Hudson	•	•	•	•
Arace, Renee, West Orange	•				Maranga, Maria, Aquebogue	•	•	•	•
Gallucci, Lisa, Marlton	•				Mears, Ernest, Oswego	•	•		
Ghisalberti, Luciano, North Bergen	•				Mindlin, Mitchell, New York	•	•	•	•
Goldberg, David, North Plainfield	•				Patel, Minerva, White Plains	•	•	•	•
Graham, Frank, Teaneck	•				Porcelli, Eugene, Garden City	•	•	•	•
Krantz, Daniel, Somerset	•				Ratner, Craig, Staten Island	•	•	•	•
Pomerantz, Kenneth, Union	•				Shipper, David, New York	•	•		
Rosenfeld, Jason, Butler	•				Shreck, Michael, New Hyde Park	•	•	•	•
Rothstein, Alan, Denville	•				Skolnick, Jay, Webster	•	•	•	•
Shah, Dipika, Holmdel	•				Snyder, Steven, Saint James	•	•	•	•
					Tota, Christopher, Hawthorne	•	•	•	•
					Verma, Binod, Flushing	•	•	•	•
					Weinberger, Mark, Clifton Park	•	•	•	•

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	Meetings		
	Registered	1	2 3
<b>Alternates</b>			
Bauman, Mark, Saratoga Springs	•		
Casper-Klock, Theresa, Auburn	•		
Cuomo, Christopher, Carmel	•		
Gellert, Jonathan, Lowville	•		
Hanley, Kevin, Buffalo	•		
Jackson, Lois, New York	•		
Keating, Michael, Auburn	•		
Kim, Mina, New York	•		
Kim, Paul, Suffern	•		
Korkosz, Adrienne, Schenectady	•	•	
Krishnan, Prabha, Forest Hills	•		
Liang, John, Utica	•		
Madonian, Margaret, Liverpool	•		
Mahon-Vazquez, Claudia, Shoreham	•		
Markowitz, Paul, Sayville	•		
Mentzelopoulou, Ioanna, New York	•		
Miller, David, East Meadow	•		
Oshrain, Richard, Brooklyn	•		
Palmaccio, Frank, Plainview	•		
Peskin, Robert, Garden City	•		
Quartey-Sagaille, Tricia, Brooklyn	•		
Rodriguez, Roberto, Amawalk	•		
Santana, Arelys, Jackson Heights	•		
Silvestri, Mario, Vestal	•		
Stahl, Berry, Bronx	•		
Teplitsky, Paul, Brooklyn	•		
Tibbetts, John, Amherst	•		
Vazquez Santiago, Ivan, Hauppauge	•	•	
Vittoria, Nick, Islip Terrace	•		
Wadhwa, Gurinder, Menands	•		
Weisfuse, Deborah, New York	•		
Wetzel, Frederick, Schenectady	•		

**North Carolina**

<b>Delegates 11</b>			
Bailey, L'Tanya, High Point	•	• • •	
Buchanan, John, Lexington	•	• • •	
Cashion, Scott, Greensboro	•	• • •	
Cheek, Daniel, Hillsborough	•	• • •	
Davenport, C. Scott, Charlotte	•	• • •	
Hardesty, Willis, Raleigh	•	• • •	
Lindauer, Paul, Greenville	•	• • •	
Olson, Shelley, Oxford	•	• • •	
Oyster, Gary, Raleigh	•	• • •	
Porter, Royce, Winston Salem	•	• • •	
Teague, J. Jackson, Asheville	•	• •	

	Meetings		
	Registered	1	2 3
<b>Alternates</b>			
Ahmad, Nazir, Raleigh	•		
Chadwick, D. Gregory, Greenville	•		
Cunningham, Catherine, Durham	•		
Feingold, Clifford, Asheville	•		
Hollowell, Robert, Charlotte	•		
King, Rebecca, Chapel Hill	•		
Sadler, Kenneth, Winston Salem	•		
Scheiderich, Mark, Fletcher	•		
Swift, Edward, Chapel Hill	•		
Vakil, Shamik, Charlotte	•		

**North Dakota**

<b>Delegates 2</b>			
Erlandson, Steven, Grand Forks	•	• • •	
Tronsgard, Paul, Fargo	•	• • •	
<b>Alternates</b>			
Anderson, Bradley, West Fargo	•		
Nord, Jackie, Grand Forks	•		

**Ohio**

<b>Delegates 16</b>			
Barnes, Paul, Granville	•	• • •	
Beard, Jacinto, Columbus	•	• • •	
Bronson, Mark, Cincinnati	•	• • •	
Chopra, Manish, Cincinnati	•	• •	
Halasz, Michael, Kettering	•	• • •	
Kelly, Thomas, Beachwood	•	• • •	
Kimberly, David, Akron	•	• • •	
Lemmo, Ronald, Wickliffe	•	• •	
Lessick, James, Youngstown	•	• • •	
Mazzola, Robert, Miamisburg	•	• • •	
McCarthy, Britt, Columbus	•	• • •	
Parsons, Sharon, Columbus	•	• • •	
Paumier, Thomas, Canton	•	• • •	
Roth, Kelly, Canton	•	• •	
Usman, Najia, Medina	•	• • •	
Zucker, Andrew, Sandusky	•	• • •	
<b>Alternates</b>			
Amini, Homa, Dublin	•		
Connell, Christopher, Lyndhurst	•		
Espeleta, Karl, Englewood	•		
Gindi, Daniel, Macedonia	•		
Grbach, Bruce, Mentor	•		
Hanna, Adel, Springboro	•		
Hawk, Carrie, New Philadelphia	•		
Hering, Denise, Gahanna	•		
Jerome, Jennifer, Akron	•		

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	Registered	Meetings				Registered	Meetings		
		1	2	3			1	2	3
Jeter, Harold, South Point	•				Limberakis, Cary, Abington	•	•	•	•
Kastner, Michael, Toledo	•				Markiewicz, Stanley, Philadelphia	•	•	•	•
Khetarpal, Ruchika, Cincinnati	•				Rockwell, Theodore, Warren	•	•	•	•
Mariotti, Angelo, Columbus	•				Rosenthal, Nancy, Jenkintown	•	•	•	•
Moore, Steven, West Chester	•				Schimmel, David, State College	•	•	•	•
Scott, Tyler, Loudonville	•	•			Schwartz, David, Wyomissing	•	•	•	•
Vorherr, David, Cincinnati	•				Tauberg, James, Pittsburgh	•	•	•	•
					Wolford, Marian, Erie	•	•	•	•
<b>Oklahoma</b>					Zabelsky, Dennis, Munhall	•	•	•	•
<b>Delegates 5</b>					<b>Alternates</b>				
Auld, Douglas, McAlester	•	•	•	•	Burkhardt, Janine, Philadelphia	•			
Jones, Krista, Edmond	•	•	•	•	Cerveris, Michael, Chambersburg	•			
Wilguess, Daniel, Edmond	•	•	•	•	Chhina, Parampreet, Philadelphia	•			
Wood, C. Rieger, Tulsa	•	•	•	•	Dishler, Bernie, Upper Gwynedd	•			
Young, Stephen, Norman	•	•	•	•	Fennell-Dempsey, Renee, Philadelphia	•			
<b>Alternates</b>					Ghazzouli, Hadi, Collegeville	•			
Berg, Tamara, Yukon	•				Hamm, George, Dover	•			
Cohlmlia, Matthew, Oklahoma City	•				Johnson, Frederick, Annville	•			
Fagan, Timothy, Enid	•				Kaffey, David, Ambler	•			
Mullasseril, Paul, Oklahoma City	•				Mancini, James, Oil City	•			
Smith, Lindsay, Tulsa	•				Olenwine, Cynthia, Bethlehem	•			
<b>Oregon</b>					Proctor, Ronald, New Kensington	•			
<b>Delegates 7</b>					Ross, Joseph, New Castle	•			
Asai, Rickland, Lake Oswego	•	•	•	•	Selcher, Samuel, Middletown	•			
Hansen, Scott, Milwaukie	•	•	•	•	Thakkar, Nipa, West Chester	•			
Hester, Bradley, Bend	•	•	•	•	Wells, Jay, Bethel Park	•			
McMahan, James, La Grande	•	•	•	•	<b>Public Health</b>				
Pham, Hai, Hillsboro	•	•	•	•	<b>Delegates 2</b>				
Taylor, Barry, Portland	•	•	•	•	Joskow, Renee, Rockville, MD	•	•	•	•
Zeller, Caroline, Portland	•	•	•	•	Ricks, Timothy, Rockville, MD	•		•	•
<b>Alternates</b>					<b>Alternates</b>				
Burnett, Kent, Corvallis	•				Burrell, Stephanie, Bolling Afb, DC	•	•		
Chung, Kenneth, Milwaukie	•				Johnson, Michael, Chula Vista, CA	•			
Mutschler, Mark, Oregon City	•				<b>Puerto Rico</b>				
Ramirez Cuevas, M. Eddie, Troutdale	•				<b>Delegate 1</b>				
Salathe, Olesya, Molalla	•				Del Valle Sepúlveda, Edwin, San Juan	•	•	•	•
Schoblaske, Alayna, Medford	•				<b>Alternate</b>				
Smith, James, Hillsboro	•				Castellvi Armas, Maria, Ponce	•			
<b>Pennsylvania</b>					<b>Rhode Island</b>				
<b>Delegates 16</b>					<b>Delegates 2</b>				
Boyle, James, York	•	•	•	•	Brown, Steven, East Greenwich	•	•	•	•
Coole, John, Mansfield	•	•	•	•	Elson, Martin, Cranston	•	•	•	•
Davis, Gary, Shippensburg	•	•	•	•	<b>Alternates</b>				
Freedman, I. Jay, Abington	•	•	•	•	Kiang, John, Providence	•			
Grossman, Richard, Kingston	•	•	•	•	Ward, Karyn, Lincoln	•			
Incalcaterra, Charles, Bethlehem	•	•	•	•					
Kwasny, Andrew, Fairview	•	•	•	•					

• Delegate or alternate attended the meeting; + Delegate or alternate attended a portion of the meeting.





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