1 2 3	MINUTES OF THE COUNCIL ON DENTAL BENEFIT PROGRAMS ADA HEADQUARTERS BUILDING, CHICAGO November 17-18, 2022
4 5 6	Call to Order: The meeting of the Council on Dental Benefit Programs (CDBP) was called to order by Dr. Jessica Stilley-Mallah, chair, on Thursday, November 17, 2022, at 8:30 a.m. in the Boardroom, ADA Headquarters, Chicago, IL.
7 8 9 10 11	Roll Call: Drs. Jessica Stilley-Mallah (<i>chair</i>), Stacey Gardner (<i>vice chair</i>), Roderick Adams, Jr., Drs. Alyson K. Buchalter, Adrian J. Carrington, Andrew Gazerro, III, Hadi Ghazzouli, Rodney Hill, Drs. Mark Johnston, Susan D. Jolliff, Mark A. Moats, Stephen A. Morgan, Shelley Barker Olson, Drs. Vishruti Patel, Eddie Ramirez, Sara E. Stuefen, Scott Trapp (via Zoom), Drs. Scott L. Morrison (<i>Trustee</i>), Bryce Alan Larson (<i>New Dentist Member</i>), and Ms. Lauren Ames (<i>ASDA Consultant</i>) (not present)
13 14 15 16 17	Practice Institute (PI) Staff in attendance (for all or part of the meeting): Drs. Krishna Aravamudhan, Hana Alberti, and Diptee Ojha; Ms. Afton Dunsmoor, Ms. Rebekah Fiehn, Mr. Dennis McHugh, Mr. Frank Pokorny, Ms. Sarah Tilleman, Mr. Sean Layman, Ms. Stacy Starnes, and Ms. Nicole Tarbor; Attending via Zoom: Mr. Paul Bralower, Ms. Erica Colangelo, Mr. Carlos Jones, Ms. Lauren Kirk, and Ms. Sharon Stanford
18 19 20 21	Association Staff in attendance (for all or part of the meeting) : Drs. Raymond A. Cohlmia and David Preble; Robert Quashie, Ms. Cathryn Albrecht, Mr. Mike Kendall, Mr. Paul O'Connor, and Dr. Marko Vujicic; Attending via Zoom : Ms. Amy Chase, Mr. Chad Olson, and Ms. Roxanne Yaghoubi
22 23 24 25 26	Guests Present for Portions of the Meeting: Dr. George R. Shepley, ADA President; Attending via Zoom: Milliman - Joanne Fontana and Ali LaRocco; Overjet - Drs. Chris Balaban, Teresa Dolan, and Dominique Fufidio; ADA Councils - Dr. Daniel Gesek, chair, Council on Government Affairs (CGA); Dr. James Mancini, chair, Council on Advocacy for Access and Prevention (CAAP); Dr. Manny Chopra, chair, Council on Dental Practice (CDP)
27	Following the roll call, the presence of a quorum was noted.
28	PRELIMINARY BUSINESS
29 30 31	Conflict of Interest Disclosure Statement: Dr. Stilley referenced the Conflict of Interest Disclosure Statement included on the agenda and called for disclosures of potential conflicts of interest. None were received.
32 33 34 35	Approval of Agenda: Dr. Stilley moved the Report of the American Student Dental Association (ASDA) to the consent calendar in absence of the ASDA representative. The Dental Benefit Information Subcommittee (DBIS) chair requested that the Dental Quality Alliance Update be removed from the consent calendar for discussion.
36 37	The Council adopted the agenda as amended by general consent, giving the Chair permission to reorder items as needed.
38 39 40 41	Approval of Consent Items : A consent calendar was prepared to expedite the business of the Council. Members were given the opportunity to remove any item from the consent calendar for consideration during the meeting. As noted in the Approval of Agenda, one item was removed, and one item was added to the consent calendar.

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1 The Council amended and adopted the following resolution: 2 **Resolved**, that the resolutions contained within the following reports be approved by consent. 3 Approval of e-ballot Action Items CDT Licenses and Fee Adjustments 4 5 **Future Council Meeting Dates Consultant Appointments** 6 7 **Resolved**, that the following reports be filed. 8 2021 CDBP Operating Plan Results Credentialing 9 10 Bento X12 Update 11 **HL7** Update 12 13 ADA Standards Program Update 14 ADA/CDBP CDT 2024 Action Requests 15 2023 Subcommittee and Major Meeting Dates Report of the American Student Dental Association 16 Approval of e-ballot Action Items: The Council adopted the following resolution through the 17 consent calendar. 18 19 Resolved, that the actions approved through e-ballots since the May 2022 Council meeting be recorded in the minutes from this meeting. 20 21 E-ballot 2022-02: **Resolved**, that the 2022 May CDBP Meeting Minutes be approved. 22 ADA Professional Conduct Policy: Ms. Albrecht, senior associate general counsel, Legal Affairs, enlightened the Council about the Professional Conduct Policy as presented in the Agenda Book. 23 24 Members were encouraged to read it and revisit the policy. Ms. Albrecht explained the purpose and 25 importance of such policy, informing the Council that it is to ensure that the ADA remains compliant 26 with discrimination and harassment laws. 27 CDBP Chair Remarks: Dr. Stilley noted that the Association should take advantage of the 28 momentum gained from the win in Massachusetts on the Medical Loss Ratio (MLR). Dr. Stilley 29 challenged the Council to continuously look for opportunities to challenge the dental insurance 30 industry throughout the meeting. Council members were reminded that they not only represent their 31 respective district but also represent dentists across the nation. 32 Dr. Stilley provided an update on the November meeting between ADA leadership and the Delta 33 Dental Plans Association (DDPA). Both organizations are aligned on their ideas about diversity and 34 inclusion and fairly aligned on finding solutions to get dental care to underserved areas. DDPA shared 35 that they are going to start focusing on the provider experience. In response to the issue regarding 36 the DentaQual provider rating system, DDPA leadership noted that several Delta Dental member 37 companies are using the DentaQual system to rate dentists on the provider directories and that 38 dentists are encouraged to raise concerns to impact change in the rating system. The Council 39 leadership will keep an open dialogue and meet with DDPA again next year. 40 Trustee Liaison Remarks: Dr. Morrison thanked the Council for welcoming him to the Council and 41 expressed that he is looking forward to meeting with everyone. Dr. Morrison shared three initiatives 42 that the ADA Board have been excited about, which includes the Massachusetts Ballot Initiative, passing of strategic forecasting, and mission-based accounting. The Board recently celebrated the 43 44 one-year anniversary of Dr. Cohlmia, the ADA Executive Director. Dr. Morrison is excited to learn

more about dental benefits and serve on the Council.

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Confidentiality: Dr. Aravamudhan, vice president, Practice Institute, discussed the importance of 1 2 confidentiality regarding materials and content discussed at Council meetings. She reminded the 3 Council of the abundance of information available on ADA Connect and stressed the value of keeping 4 states and districts informed about the work of the Council in an appropriate manner. 5 2022 House of Delegates Actions: Dr. Arayamudhan provided the Council with a high-level summary on the House of Delegates (HOD) actions. There are no new action items from the HOD 6 7 that must be delivered through this year. Dr. Shepley will be looking at appointments for 518H, 8 Establishment of a Special Committee on the Employee Retirement Income Security Act (ERISA). Some Council members will participate on that committee. 10 2022 CDBP Operating Plan Results: The Council accepted, through the Consent Calendar, an informational report detailing the status of the CDBP 2022 Operating Plan highlighting ongoing and 11 12 new programs. 13 **RELEVANT ADA INITIATIVES** 14 Executive Director's Presentation: Dr. Cohlmia, executive director, introduced himself to the new 15 members of the Council, explaining his background and changes made at the ADA since he began 16 one year ago. He talked about the new direction of the ADA, creating and defining the new vision. 17 Dr. Cohlmia addressed the following: evolution and expectations of dentistry and how evolution is 18 critical to understand the generational shifts; goals to accomplish in 2023; member engagement; and 19 implementing strategic forecasting. Based on conversations Dr. Cohlmia held with several key CEOs 20 and large business owners, five key values were agreed upon, which are customer/member focus. 21 global presence, sustainability, innovation, and nimbleness. Strategic forecasting includes establishing 22 common long-range goals for HOD, Councils, ADA Board, and the ADA Team. Councils have a critical 23 role in strategic forecasting as it is a collaborative effort. Artificial intelligence is key to the future. 24 **EMERGING ISSUES** 25 Essential Health Benefits: Dr. Aravamudhan provided the Council with a brief overview of the Essential Health Benefit (EHB) initiative. She mentioned that CMS will be releasing a request for 26 27 information seeking the opinion of the ADA on various aspects of the EHB. The ADA engaged Milliman 28 to provide research and services on the EHB project to assist the Council to better understand implications of advocating for adult dental benefits to be classified as an "Essential Health Benefit" as 29 30 defined in the Affordable Care Act (ACA). Milliman is a global independent risk management, benefits 31 and technology firm with specific expertise in the dental benefits space. 32 Milliman presented the Council with a high-level overview to conceptually understand all the issues surrounding EHB and ACA and how dental benefits fit into those frameworks. Further explaining how 33 34 EHB was developed through the ACA and the current status of EHB regarding dental care for various 35 demographic populations. Milliman outlined their analysis and work products on evaluating EHB 36 specifically for adult dental. Afterwards, the Council engaged in a preliminary discussion about the 37 importance of understanding the issue with an emphasis on the policy-setting work to come. This will 38 be undertaken by the Council upon receipt of Milliman's forthcoming research white paper, which 39 explores the potential implications of the inclusion of adult dental as an EHB for the working adult 40 population (i.e., those who are between 100-400% FPL). 41 Medicare Update: Dr. Aravamudhan provided the Council with an update regarding a dental benefit in 42 Medicare for medically compromised individuals. She noted that following ADA comments to the 43 proposed rule (Payment Policies under the Physician Fee Schedule and Other Changes to Part B

Payment Polices), CMS had finalized provisions to include specific dental services in both Part A (in-

patient settings) and Part B (out-patient settings) of Medicare for a targeted population. This includes

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people needing medical procedures such as organ transplants, cardiac valve replacements. 1 2 valvuloplasty etc. Dr. Aravamudhan mentioned that CMS is engaging in listening sessions with dentists 3 and office staff across the nation to understand the administrative burdens associated with claims 4 processing and payments in order to establish the Medicare systems to handle dental claims. She noted that staff were in the process of developing guides to assist dental offices treating this targeted 5 population to successfully navigate Medicare processes. 6 7 Artificial Intelligence and Dental Claims: Dr. Balaban, vice president, and Dr. Dolan, chief dental 8 officer of Overiet, conducted a presentation to the Council on artificial intelligence (AI) and how it can 9 be used with dental claim adjudication and for dental practices. They reported that more and more 10 payers are using AI to analyze claims submitted with radiographs to make the claims review process 11 more efficient. The Council will continue to monitor Al use by payers. 12 **CLINICAL DATA WAREHOUSE/REGISTRY** 13 ADA Dental Experience & Research Exchange (DERE): Dr. Johnston and Dr. Ojha, director, Dental 14 Quality Alliance and Clinical Data Registry, provided an update on the activities of Dental Experience 15 & Research Exchange (DERE). Dr. Ojha provided historical insight as to how the data registry came to fruition, which has been overseen by the Council for the past three years. ADA began the technical 16 17 build through IQVIA, a large multinational human data science company, and integrated with one 18 software vendor, Open Dental. The system is now being integrated with Epic and Eagelsoft. Dr. Ojha 19 informed the Council that there are nearly half a million records in the system and 26 practices fully 20 integrated. This is still a Minimal Viable Product (MVP), meaning simply testing proof of concept. 21 IQVIA is scaling the program and seeking to move to a full-scale registry platform by July 2023. The goal remains the same at five million records in five years. Ultimately, the goal is to have meaningful 22 23 use of the data for policy development and research. 24 **ADMINISTRATIVE EFFICIENCY** 25 Credentialing: Through the consent calendar, the Council accepted an update on the activities related 26 to the ADA credentialing service, powered by CAQH ProView[®]. 27 Bento: Through the consent calendar, the Council accepted an update on the activities related to 28 Bento. 29 Administrative Efficiencies Summit Update: Dr. Johnston and Ms. Tilleman, senior manager, Credentialing and Third-Party Payer Advocacy, provided an update on the outcome of the 30 31 Administrative Efficiencies Initiative (AEI) and the Third Summit, which was held at the ADA headquarters in Chicago on September 30, 2022. This included a recap of the initiative's focus on 32 33 finding solutions for both eligibility and benefits verification, and how the ADA can continue to solve for 34 the needed standardization of EOBs and their electronic equivalent, the X12 835 transaction. The 35 summit remains well attended by representatives from most components of the dental community 36 (dentists, payers, DSOs, clearinghouses, etc.). The group's robust discussion produced a potential 37 idea for the creation of a X12 270d/271d transaction set to meet the specific needs of benefits verification in real time for dental coverage. 38 39 Expanding Dental Claim Form Advisory Committee (DeCFAC) Scope to Dental Content 40 Committee (DeCC): Ms. Fiehn, director, Coding and Dental Data Exchange, provided an update on 41 DeCFAC and DeCC, including a short history of the committees and description of their 42 responsibilities. She noted that DeCFAC was established to maintain the ADA paper claim form while 43 DeCC is a statutorily mandated committee that the ADA must maintain to assist the Secretary of the

Department of Health and Human Services (HHS) with standards for electronic transactions.

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1	The Council approved the following resolutions without further discussion.
2 3 4	Resolved , that the Dental Content Committee (DeCC), a Designated Standards Maintenance Organization be reconstituted to maintain standards for health care transactions adopted by the Secretary as well as the ADA paper claim form, and be it further
5	Resolved, that the DeCC Operating Procedures be approved, and be it further
6 7 8	Resolved , that the Council Chair appoint individuals with the knowledge necessary to review and maintain health care electronic transactions in alignment with the DeCC Operating Procedures, and be it further
9 10	Resolved, that responsibilities of the Dental Claim Form Advisory Committee (DeCFAC) be transferred to the Dental Content Committee and DeCFAC be sunset.
11 12	X12 Update: Through the consent calendar, the Council accepted an update on the activities related to the X12 standards committees.
13 14	HL7 Update: Through the consent calendar, the Council accepted an update on the activities related to the Health Level 7 (HL7).
15 16	ADA Standards Program Update: Through the consent calendar, the Council accepted an update on the activities related to the ADA Standards Program.
17	DENTAL BENEFITS
18 19 20 21 22 23	Scaling and Root Planing Claims: Dr. Johnston and Mr. McHugh, manager, Credentialing and Third-Party Payer Advocacy, provided the rationale for the need to develop additional assistance for dental offices regarding scaling and root planing (SRP) claim submissions. They reported that SRP claim denials are some of the most frustrating dental insurance concerns reported by member dentists to the ADA and to help dental offices, a meeting was held on July 15 with various payers to discuss concerns from both sides.
24	The Council adopted the following resolution:
25 26 27	Resolved , that the document titled "Periodontal Scaling and Root Planing (SRP) CDT Procedures D4341 and D4342" and its corresponding short version be approved for dissemination.
28 29 30 31 32 33 34 35 36	Third Party Payer Concierge: Dr. Johnston and Ms. Tilleman provided a brief overview of the Third-Party Payer Concierge (TPPC) services' 10+ year history at the ADA. Explaining why it was dissolved at the end of 2020 before being reconstituted at the beginning of 2022 with a strong emphasis on helping state associations market the program to their members. Ms. Tilleman provided an update on the 17 states that were awarded grant funding to promote the existence of the program. The ADA created a promotional toolkit for state associations and planned to add a video in early 2023. She noted that the state promotional activities were still underway, and it was too soon to tell if the money spent on the state grants had any significant impact on members' awareness about the services. Dr. Johnston recommended gathering more data and revisiting this strategy in 2024. The subcommittee expects to have more information in March.
38	The Council adopted the following resolution:

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Resolved, that communication assets developed through the state grant program be shared 1 2 across other states for promotional activity in 2023 in addition to ADA communication channels 3 and be it further, 4 Resolved, that this strategy be assessed for 2023, before additional grants for promotion are 5 awarded. 6 Medicaid RFP Toolkit Update: Dr. Johnston and Ms. Tilleman provided an update on the recent 7 revisions and updates made to the Medicaid RFP toolkit titled "Medicaid: Considerations When 8 Working with States to Develop an Effective RFP/Dental Contract." 9 The Council adopted the following resolution: 10 Resolved, that the updates to the Medicaid RFP Toolkit be approved for dissemination. 11 2022 District Survey Report: Dr. Johnston and Ms. Tilleman shared an informational report on the 12 results of the annual district survey. The results have been shared with the states as well. 13 Contract Analysis Service: Ms. Chase, associate general counsel, provided an update on the legal 14 division's Contract Analysis Service. She reported than the service was established in 1987 and has 15 analyzed over 5,400 contracts since then, including 53 in 2021 and 21 contracts YTD September 30, 16 2022. The Service is authorized to analyze dental provider contracts, dental management service organizations (DMSO) contracts and contracts that offer dental school students scholarships or loans 17 18 in exchange for commitments for future employment. 19 The service educates members, in clear language, on issues concerning contract provisions and 20 clauses. Its primary focus is on helping members make informed decisions about participating 21 provider contracts offered by various dental benefit companies. The service does not provide legal 22 advice or recommend whether a contract should or should not be signed. The service is free to 23 member dentists who submit an unsigned agreement to their state or local dental society who will 24 forward it to the service. 25 LEGISLATIVE UPDATE 26 Federal Government Affairs Update: Ms. Yaghoubi, director, Legislative & Regulatory Policy and 27 Dr. Gesek, chair, Council on Government Affairs (CGA), provided an update to the Council regarding CGA activities and current federal government affairs. The CGA advocates for legislative policies. Dr. 28 29 Gesek shared highlights from the six workgroups within the CGA. He also discussed the ballot 30 initiative to address MLR in Massachusetts. 31 Ms. Yaghoubi mentioned that improving transparency in dental benefits was a top priority for the CMS 32 Administrator. She asked the Council to urge their senator to pass the Ensuring Lasting Smiles Act by visiting the ADA Legislative Action Center at actioncenter.ada.org. 33 34 State Government Affairs Update: Mr. Olson, director, and Mr. O'Connor, senior legislative liaison, 35 informed the Council about State government affairs with a focus on the Massachusetts Ballot 36 Initiative. Under the new law, dental insurers will be required to spend 83% of the money they collect 37 from premiums on customers' dental expenses or on improving their quality of service, as opposed to 38 using the funds for administrative expenses. While State societies, volunteer dentists and other 39 dentists around the country continue to push forward on dental insurance reform, the hope is that it 40 continues to gain traction and communicates to dentists the importance of advocating on behalf of 41 patients.

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1 QUALITY ASSESSMENT AND IMPROVEMENT 2 Dental Quality Alliance Update: Dr. Johnston asked that this be removed from consent to share 3 information and stimulate discussion, while providing the history and task of the Dental Quality 4 Alliance (DQA). Dr. Ojha informed the Council about the history and function of the DQA. The DQA 5 meets biannually and focuses on standards for quality measures. Previously, the Council requested that DQA do an evaluation of the DentaQual program. As a result, the DQA has convened a separate 6 7 ad-hoc workgroup, that is now exploring the development of a set of practice- and clinician-level quality 8 measures that can be calculated using claims data. On another note, the DQA approved two new 9 measures to evaluate oral healthcare quality during pregnancy. 10 **CODING AND TRANSACTIONS** 11 Enhanced CDT Code Task Force Update: Dr. Hill and Ms. Dunsmoor, manager, Dental Codes 12 Maintenance and Development, provided an update to the Council on the progress made regarding 13 development of dental procedure code modifiers, which is a key feature of the Enhanced CDT Code. This update addressed the public comment period on the proposed procedure code modifier 14 15 architecture that is now underway. There are five (5) live virtual comment sessions scheduled in 16 November and December 2022, and written feedback will be received until the comment period 17 concludes on March 21, 2023. 18 The Council adopted the following resolution: 19 Resolved, that the Enhanced CDT Code's dental procedure code modifier architecture and 20 content schema continue to be developed; and be it further, 21 Resolved, that a progress report be prepared for the May 2023 Council meeting. 22 CDT 2023 - Significant Code Changes / New and Revised Coding Guides: Dr. Hill and Mr. 23 Pokorny, senior manager, Dental Codes Maintenance and Development, provided an update to the 24 Council regarding code changes and coding guides. This included a summary of CDT 2023 changes 25 that affect frequently delivered procedures, as well as introduced the five (5) new and seven (7) 26 revised online guidance publications. 27 The Council briefly discussed two notable maintenance actions cited in the report, revisions to 28 nomenclatures and descriptors of two frequently delivered procedures - full mouth debridement 29 reported with code D4355, and the comprehensive series of intraoral diagnostic images (aka "full 30 mouth series" or "FMX") reported with code D0210. Staff noted that more information on these and all other changes can be found in the CDT 2023 Companion, Section 1. 31 32 Furthermore, during the Code Maintenance Committee (CMC) meeting in March 2022, the committee approved 38 changes to the code set — 22 new codes, 14 revisions and two deletions. A recap of 33 these actions is published in the CDT 2023 manual — including the CDT 2023 Companion — and 34 35 online at www.ada.org/cdt. New and revised coding guides are published online at www.ada.org/publications/cdt/coding-education. 36 37 ADA/CDBP CDT 2024 Action Requests: This was an informational report on the Consent Calendar, with no resolutions presented for Council action. 38 39 The Coding and Transactions Subcommittee (CATS) submits CDT Code Action Requests on behalf 40 of the ADA and the Council. Four ADA/CDBP action requests were delivered to the CMC Secretariat 41 before the November 1, 2022, submission due date.

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- Two requests concerned CDT Code additions for the following separate procedures –
 "fabrication of a custom removable clear plastic appliance" and "placement of a custom removable clear plastic appliance."
 - Two requests concerned revisions to current CDT codes "D2335 resin-based composite four or more surfaces...(anterior)" and "D4910 periodontal maintenance."
 - The Council was provided with an update on the number and nature of all requests transmitted to the CMC Secretariat by the submission due date of November 1, 2022. There are 42 separate action request forms, including the four ADA/CDBP submissions, to be considered by the committee when it convenes on March 9-10, 2023. Actions accepted by the CMC will be published in CDT 2024, the code set version effective January 1, 2024.
- An update on the CMC's actions will be delivered when the Council convenes in May 2023.
- SNODENT Update: Dr. Aravamudhan provided the Council with an update on current activities related to the Systematized Nomenclature of Dentistry (SNODENT). It covered the SNODENT Maintenance Committee (SMC) composition and harmonization of SNODENT content with the
- 15 Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT), an international clinical
- terminology designed for use in clinical documentation in the Electronic Health Record (EHR).
- 17 **CDT Licenses and Fee Adjustments:** The Council, approved, through the Consent Calendar, the following resolution concerning fee adjustments for the various types of CDT Code licenses.
- 19 **Resolved**, that the following CDT License Fee increases for 2024 be approved.

#	CDT License Type	Increase
1.	National Association of Dental Plans (NADP) or America's Health Insurance Plans (AHIP) members	6.0 %
2.	Dental Benefit Plans /Third-Party Administrators	12.0 %
3.	Electronic Claim Transaction Clearinghouses – Category B	12.0 %
4.	Electronic Claim Transaction Clearinghouses – Category C	23.0 %
5.	Practice Management Software Vendors	23.0 %
6.	Healthcare Software Vendors	30.0%
7.	Publishing	50.0 %
8.	Seminars	36.0 %
9.	Dental Specialty Societies	0.0 %

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ICD-10-CM Initiative – Content for CMS Guidance (Chapter 11): Dr. Aravamudhan updated the Council on the preparation of technical content for ICD-10-CM Official Guidelines for Coding and Reporting published by the Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS).

1 2 3 4	The Council discussed the potential ramifications on dental practices when reporting diagnoses using ICD-10-CM. Use of this named HIPAA code set is expected to expand into the commercial dental carrier community, and not be limited to dental services covered by Medicaid. A positive ramification would be reporting diagnosis codes in lieu of preparing and submitting claims attachments.
5 6 7 8	Council discussion led to consensus that ICD-10-CM educational and reference content in both the CDT Manual and CDT Companion publications could be bolstered by preparation of additional ADA guidance materials. Staff noted that the nature and scope of such materials are under study, with a status report prepared for an upcoming Council meeting.
9	LIAISON/CONSULTANT REPORTS
10 11 12 13 14 15 16	Report of the New Dentist Committee: Dr. Larson introduced himself to the Council and provided an update on New Dentist Committee (NDC) activities. The committee is very busy working on several initiatives, one being membership — connecting with new dentist and students across the country to demonstrate the value of organized dentistry. The committee seeks to forge connections and build a bridge between NDC and ASDA. The ten under ten initiative highlights new dentists across the country. Dr. Larson encouraged the Council to inform their States to submit nominations for this achievement. This year, there were about 160 applications. Several events are planned for next year, including quarterly town hall meetings and SmileCon 2023.
18 19	Report of the American Student Dental Association: Dr. Stilley moved this item to the consent calendar. The Council was provided with an informational report.
20	COUNCIL OPERATIONS
21 22	Future Council Meeting Dates: The Council reviewed the proposed meeting dates and accepted the following resolution.
23	Resolved, that the meeting dates for May 2024 through November 2025 be approved.
24 25 26 27	 May 2-3, 2024 November 7-8, 2024 May 1-2, 2025 November 6-7, 2025
28 29 30	2022-2023 Subcommittee Appointments: Dr. Stilley reviewed the subcommittee appointments. Through the consent calendar, the Council accepted an informational report listing subcommittee appointments.
31 32	2022-2023 Subcommittee and Major Meeting Dates: Through the consent calendar, the Council accepted an informational report on upcoming dates for subcommittee meetings.
33 34	Appointment of Consultants: Through the consent calendar, the Council approved the following action.
35 36	Resolved, that the following consultants to the Council on Dental Benefit Programs be approved for terms ending with the 2023 annual session.
37 38 39 40	Amundson, Craig W., D.D.S., Brooklyn Center, MN Ayala, Colleen, Director RCM Product, Change Healthcare, Nashville, TN Brown, Timothy L., Deputy Executive Director, NADP, Dallas, TX Cooley, Ralph A., D.D.S., F.A.G.D., Houston, TX

1	Crall, James J., D.D.S., M.S., Sc.D, Los Angeles, CA
2	Dill, Joseph, D.D.S., Oak Brook, IL
3	Everts, Joshua E., D.D.S., Alabaster, AL
4	Hilton, Irene, D.D.S., M.P.H., San Francisco, CA
5	Jurkovich, Mark W., D.D.S., Chisago City, MN
6	Mercer, James E., D.D.S., West Columbia, SC
7	Ott, Russell, Specialist Leader Health Technology, Deloitte Consulting, Arlington, VA
8	Pitts, Adam S., D.D.S., Franklin, TN
9	Strohschein, Marvin J., D.D.S., Petosky, MI
10	Swift, Mary Beth, Eaglesoft Product Mgr., Patterson Dental, St. Paul, MN
11	Guest Council Chair Presentations: Chairs from the following Councils, Advocacy for Access and
12	Prevention, Dental Practice, and Government Affairs, provided updates on activities and programs.
13	The Council was briefed on resolutions, policies, subcommittee initiatives, and upcoming webinars.
14	Adjournment: 11:30 a.m. Central Time