

**COMMISSION FOR CONTINUING EDUCATION PROVIDER RECOGNITION
AMERICAN DENTAL ASSOCIATION
HEADQUARTERS BUILDING, CHICAGO
April 12-13, 2018**

Call to Order: Dr. Joseph P. Fiorellini, chair, called a regular meeting of the Commission for Continuing Education Provider Recognition (CCEPR) to order on Thursday, April 12, 2018 at 9:05 a.m. in the Executive Conference Room of the ADA Headquarters Building in Chicago.

Roll Call

Commissioners present: Dr. Jeffrey D. Bennett, Dr. Elizabeth Ann Bilodeau, Dr. Monica H. Cipes, Dr. Gary M. DeWood, Dr. Barry Hammond, Dr. Bertram J. Hughes, Dr. Mark C. Hutten, Dr. Karl Keiser, Dr. Mitchell J. Lipp, Mr. Conor McNulty, Dr. Steven E. Parker, and Dr. Susan G. Reed.

Dr. Debra Dixon and Dr. Nancy R. Rosenthal participated telephonically for portions of the meeting.

In addition, Dr. Linda K. Himmelberger, Third District Trustee, Board of Trustees liaison, attended the meeting.

Guest of the Commission: Dr. Graham McMahon, president and CEO, Accreditation Council for Continuing Medical Education, attended a portion of the meeting.

Commission staff: Ms. Mary Borysewicz, director; Mr. Alejandro Lerma, coordinator.

ADA staff present for all or portions of the meeting: Dr. Anthony J. Ziebert, senior vice president, Education/Professional Affairs; Ms. Paula Tironi, Esq., senior associate general counsel; Ms. Cathryn Albrecht, senior associate general counsel; Dr. Kathleen O'Loughlin, executive director; Ms. Christine Maher, accounting project associate.

Preliminary Business

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

Dr. Fiorellini directed the Commission's attention to the ADA Conflict of Interest Policy and reminded commissioners of their obligation to make disclosures as appropriate. Commissioners disclosed the following affiliations during the course of the meeting:

Commission Member	Affiliation Disclosed
Jeffrey Bennett	Member, American Association of Oral and Maxillofacial Surgeons
Gary DeWood	Employee, Spear Education
Joseph Fiorellini	Faculty, University of Pennsylvania; professional relationship with principle, Drs. Fugazzotto & Rost (study club)
Linda Himmelberger	Member, Second District Valley Forge Dental Association of Pennsylvania

Fiduciary Duty and Other Legal Topics: Ms. Paula Tironi gave a short presentation regarding topics such as fiduciary duty and conflicts of interest.

ADA Code of Professional Conduct and Prohibition Against Harassment: Ms. Albrecht reviewed the ADA Professional Conduct Policy.

Minutes of the October 12-13, 2017 CCEPR Meeting: Minutes of the Commission's October 12-13, 2017 meeting, previously approved by the Commission via email ballot, were acknowledged as part of the Commission's official record.

Consent Agenda: A consent calendar was prepared to expedite the business of the Commission. Dr. Fiorellini reminded Commission members that any report, recommendation or resolution can be removed from the consent calendar for discussion. The following reports were accepted by the Commission on consent.

Appointments to the Commission
Results of Spring 2018 CERP Applicant Survey
CERP Participation and Approval Data

Reports to the Commission

ADA Board of Trustees Liaison: Dr. Himmelberger noted the valuable service that the Commission provides to the profession and thanked the Commissioners for their work.

ADA Senior Vice President, Education/Professional Affairs: Dr. Ziebert presented an overview of the four ADA Commissions and their position within the ADA governance structure. Dr. Ziebert noted that in each of their areas of responsibility, the Commissions function to protect the public and assure the long-term viability of the profession. As self-regulating agencies, it is incumbent on the Commissions to be as objective as possible, support due process, and to fulfill their duties and responsibilities independent from the ADA and other interests that could unduly influence decision-making processes.

Commission Business

Appointments to the Commission: The Commission received information on the Commissioners whose terms will end in 2018, and their replacements, whose terms will begin with the close of the ADA House of Delegates meeting in October 2018, as listed below (consent calendar item).

The Commission also received the resignation of Dr. Ernest Robertson from the Commission for personal reasons. The American Association of Dental Boards has been requested to nominate a representative from that organization to complete Dr. Robertson's term, scheduled to end with the close of the 2019 ADA House of Delegates.

<u>Commissioners Completing Terms October 2018</u>	<u>Appointing Organization</u>	<u>Newly Appointed Commissioners 2018-2022</u>
Dr. Debra Dixon	AAOMR	Dr. Mitra Sadrameli
Dr. Joseph Fiorellini	AAP	Dr. David M. Kim
Dr. Mark Hutten	ACP	Dr. John D. Ball
Mr. Conor McNulty	ASCDE	Ms. Karen Burgess

Committee Appointments: Dr. Fiorellini reminded the Commission of the importance of committee work in supporting the Commission in making informed decisions. The chair will appoint members to serve on the Complaints, Finance, and Planning and Assessment standing committees, and to ad hoc committees to continue the CERP Standards review process and discussions on the CERP Eligibility Criteria.

Future Meeting Dates: The Commission received an informational report listing the Commission's next meeting dates, scheduled for October 4-5, 2018, April 4-5, 2019 and October 3-4, 2019. Dr. Fiorellini advised the Commission that due to potential meeting conflicts, the dates of the Commission's spring 2019 meeting are subject to change. Staff will research alternative dates and request input from the Commission.

CCEPR Rules Editorial Updates: With the 2017 ADA House of Delegates' approved revisions to the *ADA Bylaws* and the *Governance and Operation Manual*, references to these documents contained in the CCEPR Rules require corresponding revision. The Commission noted that the *ADA Governance and Operation Manual*, Chapter IX. Section L. includes the provision that CCEPR has the authority to make editorial corrections to its Rules by unanimous vote.

Action: By unanimous vote, the Commission approves editorial revisions to the CCEPR Rules to update references to current ADA governance documents, as shown in Appendix 1.

Planning and Assessment Committee: Dr. Rosenthal directed the Commission's attention to a status report on CCEPR's strategic plan. The following strategic priorities are on target: streamlining internal tracking and reporting functions related to the CERP application process; conducting an assessment of CERP provider fees; work on revising the CERP Standards continues. Development of a web-based application form has been deferred pending further discussions with the ADA's department of Information Technology. Continuing to monitor the status of the strategic plan will help the Commission benchmark its progress and ensure that the Commission is fulfilling its responsibilities and meeting its mission in a financially and operationally sustainable manner.

Dr. Rosenthal noted that reporting progress on the strategic plan will also be an important element of the self-evaluation CCEPR is required to submit to the 2019 ADA House of Delegates, in accordance with Resolution 1H-2013. This, and other self-assessment activities, may also provide useful data for the separate evaluation of CCEPR to be conducted by the ADA Board of Trustees in 2019, pursuant to Resolution 6H-2014.

Action: The Commission directs the Planning and Assessment Committee to work with staff to develop an outline of the self-assessment process for the Commission's review in October 2018, with a draft self-assessment report for the Commission's approval in April 2019.

ADA CERP Database and Online Application Update: Staff updated the Commission regarding plans to improve the CERP provider database and develop a web based application on the Aptify platform. The transition to Aptify has been put on hold pending funding considerations and completion of other ADA Aptify projects currently underway. Commission staff have worked with IT staff to develop an interim database that supports enhanced reporting and automates some functions of the CERP application process. Target dates for deploying an Aptify instance for CCEPR have not been established.

Finance Committee Report: Dr. Mark Hutten presented the Committee's comments and recommendations to the Commission. The following summarizes the agenda items discussed and the Commission's actions.

CCEPR 2019 Preliminary Budget: The Committee advanced a preliminary CCEPR budget for 2019, with projected revenues over direct expenses of \$26,216. The budget assumes a 3% increase in CERP application fees, consistent with budgeting assumptions and fee increases in previous years. Indirect expenses such as shared services (legal and IT support, for example) are currently not allocated by the ADA in the Commission's budget. The Commission noted that if indirect expenses were included, the budget would most likely reflect a shortfall of revenues to overall expenses. Dr. Ziebert reported that the ADA Board of Trustees is in the process of developing a shared service agreement with the Commission

on Dental Accreditation that may be adapted for CCEPR in the future. If implemented, the agreement would include provisions for calculating the costs for shared services and allocating these to the Commission's budget. The Commission agreed with the Committee's recommendation to forward the proposed 2019 budget to the Board of Trustees. However, the Commission also noted the importance of measures to close the gap between program revenues and expenses in future budgets.

Action: The Commission approves the preliminary 2019 CCEPR budget as shown in Appendix 2 for submission to the Budget & Finance Committee of the ADA Board of Trustees for consideration in the ADA 2019 budget process.

Proposal to Restructure CERP Fees: In light of the fact that revenues from CERP fees do not fully cover the cost of the program, the Commission directed the Committee to conduct a market analysis and assessment of CERP fees. The Committee noted that raising provider fees from current levels to the level needed to cover all program expenses would disproportionately impact providers with smaller continuing education programs. The Committee therefore suggested re-structuring CERP provider fees as follows: (1) eliminate reapplication fees; new applicants would pay an initial application fee, but no additional fee would be assessed when a provider submits an application for continued recognition; (2) increase annual fees to compensate for the loss of revenues from reapplication fees; and (3) structure the annual fees based on the size of a provider's CE program, defined by the number of participants in the provider's CE activities per year. The Committee's proposal defined three levels based on the size of providers' CE programs. A similar tiered fee structure has been in place for international providers since 2014.

The Commission considered the size ranges defining each fee level. It also observed that the fees proposed, while increasing CERP revenues, would not fully close the gap between revenues and overall program expenses. Further increasing annual fees to cover this shortfall was also discussed. However, in establishing the fees, the Commission sought to minimize the impact on providers. The Commission briefly discussed whether other sources of revenues might be considered, such as assessing fees for participation in the Extended Approval Process. The Commission did not pursue this concept, as it would potentially discourage participation in that program. Noting that the revised fee structure moves the Commission in a fiscally responsible direction by increasing revenues, the Commission supported the Committee's proposal.

Action: The Commission adopts the ADA CERP fee structure as shown in Appendix 3, for implementation in 2019.

Expense Reporting in Concur: Ms. Christine Maher presented an introduction to submitting expense reimbursements via Concur, a web based platform. Beginning with the current meeting, Commissioners will be asked to submit CCEPR meeting expense reimbursements through www.concursolutions.com.

CERP Provider Education and Outreach: The Commission received information on the annual educational workshop for CE providers to be held October 21 in conjunction with ADA 2018, America's Dental Meeting, in Honolulu. An open hearing on CERP Recognition Standards will also be held on October 19. Other outreach activities planned for 2018 include two webinars to be scheduled in the second and third quarters, and a presentation at the Association of Continuing Dental Education (ACDE) in August. The Commission suggested that other opportunities for live presentations should be explored in future years, such as the Chicago Midwinter meeting and the ADEA Annual Meeting.

Report on Meeting of Accreditors in the Health Professions: Ms. Borysewicz gave an informational reported on a meeting of accreditors of continuing education in the health professions held during the Alliance for Continuing Education in the Health Professions' (ACEHP) annual meeting in January 2018. The group is compiling a comparison of similarities and differences in accreditation standards, criteria, and terminology, and exploring opportunities for alignment in promoting the role of accredited CE in supporting improvements in health care.

Miscellaneous

Accreditation Council for Continuing Medical Education Update: Dr. Graham McMahon, president and CEO of the Accreditation Council for Continuing Medical Education, gave an informational presentation on “Transforming Continuing Education” and its implications for continuing professional development in all health professions. Dr. McMahon noted that the challenges facing continuing education in the healthcare professions are universal as professionals grapple with increasing time demands, institutional requirements, and professional burnout. Dr. McMahon noted that to remain relevant and meet the needs of healthcare professionals in the current environment, continuing education must evolve from a regulatory requirement to a system of learning that supports professional development. The ACCME has responded by reframing its accreditation criteria to better support physician change and promote engagement, and is communicating with a variety of stakeholders to identify standards and metrics for professional development of physicians within their institutions, in order to continue to build the value of continuing education.

ADA Executive Director’s Update: Dr. Kathleen O’Loughlin updated the Commission on ADA priorities, and presented an overview of trends in the dental market, including utilization of dental services and changing demographics in the profession. The ADA is currently in a sound fiscal position, however, with flat membership levels and increasing costs, Dr. O’Loughlin emphasized the importance of growing membership by building a more inclusive and diverse membership base and providing targeted assistance to the state dental societies, and by creating new sources of non-dues revenue.

Opioid Prescriber Education Initiatives: Ms. Borysewicz presented information on ADA activities designed to help combat the opioid crisis in the United States, including the Board of Trustees’ approval in March of an interim policy supporting mandatory education for prescribers of opioids. The Commission also considered two initiatives focused on education on appropriate prescribing practices for opioids.

Opioid Analgesia REMS: The Commission received a report concerning the U.S. Food & Drug Administration’s plans to expand its existing Risk Evaluation and Mitigation Strategy (REMS) for extended release/long acting opioids to include immediate release (IR) opioids. The FDA approved blueprint for continuing education activities offered under the REMS umbrella has been updated accordingly. With the expansion of the REMS to include IR opioids, a formulation which dentists are more likely to prescribe, the Commission discussed options for supporting dentists’ access to and participation in REMS compliant CE activities offered under the FDA Opioid Analgesia REMS program. As a result of its discussions, the Commission determined to encourage CERP recognized providers to participate in the FDA’s Opioid Analgesia REMS by developing activities that follow the blueprint.

Action: The Commission supports the FDA’s Opioid Analgesia REMS and will encourage CERP recognized providers to participate in the program by applying for grants to develop REMS compliant CE activities

The Commission next discussed whether it should participate in the process of collecting data on REMS compliant CE activities offered to dentists, and reporting aggregated data to the FDA to help the agency assess the effectiveness of the REMS.

Action: The Commission requests staff to identify the steps and resources needed for the Commission to collect and validate information on CERP recognized providers’ REMS compliant CE activities and explore opportunities for cooperating with other CE accrediting agencies, with a report to the Commission by its October 2018 meeting.

Conjoint Committee for Continuing Education: The Commission also considered an invitation to the ADA to participate in the Conjoint Committee on Continuing Education (CCCE), a coalition of

organizations with an interest in leveraging improvements in health care through continuing professional education. The group's current strategic focus is to educate prescribers of opioid analgesics and their practice teams through Risk Evaluation and Mitigation Strategies (REMS). The coalition has provided comments on the FDA REMS related to continuing education requirements on opioid prescribing, and has provided input on assessing REMS activity outcomes. Annual membership in the Conjoint Committee is less than \$1,000.

Action: The Commission approves joining the Conjoint Committee on Continuing Education.

Action: The Commission will encourage the ADA to indicate its support of continuing professional education as an essential component of healthcare improvements by becoming a member of the Conjoint Committee on Continuing Education.

New Business: In response to information presented by Dr. Graham McMahon of the Accreditation Council for Continuing Medical Education, the Commission flagged "joint accreditation" as an item for future discussion. Joint accreditation, a process by which CE providers that offer CE to an interprofessional audience can obtain multiple accreditations through a single application process, is currently available to providers that offer CE to professionals in medicine, nursing, pharmacy, physician assisting and optometry. The Commission recognized the value of further exploring principles and standards for continuing professional development common to the health professions, and learning more about joint accreditation criteria and procedures.

ADA CERP Standards, Policies and Procedures

CERP Standards Revision: Dr. Fiorellini reported on feedback received from the communities of interest to the proposed outline for revising CERP Standards and draft revisions of three of the six proposed new Standards. Written and oral comments were collected through an open hearing at the ADA Annual Meeting in October 2017 and an online call for comments open through December 2017. A total of seven comments were received in oral testimony or written form; of these, five related to management of commercial conflicts of interest in continuing education. One comment requested clarification regarding mechanisms that would satisfy the proposed new assessment standard; another requested information on the timeline for implementing the revised Standards. Drafts of the remaining three Standards and further revisions of the three Standards released in October will be presented to the Commission at its meeting in October. Members of the Commission will be asked to serve on standards revision subcommittees.

CERP Eligibility Criteria: In response to several inquiries regarding whether commercial interests can meet the CERP criteria for independence required of all providers, in 2017 the Commission appointed an ad hoc Committee to review the CERP Eligibility Criteria. The Commission also received information regarding the 2018 "Consensus Statement for Independence and Funding of Continuing Medical Education (CME)/Continuing Professional Development (CPD)" published by the International Academy for CPD Accreditation, which has taken the position that commercial interests should not be eligible for accreditation or to organize accredited activities.

In an extensive discussion of this matter, the Commission considered whether the current CERP Standards and Eligibility Criteria provide uniform guidance for ensuring independence from commercial interest that can be applied by all CE providers, and support the Commission's ability to monitor and assess provider's compliance with this requirement. Some members of the Commission questioned whether commercial interests should be eligible for recognition as providers of CE, suggesting that these providers' fiduciary responsibilities to owners and shareholders present an inherent conflict of interest with the need to provide evidence-based education that is independent of commercial interest. Members of the Commission raised questions about possible consequences of a change to CERP Eligibility Criteria, such as a drop in the number of CERP participants, or the potential growth of

educational companies funded by commercial interests. The Commission agreed that as the ADA agency responsible for setting standards for quality continuing dental education, it was appropriate to assess whether the current CERP Standards and Eligibility Criteria provide appropriate safeguards and guidance regarding managing commercial conflicts of interest. The Commission acknowledged that in considering changes to the CERP Standards or Eligibility Criteria it would be important to obtain feedback from a broad spectrum of stakeholders, including those that could be impacted by any changes, through a combination of discussion, survey and formal calls for comment. The Commission therefore requested the ad hoc Committee on CERP Eligibility Criteria to draft recommendations for revising the Eligibility Criteria, and to outline a proposed communication plan and implementation strategy.

Action: The Commission directs the Committee on CERP Eligibility Criteria to develop recommendations regarding the eligibility of commercial entities as CERP providers and if any changes are proposed, the Committee shall develop recommendations for implementation, with a report to the Commission at its October 2018 meeting.

ADA CERP Recognition

April 2018 Recognition Actions: The Commission considered 18 new applications for ADA CERP recognition, 71 applications for continued recognition, including one request for reconsideration of intent to withdraw, 12 progress reports and two reports of substantive change. The Commission granted initial recognition to 18 providers of continuing dental education, and continued recognition to 68 providers. The Commission postponed action on one application, and issued two notices of intent to withdraw recognition. The Commission granted four providers extensions of their recognition terms pending submission of an application for continued recognition in June 2018. The Commission discontinued recognition of five providers at the request of the providers. Including the Commission's April 2018 actions on recognition, 467 CE providers are currently ADA CERP recognized. Individual recognition actions are noted in Appendix 4, which is a confidential section of these minutes. The official list of ADA CERP recognized providers is published at ADA.org/CCEPR.

Action: The Commission grants recognition or continued recognition to a total of 86 providers of continuing dental education. The Commission's April 2018 actions regarding ADA CERP recognition are summarized in Appendix 4.

Results of Spring 2018 CERP Applicant Survey: The Commission received an informational report summarizing survey results from providers submitting applications each cycle (consent calendar item).

CERP Participation and Approval Data: The Commission received an informational report tracking annual data on program participation, submission types and acceptance rates (consent calendar item).

Extended Approval Process (EAP) Update: Mr. McNulty provided an informational report to the Commission on the Extended Approval Process. The EAP allows state dental societies and the national organizations of the ADA recognized specialties that have been granted CERP recognition to extend recognition to their local societies, through a review process that they conduct. Participation in EAP is voluntary. For the May 2018–June 2019 approval period, 15 CERP approved providers (four specialty societies and 11 ADA constituent societies) report that they will be extending approval to a total of 102 component societies. The list of EAP approved providers is posted on ADA.org/CERP.

CERP Reviewer Discussion and Calibration Exercise: The Commission participated in an exercise to calibrate reviews of CERP applications.

Adjournment: 10:50 a.m., Friday, April 13, 2018.