

**MEETING MINUTES OF THE  
AMERICAN DENTAL ASSOCIATION  
COUNCIL ON GOVERNMENT AFFAIRS  
ADA OFFICES, WASHINGTON, DC  
MARCH 1-3, 2018**

**CALL TO ORDER**

The first regular meeting of the Council on Government Affairs (CGA) was called to order by Dr. Frank Graham, CGA chair, at 4:03 pm, Thursday, March 1st on the 11th floor Conference Room at the ADA Washington Office, 1111 14th St NW, Washington, DC 20005.

**ROLL CALL**

**Members:** (District 1) Dr. Mark Desrosiers, 2020; (District 2) Dr. Lauro Medrano-Saldana, 2019; (District 3) Dr. Frank Graham, Chair, 2018; (District 5) Dr. Deborah Bishop, 2020; (District 6) Dr. K. Jean Beauchamp, 2018; (District 7) Dr. Matthew Messina, 2021; (District 8) Dr. Phillip Fijal, 2020; (District 9) Dr. Rhonda Hennessy, 2020; (District 10) Dr. Emily Willett, 2021; (District 11) Dr. David Minahan, 2018; (District 12) Dr. Marty Garrett, 2018; (District 13) Dr. Ariane Terlet, 2019; (District 14) Dr. David White, 2021; (District 15) Dr. Craig Armstrong, Vice-Chair, 2019; (District 16) Dr. Dan Cheek, 2019; (District 17) Dr. Zack Kalarickal, 2020; (New Dentist Committee) Dr. Robin Nguyen, 2020.

**Not in attendance:** Dr. John Reitz, 2021 (District 4).

**Liaisons:** Dr. Rickland Asai, Board of Trustees; Mr. Kyle Lantz, American Student Dental Association, Dr. Gerald Bird, American Dental Political Action Committee, Dr. Timothy Fagan, Chair, Council on Advocacy for Access and Prevention, Ms. Janette Sonnenberg, Alliance of the American Dental Association.

**ADA Board of Trustees:** Dr. Joseph P. Crowley, ADA president and Dr. Jeffrey Cole, ADA president-elect.

**Council Staff:** Mr. Michael Graham, senior vice president, Government & Public Affairs; Ms. Janice E. Kupiec, director; Dr. Frank Kyle, manager; Mr. Robert Burns, manager; Ms. Lauren Kyger, lead project assistant.

**Other ADA Staff Present for all or part of the meeting:** Dr. Kathleen O'Loughlin, executive director, ADA; Mr. Chris Tampio, director, Congressional Affairs; Ms. Megan Mortimer, lobbyist, Congressional Affairs; Ms. Jennifer Fisher, lobbyist, Congressional Affairs; Ms. Natalie Hales, lobbyist, Congressional Affairs; Ms. Sarah Milligan, director, ADPAC; Mr. Peter Aiello, manager, ADPAC Grassroots & Digital Advocacy; Ms. Jennifer Garvin, Washington Editor, Publications; Ms. Katherine Merullo, manager, Public Affairs & Advocacy Communications; Dr. Jane Grover, director, Council on Advocacy for Access & Prevention; Ms. Mary Ellen Murphy, Coordinator, Council on Advocacy for Access & Prevention; Mr. C. Michael Kendall, senior associate general counsel, Legal Affairs; Dr. Marko Vujcic, chief economist & VP, HPI; Dr. Dave Preble, senior vice president, Practice Institute; Mr. Chad Olson, director, State Government Affairs; Mr. Jeff Troupe, senior legislative liaison, State Government Affairs.

**Guests of the ADA:** Dr. Bruce Hutchison, former ADPAC Chair.

**Federal Dental Services' Chiefs:** Colonel James R. Honey, chief, TRICARE Dental Care Division; Dr. Gregory Smith, Director of Dental Operations for the Veterans Affairs Administration; Major General Roosevelt Allen, Chief of the Dental Corps and Director, Medical Operations and Research Chief, Office of the Surgeon General, Headquarters U.S. Air Force; Colonel Brett Henson, Deputy Dental Corps Chief, U.S. Army Dental Corps; Rear Admiral Nicholas S. Makrides, Assistant Surgeon General, Chief Dental Officer, USPHS; Rear Admiral Gayle D. Shaffer, Chief, Navy Dental Corps, Bureau of Medicine and Surgery.

**Thursday, March 1, 2018**

**ADA Disclosure Policy**

Dr. Frank Graham referenced the ADA Disclosure Policy included in the agenda and called for disclosures. No disclosures were made.

**Adoption of the Agenda and Consent Calendar**

The Council agenda and Consent Calendar were approved without comment.

**Legislative Priorities**

The Legislative Priorities document was reviewed and Ms. Kupiec stated that she will send a future communication and call for member assignments to each issue team.

**Report of the Chair**

Dr. Graham welcomed new Council members, outlined key aspects of the meeting agenda and encouraged full participation. Dr. Bishop will replace Dr. Graham on the Dental Quality Alliance. Dr. Graham attended the Board of Trustees' Strategic Discussion on Medicare, held in Chicago on February 11. It was noted that the District Reports were placed on the consent calendar and the written reports included in the agenda book.

**ADA President and President-Elect Welcome Remarks**

Dr. Crowley, president, and Dr. Cole, president-elect, provided welcome remarks to the Council.

**Report of the Senior Vice President of Government and Public Affairs**

Mr. Graham stated that it has been an incredibly busy and productive time under the new Administration and dentists have been very engaged. Tax reform, Action for Dental Health, McCarran-Ferguson, non-covered services and dental therapy issues have been moving forward. The ADA House exceeded expectations and members of Congress have been impressed with the property.

**Review of ADA Policies on Professional Conduct, Conflict of Interest and Copyright**

Mike Kendall presented the ADA Professional Conduct Policy and Prohibition against harassment, and the ADA's Conflict of Interest Policy and Copyright Assignment. He addressed the fiduciary duties of Council members, including staying true to mission, duty of care and duty of loyalty. Council members, as fiduciaries, are asked to complete conflict of interest/disclosure forms annually to help fulfill the duty of loyalty. It was noted that Council actions should not be shared until the Unofficial Actions are released. Council members may be provided with sensitive information which is not to be shared outside of the Council or the Association.

**Report of the Alliance of the American Dental Association**

Ms. Sonnenberg stated that the Alliance is doing well and looking forward to the organization's conference, scheduled April 19-21 in Fort Worth, Texas. The conference is an opportunity to educate Alliance members.

**Report of the ADA Trustee-Liaison**

Dr. Asai provided the Council with an update from the Board. The Board relies on discussions and recommendations of the Council on legislative and regulatory issues. He noted that from a communications standpoint, the ADA needs to support its members and the oral health of the public.

**Report of the Council on Advocacy for Access and Prevention (CAAP)**

Dr. Fagan provided the Council with an update on CAAP's council meeting, held January 18-20 in Chicago, and stressed the collaborative relationship CAAP has with CGA. Action for Dental Health (ADH) remains a priority to increase access. During the January meeting, CAAP spent time re-prioritizing issues, which align with the ADA's strategic plan. CAAP discussed a dental benefit in Medicare.

The ADH initiative has focused on community water fluoridation, the community dental health coordinator (CDHC), and Native American oral health. Recently, an 18<sup>th</sup> school has signed a CDHC licensing

agreement, Hillsborough Community College in Tampa, FL. One of CAAP's goals is to have each state dental association endorse the CDHC program.

#### **Report of the New Dentist Committee**

Dr. Nguyen stated that the NDC met with the BOT on February 11 to discuss the Council on Dental Benefit Programs resolutions focused on a dental benefit in Medicare. The NDC also discussed the Business Model Project and the role of social media. Priority items for 2018 include: dental school programs and outreach; creation of a success speaker program; maternity and paternity leave polices; and the 10 Under 10 Award.

#### **Report of the American Student Dental Association**

Mr. Lantz stated that ASDA held its annual meeting in Anaheim, CA and Dr. Cole hosted a reception. ASDA is looking forward to the ADA Dentist and Student Lobby Day and the goal is to have 450 dental students participate.

#### **Report of the American Dental Political Action Committee (ADPAC)**

Dr. Bird stated that ADPAC's priority is the ADA Dentist and Student Lobby Day and the planning committee is focused on the agenda. Fundraising is another top priority and ADPAC is working to keep the four dentist members in Congress and add additional dentists. Eight dentists are running for Congress.

**Update on the ADA Dentist and Student Lobby Day 2018:** Ms. Milligan and Mr. Aiello provided updates to the Council, including an overview of the ADA Dentist and Student Lobby Day events and logistics. The issues for 2018 include: higher education; McCarran-Ferguson; Action for Dental Health; non-covered Services; and opioids.

#### **Governance Presentation of the Executive Director**

Dr. O'Loughlin provided the Council with an overview of the role governance provides in decision-making. Governance is the process of governing, not managing, and provides the direction for those who engage in management or have a role of authority. She stressed three main points: 1) duty of care, or the "prudent person" rule; 2) duty of loyalty to the mission; and 3) duty of obedience to the organization.

Ms. Kupiec noted that going forward, the Governance presentation will be incorporated into the new member orientation.

#### **Presentation of the Executive Director**

Dr. O'Loughlin provided the Council with some of the ADA's 2017 accomplishments, including adding the New Dentist representative as a voting member of each council. The Division of Scientific Affairs had a good year, with a focus on the ADA seal program. Dr. O'Loughlin provided an update on the Find-A-Dentist initiative and asked the Council to encourage fellow members to update their profile.

Dr. O'Loughlin focused on membership growth, a significant risk for the ADA. The ADA's goal is to increase membership by 4,000 additional (net) members over five years. There are four factors that affect membership growth: 1) governance; 2) existence of a plan of action; 3) capability and capacity of staff; and 4) sufficient funds to resolve a loss of membership. The relationship between the ADA, constituent and component societies is important for overall success at all levels. Ongoing areas of focus for the ADA include: simplifying the member experience; filling the pipeline with new and student dentists; and focusing and refining the ADA's message.

#### **Medicare Strategic Discussion**

The Council had a strategic discussion focused on a dental benefit in Medicare. Dr. Krishna Aravamudhan, senior director, Center on Dental Benefits, Coding and Quality, joined the discussion via phone. The Council on Dental Benefit Programs (CDBP), the lead agency within the ADA tasked by the Board to examine the issue, adopted two resolutions during its November 2017 meeting which were transmitted to CGA. Dr. Aravamudhan provided background to the Council on CDBP's work and rationale for its actions.

The discussion focused on the potential pros and cons of a dental benefit in Medicare and the points identified during the Board's strategic discussion in February. The points include: 1) Reputation of the ADA and the impact of a position on Medicare; 2) momentum and efforts by stakeholders outside of the ADA; 3) influence of the ADA; and 4) the financial implications of this for a dental practice.

The Council went into executive session for approximately 40 minutes to discuss the two CDBP resolutions.

Dr. Graham stated that the key issues for CGA to consider regarding a dental benefit in Medicare are: the ADA's reputation; legislative influence and existing ADA policy. The Council chose to consider each resolution separately. In discussing the first resolution, it was noted that 'support' for a dental benefit in Medicare has been existing ADA policy for almost 40 years. The council chose to amend the first resolution by deleting the words 'development of' since at this point there is only an ill-defined concept that lacks specifics. Dr. Kalarickal then proposed an amendment to the resolution by addition. Both amendments were approved by a majority of the Council.

The Council then discussed the placement of a dental benefit, whether the proposed benefit should be in Part B, Part C Medicare Advantage (utilizing commercial insurance) or under a new category (Part T). The Council chose to delete the reference to 'Part B' in the second resolution. The discussion on the second resolution was focused on both appropriate placement within Medicare and sustainability.

The Resolutions were presented as follows:

**Resolved**, that the ADA support ~~the development of~~ a dental benefit in Medicare, which assists patients to lead healthier lives through patient-dentist partnerships in a sustainable Medicare model.

**A vote was taken by a show of hands. The Resolution was approved by a majority of the Council.**

A proposal that the Council place the Second Resolution on the table indefinitely was moved. It did not pass.

Dr. Aravamudhan stated that CDBP would like feedback on the elements of the proposed Resolution. The Council discussed sustainability of dentistry, costs and additional fees that may be incurred by dentists and dental practices. After discussing the appropriate placement, the resolution was amended and a vote taken.

**Resolved**, that the ADA believes that the following principles are essential to the success of a Medicare Program with a dental benefit:

- Comprehensive services are included and placed in the appropriate category of section ~~Part B~~ within Medicare with adequate program appropriations
- Comprehensive services are included and placed in the appropriate category within Medicare with adequate program appropriations
- A multi-stakeholder process convened by the American Dental Association (ADA) to:
  - Establish RVUs for procedures or other similar valuation systems used to determine relative fees
  - Establish any necessary prior authorization guidelines
  - Identify evidence and oral health guidelines
  - Create audit guidelines to assure program integrity and
  - Establish quality measures through the Dental Quality Alliance
- The goal of the program is not only to achieve the "Triple Aim" of better health outcomes, better care experience, and lower per capita cost, but also to improve work life of care providers.
- Allow dentists the choice to participate in the program without establishing any mandates.
- Appropriate program provisions including adequate consumer benefit and provider remuneration to ensure a sufficient provider network.

- Uphold patients' rights by revising regulations to allow patients a Medicare benefit regardless of whether or not the provider they choose participates in Medicare.
- Both the benefit design, as well as payment models incentivize prevention oral wellness and allow patients the right to select treatment options for optimal health through consultation with their dentist.
- Funding for technical support is provided for dental practices to adopt standards for quality reporting and participation when transitioning into any alternate payment models.
- The CDT Code continues to be the standard code set for reporting dental procedures.

**A vote was taken by a show of hands and approved by a majority of the Council. The resolutions will be sent back to CDBP.**

#### **Update on Tax Reform**

Mr. Graham and Ms. Mortimer provided the Council with an update on the tax reform legislation Congress passed in December 2017. Four of the five provisions the ADA advocated for were included in the final bill. They include: Section 179 expensing; cash accounting; student loan interest deduction, the final law retained the student loan interest deduction at its current levels; and the pass through deduction, the deduction is limited to certain professional services, including dentistry. The ADA advocated for the expansion of flexible spending accounts but those provisions were not included in the final bill.

The IRS will issue final regulations later in 2018 that address this concern.

#### **Federal Limits on Opioid Prescribing**

Dr. Armstrong, Mr. Burns and Ms. Hales provided the Council with an overview of the opioid issue at the federal level. Ms. Bramhall, manager, Council on Dental Practice; Ms. Jennifer Donahue, manager, state government affairs; Ms. Karen Hart, director, Council on Education and Licensure and senior director, Educational Operations, joined by conference line. Staff informed the Council that the issue of opioid prescribing has been addressed in over 24 Congressional hearings and is raised during meetings with Hill staff. There are over 120 bills that have been introduced in Congress.

Dr. Armstrong stated that we need action on the issue and CGA could assist with interim policy. Mr. Graham stated that the ADA needed to have something to share with lawmakers during the Lobby Day meeting. The discussion was tabled until later in the day.

The following Resolution was proposed:

### **INTERIM BOARD POLICY ON OPIOD PRESCRIBING**

#### **CONTINUING EDUCATION**

**Resolved,** that the ADA supports a mandatory national standard for continuing education in prescribing opioids and other controlled substances, with an emphasis on preventing drug overdoses, chemical dependency, and/or diversion, based on the following principles:

1. Any CE requirement should exempt dentists that do not have a Drug Enforcement Administration registration to prescribe controlled substances,
2. Any CE requirement should provide that the continuing education credit will be acceptable for both DEA registration and state dental board requirements,
3. Any CE requirement should provide an avenue for the coursework to be tailored to the scope of dental practice,

4. Any CE requirement should provide that the number of continuing education hours required during a given cycle is tied to evidence-based clinical recommendations for managing acute pain in dental settings,
5. Any CE requirement should include a phase-in period to permit affected dentists an opportunity to comply,

and be it further

#### **DOSE AND DURATION**

**Resolved**, that the ADA supports statutory limits on opioid selection, dosage, duration of no more than seven days for the initial treatment of acute pain, and be it further

#### **PRESCRIPTION DRUG MONITORING**

**Resolved**, that the ADA supports mandatory use of prescription drug monitoring programs to promote the appropriate use of opioid pain relievers for legitimate medical purposes and deter the misuse, abuse and diversion of these substances, and be it further

**Resolved**, that the ADA, as well as constituent and component dental societies, should seek to improve the quality, integrity, and interoperability of state prescription drug monitoring programs.

**This Resolution was approved by a majority of the Council.**

#### **Congressional Affairs Update**

Ms. Hales, Ms. Mortimer and Mr. Tampio provided an update on Congressional issues for the Council including: monograph reform; non-covered services (H.R. 1606); Action for Dental Health; and reauthorization of the higher education act. Staff is working with ASDA on issues for the Dentist and Student Lobby Day meeting.

#### **State Public Affairs Oversight Workgroup Update**

Mr. Olson and Mr. Troupe provided an update on the State Public Affairs Oversight Workgroup and its activities. They addressed workforce activities in the states and indicated that no dental therapy bills passed in 2017. In 2018, Pew and Kellogg have spent over \$1 million on efforts to promote dental therapy. The ADA is working closely with the states, through the oversight workgroup, on strategies to defray alternative provider efforts.

#### **Action for Dental Health Update**

Dr. Grover provided the Council with an update on ADH activities. Priority areas include: community water fluoridation; ED referral; CDHC and Medicaid. Work is underway on HPV Referral and education; a health literacy webinar and video from the National Advisory Committee on Health Literacy in Dentistry; and a video for Medicare and Medicaid. Priority cities have been identified and work is being completed on an ED Development Guide. The CDHC program continues to expand and currently 18 schools are part of the program. The CDHC programs have graduated 134 students and 215 are currently enrolled. CAAP continues to offer education for Medicaid providers, including a CE Course and Medicaid Boot Camps.

#### **CGA Representatives on ADA Workgroups, Committees and Subcommittees**

Dr. Graham stated that his term will be concluding with the Dental Quality Alliance (DQA) and Dr. Bishop will serve as the liaison. In preparation, Dr. Bishop attended the DQA meeting in December 2017. The DQA is undergoing a governance review to determine the roles of plan members and levels of participation. The DQA is scheduled to meet June 29, 2018 in Chicago.

#### **Veterans' Affairs Legislation Update**

Mr. Tampio and Dr. Kyle provided the Council with an update on veterans' affairs activities that have taken place since the August 2017 meeting. Staff met with Congressman Bilirakis's office in October and

again in February to discuss H.R. 1749. In October, staff suggested the Congressman meet with Dr. Pat Arola, assistant under secretary for health for dentistry in the Department of Veterans Affairs, to discuss the proposed study. During the February meeting, staff were informed that the Congressman had met with Dr. Arola and other officials from the VA.

Mr. Tampio asked the Council if the ADA could send a letter to Congressman Bilirakis that acknowledges veteran oral health issues and his efforts to address the issues. Staff will follow-up with a draft for the Council after the meeting for review and approval.

### **Report on Club 137**

Dr. Hutchison, former ADPAC chair, provided an update to the Council on Club 137. Club 137, named after the ADA House at 137 C Street, was created by former ADPAC chairs who desired to remain involved once their terms concluded and leverage existing contacts, knowledge and resources. Club 137 can help support the ADA's advocacy and grassroots efforts. Club 137 will meet prior to the state of the ADA Dentist and Student Lobby Day meeting and all CGA members are invited to join and attend the scheduled events.

### **Saturday, March 3, 2018**

#### **Federal Dental Services Presentations:**

Colonel Brett Henson, Deputy Dental Corps Chief, U.S. Army Dental Corps, updated the Council on both the medically ready force and the ready medical force, ensuring soldiers are ready for combat and care is available for soldiers in the field. Colonel Henson stated that potential areas for collaboration with the ADA include the Council on Scientific Affairs, opioids activities and work with the National Institutes of Health.

Major General Roosevelt Allen, Chief of the Dental Corps and director, Medical Operations and Research Chief, Office of the Surgeon General, updated the Council on the Air Force's medical services. The USAF has 40,000 medics and they ensure members receive the treatment that is necessary. There are approximately 1,000 dentists and 924 are on active duty. The UASF has four goals: 1) readiness, ensure individuals are fit to fight; 2) better care; 3) better health with a focus on prevention and building resiliency; and 4) best value to ensure funds are used appropriately. Major General Allen states he will be retiring this year.

Rear Admiral Gayle D. Shaffer, Chief, Navy Dental Corps, Bureau of Medicine and Surgery, updated the Council on staffing and promotion within the Navy Dental Corps. There are over 1,142 dentists to serve Navy personnel and the corps is focused on training to ensure care is provided for both Navy and Marine Corps personnel on land and at sea. She stated that the Health Promotion Scholarship Program is a useful for recruitment.

Rear Admiral Nicholas Makrides, Assistant Surgeon General and Chief Dental Office, U.S. Public Health Service, and Chief Dental Officer, Federal Bureau of Prisons, provided an update to the Council on the role of the USPHS and its 6,500 mobile health professionals. In 2017 the USPHS had 254 dentists and in 2018 the number is 223. The largest number of dentists work for the Bureau of Prisons and the Indian Health Service. Rear Admiral Makrides stated he will be retiring this year.

Dr. Gregory Smith, Director of Dental Operations for the Veterans Affairs Administration, provided the Council with an update on the 231 VA site of care for veterans. He noted that there are 7,700 daily patient encounters. The VA has 3,500 dentists, with 1,000 serving in a full time capacity. Dr. Smith shared a video, available on You Tube, which highlights the role brushing teeth twice a day can have on the prevention of hospital acquired pneumonia. The VA is sharing the video broadly to help educate health professionals on caring for the oral health of patients. He also stated that the VA Dental Insurance Program for veterans has been extended through 2021.

Colonel James R. Honey, USA, DC, Chief, TRICARE Dental Care Section, Health Plan Execution and Operations Defense Health Agency, updated the Council on a directive from the Department of Defense to the Defense Health Agency regarding a shift to one large health organization capable of providing centralized health care. Dentistry is one of the ten healthcare areas and the agency employs 4,500 dentists. Dental readiness has been a problem for deployment and the agency has four core functions. 1) Budgeting; 2) information management; 3) policies and procedures; 4) administration of healthcare across the entire organization and 5) communication. Two focus areas include program management and contract surveillance.

**Future Council Meeting Dates**

The Council will meet August 16-18, 2018; February 7-9, 2019; and August 1-3, 2019.

**New Business**

Dr. Kalarickal suggested having a CGA breakfast during the annual meeting in Honolulu and taking a group photo of the Council. A photo will be taken during the August meeting.

**Old Business:**

The Council on Government Affairs was **adjourned** at 11:23 AM on Saturday, March 3, 2018.



**Council on Government Affairs (CGA)**  
**Unofficial Report of Major Actions**  
**March 1-3, 2018**

The Council on Government Affairs met March 1-3, 2018 in the Washington D.C. office. The following is a summary of major actions taken by the Council.

1. The Council on Government Affairs discussed and considered two resolutions adopted by the Council on Dental Benefit Programs during their November 2017 meeting. The Council approved the following resolutions.

**Resolved;** that the ADA support a dental benefit in Medicare, which assists patients to lead healthier lives through patient-dentist partnerships in a sustainable Medicare model.

**Resolved,** that the ADA believes that the following principles are essential to the success of a Medicare program with a dental benefit:

- Comprehensive services are included in and placed in the appropriate category within Medicare with adequate program appropriations.
- A multi-stakeholder process convened by the American Dental Association (ADA) to:
  - Establish RVUs for procedures or other similar valuation systems used to determine relative fees;
  - Establish any necessary prior authorization guidelines;
  - Identify evidence and oral health guidelines;
  - Create audit guidelines to assure program integrity; and
  - Establish quality measures through the Dental Quality Alliance
- The goal of the program be not only to achieve the “Triple Aim” of better health outcomes, better care experience, and lower per capita cost but also to improve work life of care providers.
- Allow dentists the choice to participate in the program without establishing any mandates.
- Appropriate program provisions including adequate consumer benefit and provider remuneration to ensure a sufficient provider network.
- Uphold patients’ rights by revising regulations to allow patients a Medicare benefit regardless of whether or not the provider they choose participates in Medicare.
- Both the benefit design, as well as payment models incentivize prevention, oral wellness and allow patients the right to select treatment options for optimal health through consultation with their dentist.
- Funding for technical support is provided for dental practices to adopt standards for quality reporting and participation when transitioning into any alternate payment models.
- The CDT Code continues to be the standard code set for reporting dental procedures.

2. The Council reviewed the impact of the tax reform on dental practices.

3. The Council approved interim policy on opioids and moved the resolution to the Board of Trustees for consideration.

**Continuing Education**

**Resolved,** that the ADA supports a mandatory national standard for continuing education in prescribing opioids and other controlled substances, with an emphasis on preventing drug overdoses, chemical dependency, and/or diversion, based on the following principles:

1. Any CE requirement should exempt dentists that do not have a Drug Enforcement Administration registration to prescribe controlled substances,

2. Any CE requirement should provide that the continuing education credit will be acceptable for both DEA registration and state dental board requirements,
3. Any CE requirement should provide an avenue for the coursework to be tailored to the scope of dental practice,
4. Any CE requirement should include a phase-in period to permit affected dentists an opportunity to comply and be it further,

#### **Dose and Duration**

**Resolved**, that the ADA supports statutory limits on opioid selection, dosage, duration of no more than seven days for the initial treatment of acute pain and be it further

#### **Prescription Drug Monitoring**

**Resolved**, that the ADA supports mandatory use of prescription drug monitoring programs to promote the appropriate use of opioid pain relievers for legitimate medical purposes and deter the misuse, abuse and diversion of these substances and be it further,

**Resolved**, that the ADA, as well as constituent and component dental societies, should seek to improve the quality, integrity, and interoperability of state prescription drug monitoring programs.

4. The Council received updates on (1) Congressional Affairs (2) State Public Affairs and (3) Action for Dental Health

5. The Council agreed to allow staff to send a letter to Congressman Bilirakis acknowledging his commitment to the oral health of veterans and urge support for the Section 1712 amendment.

6. The Council was briefed by representatives of the Federal Dental Services on activities related to military readiness and dental care.

#### **CGA Council Members:**

Dr. Frank Graham, Chair, NJ  
Dr. Craig Armstrong, Vice-Chair, TX  
Dr. Jeanne Beauchamp, TN  
Dr. Deborah Bishop, AL  
Dr. Daniel Cheek, NC  
Dr. Mark Desrosiers, CT  
Dr. Philip Fijal, IL  
Dr. Marty Garrett, LA  
Dr. Rhonda Hennessey, MI  
Dr. Zacharias Kalarickal, FL  
Dr. Lauro Medrano-Saldano, NY  
Dr. Matthew Messina, OH  
Dr. Dave Minahan, WA  
Dr. Robin Nguyen, FL, New Dentist Committee  
Dr. David Reitz, PA  
Dr. Ariane Terlet, CA  
Dr. David White, NV  
Dr. Emily Willett, NE

#### **Liaisons:**

Dr. Rickland Asai, Trustee-Liaison, Eleventh Trustee District, OR  
Dr. Jerry Bird, chair, American Dental Political Action Committee, FL  
Dr. Timothy Fagan, chair, Council on Advocacy for Access and Prevention  
Ms. Janette Sonnenberg, Alliance of the American Dental Association, UT  
Mr. Kyle Lantz, American Student Dental Association

**The Council will meet August 16-18, 2018 in Washington, DC.**

**MEETING MINUTES OF THE  
AMERICAN DENTAL ASSOCIATION  
COUNCIL ON GOVERNMENT AFFAIRS  
Meeting by Conference Call  
May 23, 2018**

**Members in attendance for all or part of the scheduled call:** (District 2) Dr. Lauro Medrano-Saldana, 2019; (District 3) Dr. Frank Graham, Chair, 2018; (District 5) Dr. Deborah Bishop, 2020; (District 6) Dr. K. Jean Beauchamp, 2018; (District 7) Dr. Matthew Messina, 2021; (District 8) Dr. Phillip Fijal, 2020; (District 9) Dr. Rhonda Hennessy, 2020; (District 10) Dr. Emily Willett, 2021; (District 11) Dr. David Minahan, 2018; (District 12) Dr. Marty Garrett, 2018; (District 13) Dr. Ariane Terlet, 2019; (District 14) Dr. David White, 2021; (District 15) Dr. Craig Armstrong, Vice-Chair, 2019; (District 16) Dr. Dan Cheek, 2019; (District 17) Dr. Zack Kalarickal, 2020; (New Dentist Committee) Dr. Robin Nguyen, 2020.

**Liaisons in attendance for all or part of the scheduled call:** (ADPAC) Dr. Jerry Bird; (CAAP) Dr. Rich Herman; (Board of Trustees) Dr. Rick Asai.

**Staff in attendance:** Ms. Janice E. Kupiec (director of the Council on Government Affairs); Mr. Michael Graham (senior vice president of Government Affairs); and Mr. Michael Kendall (senior associate general counsel).

**Senate Property**

Mr. Michael Graham addressed the Council and provided an update on the purchase of a property by the ADA on the Senate side of Capitol Hill. The property, located at 400 C. Street NE, Washington, DC. Mr. Graham shared the draft resolution that was to be presented to the Board of Trustees on May 30. A brief discussion took place and Dr. Graham and Dr. Armstrong moved forward with asking the Council to approve the purchase of the property by voice vote. The Council approved the purchase of the property by the ADA.

**Medicare Discussion**

The Council on Government Affairs discussed the Medicare revised resolution language sent to the Council by the Council on Dental Benefit Programs. The Council members discussed concerns over the process moving resolutions through multiple agencies within the Association and the impact a dental benefit in Medicare would have on the profession. Concern was expressed over the in-person meeting of the chairs and vice chairs for CDBP, CGA, the Council on Access for Advocacy and Prevention and the Council on Dental Practice that was held on Sunday, April 8 in Washington DC, the lack of transparency in the process, stated the process needs to slow down, questioned the urgency of moving the issue forward and the implications on membership should be considered. The Council agreed that more information on the impact the addition of a dental benefit in Medicare, whether under Part B or a separate benefit, is needed before any resolution is sent to the House of Delegates.

Drs. Graham and Armstrong agreed to an electronic ballot for the Council on the revised language (as listed below). There was no further business discussed on the conference call and the call adjourned.

The ballot was open May 24 – May 29 and the Council did not approve the resolution.

The Council did not approve the following:

**Resolved**, that the following draft policy statement regarding a dental benefit in Medicare be approved for submission to the House of Delegates.

**Resolved**, that a dental benefit in Medicare shall provide:

- Coverage for comprehensive services in an appropriate part within Medicare with adequate program funding.
- ~~Sufficient dentist participation through adequate reimbursement.~~
- Reimbursement rates at or above median fees (50th percentile) as described in the current ADA Survey of Dental Fees to ensure adequate dentist participation.
- Funding for technical support for dental practice participation including adoption of health IT standards
- Minimal and reasonable administrative requirements for dental practice participation

Medicare beneficiaries with the freedom to choose any dentist while continuing to receive the full Medicare benefit

### **Additional Business**

A suggestion was put forward electronically to create an inter-agency workgroup, comprised of representatives from CGA, CDBP, CDP and CAAP, and the addition of representatives from the Council on Communications, the Council on Membership and the Board of Trustees, to focus on the oral health needs of the elder care population, consider all existing Medicare policy and use the 2018-2019 year to develop a more modernized policy for the 2019 House of Delegates.

**MEETING MINUTES OF THE  
AMERICAN DENTAL ASSOCIATION  
COUNCIL ON GOVERNMENT AFFAIRS  
ADA OFFICES, WASHINGTON, DC  
August 16-17, 2018**

**CALL TO ORDER**

The second regular meeting of the Council on Government Affairs (CGA) was called to order by Dr. Frank Graham, CGA chair, at 4:04 PM, Thursday, August 16<sup>th</sup> on the 11th floor Conference Room at the ADA Washington Office, 1111 14th St NW, Washington, DC 20005.

**ROLL CALL**

**Members:** (District 1) Dr. Mark Desrosiers, 2020; (District 2) Dr. Lauro Medrano-Saldana, 2019; (District 3); Dr. John Reitz, 2021 (District 4); Dr. Frank Graham, Chair, 2018; (District 5) Dr. Deborah Bishop, 2020; (District 6) Dr. K. Jean Beauchamp, 2018; (District 7) Dr. Matthew Messina, 2021; (District 8) Dr. Phillip Fijal, 2020; (District 9) Dr. Rhonda Hennessy, 2020; (District 10) Dr. Emily Willett, 2021; (District 11) Dr. David Minahan, 2018; (District 12) Dr. Marty Garrett, 2018; (District 13) Dr. Ariane Terlet, 2019; (District 14) Dr. David White, 2021; (District 15) Dr. Craig Armstrong, Vice-Chair, 2019; (District 16) Dr. Dan Cheek, 2019; (District 17) Dr. Zack Kalarickal, 2020 (District 17); (New Dentist Committee) Dr. Robin Nguyen, 2020.

**Liaisons:** Dr. Rickland Asai, Board of Trustees; Dr. Kyle Lantz, American Student Dental Association, Dr. Tommy Harrison, American Dental Political Action Committee, Dr. Timothy Fagan, Chair, Council on Advocacy for Access and Prevention, Ms. Janette Sonnenberg, Alliance of the American Dental Association.

**Council Staff:** Mr. Michael Graham, senior vice president, Government & Public Affairs; Ms. Janice E. Kupiec, director; Dr. Frank Kyle, manager; Mr. Robert Burns, manager; Ms. Baker Howry, lead project assistant

**Other ADA Staff Present for all or part of the meeting:** Dr. Kathleen O'Loughlin, executive director, ADA; Mr. Chris Tampio, director, Congressional Affairs; Ms. Megan Mortimer, lobbyist, Congressional Affairs; Ms. Natalie Hales, lobbyist, Congressional Affairs; Ms. Sarah Milligan, director, ADPAC; Mr. Peter Aiello, manager, ADPAC Grassroots & Digital Advocacy; Ms. Jennifer Garvin, Washington Editor, Publications; Ms. Katherine Merullo, manager, Public Affairs & Advocacy Communications; Dr. Jane Grover, director, Council on Advocacy for Access & Prevention; Ms. Mary Ellen Murphy, coordinator, Council on Advocacy for Access & Prevention; Mr. C. Michael Kendall, senior associate general counsel, Legal Affairs; Mr. Chad Olson, director, State Government Affairs; Mr. Paul O'Connor, senior legislative liaison, State Government Affairs; Dr. Dave Preble, senior vice president, ADA Practice Institute. Ms. Pam Von Lehmden, senior director, Integrated Marketing and Communications (via webinar).

**Guest of the ADA:** Rear Admiral Nicholas S. Makrides, D.M.D., M.A., M.P.H., Chief Dental Officer, U.S. Public Health Service joined the meeting for a presentation on Friday.

**Thursday, August 16, 2018**

**Adoption of the Agenda and Consent Calendar**

The Council adopted the agenda by general consent giving the Chair permission to reorder the items as needed. Item 26, the Council Elections, was moved to the end of the day on Thursday.

**Resolved,** the consent calendar was approved as presented.

**Report of the Chair:** Dr. Graham thanked the staff for their support and stated that he enjoyed serving on the Council for the past four years.

**Report of the Senior Vice President of Government Affairs**

Mr. Graham focused his comments on the effort over the last four years to increase the ADA brand and enhance the ADA's reputation. These efforts commenced with the purchase of the ADA House at 137 C Street. Mr. Graham provided an overview of a report from surveys conducted on Capitol Hill focused on oral health organizations. The results indicate that the ADA is highly visible on Capitol Hill and viewed as a credible organization. Mr. Graham concluded his presentation with an overview of the recently purchased Stanton Park property, located 2.5 blocks from the Senate Hart Office Building.

**Report of the ADA Trustee-Liaison:** Dr. Asai thanked the Council for passing the Interim Opioid Policy at the March meeting and for participating in the ongoing discussions on a dental benefit in Medicare. He noted that there is a continual balance between helping our members succeed as well as helping ensure the health of the public.

**Report of the Alliance of the American Dental Association**

Ms. Sonnenberg provided an update on the activities of the Alliance. The Alliance meeting included presentations from both Dr. Harrison, ADPAC chair-elect, and Dr. Bird, ADPAC chair, regarding the importance of advocacy and ADPAC. Ms. Sonnenberg discussed the role the Alliance plays in supporting its membership in every stage of life, including members who have lost their dentist partners. The Alliance will hold their 2018 Convention on October 18-20 in Honolulu in conjunction with ADA 2018: America's Dental Meeting and will continue their service project.

**Report of the Council on Advocacy for Access and Prevention (CAAP)**

Dr. Fagan provided the Council with an update on CAAP's Council meeting which was held July 26-28 and addressed the collaborative relationship CAAP has with CGA.

Dr. Fagan addressed a number of topics CAAP is focused on including introduction and/or support of these resolutions at ADA 2018 in October: encouraging state dental associations to work with their state Medicaid agency to create dental peer review committees; encourage HPV immunizations; creation of a workgroup to do a comprehensive safety review in dentistry and report back to the 2019 HOD; and support of CDBP's Medicare resolution. During the July meeting CAAP approved a directive to direct the Division of Government and Public Affairs to report to CAAP on all possible new and existing dental care programs for older adults by January 2019.

**Report of the New Dentist Committee**

Dr. Nguyen provided an overview of the New Dentist Committee meeting in July. During the event, the NDC addressed engaging and retaining new members and approved a new success module on organized dentistry; filling the leadership pipeline; the changes to the Federal Dental Services consultants and the NDC; and efforts to help pregnant dentists succeed.

**Report of the American Student Dentist Association**

Dr. Lantz provided an update on ASDA activities. ASDA is working to engage students to demonstrate the benefit of organized dentistry. Advocacy Month will be in November; ASDA will utilize social media, email and webinars to promote these efforts. ASDA has over 90 percent of the membership of dental students. ASDA rolled out a new strategic plan in February and has developed provisions to identify and develop new leaders.

**Report on the 2018 ADA Dentist and Student Lobby Day and Election Update**

Ms. Milligan and Mr. Aiello provided an overview of the 2018 ADA Dentist and Student Lobby Day. The meeting is a joint venture between ADPAC, CGA and ASDA and the results and reviews from this year's meeting have been very positive. 2018 was the second year the event has been a joint venture and there were over 1,100 attendees between dentists and dental students. 49 out of 50 states were represented, missing only representatives from Alaska. To prepare for the meeting, staff hosted issue review pre-calls,

online ads, created a Lobby Day app and communicated information with state associations. ADA Student and Lobby Day 2019 is scheduled for April 14-16 and will be hosted at the Washington Hilton.

Ms. Milligan and Mr. Aiello provided an election update in advance of the November mid-term elections. Dentist members up for re-election include: Representatives Mike Simpson (R-ID), Paul Gosar (R-AZ), Brian Babin (R-TX) and Drew Ferguson (R-GA). Dr. Jeff Van Drew (D-NJ) won his primary and continues to work on gaining support. All 435 House seats are up and 34 seats are up in the Senate.

### **ADA 2018: America's Dental Meeting**

Dr. Harrison stated that the Diamond Club reception will take place during the meeting on Sunday evening and CGA is interested in hosting a casual gathering. Reference Committee D is scheduled for noon on Saturday, October 20 at the Hilton Hawaiian Village.

### **New Business: New Dentist Committee Term of Service Resolution**

The Council discussed the following request from the Council on Dental Practice:

**Resolved**, that the following be amended for placement into the Governance and Organizational Manual of the American Dental Association under Chapter VIII, Councils as follows (additions are underscored; deletions are ~~stricken~~).

2. Term and Tenure. The term of service for new dentist members recommended by the New Dentist Committee and nominated by the Board of Trustees elected to serve on councils shall be ~~one (1)~~ two (2) years; however, such members shall be limited to two (2) two-year ~~terms four (4) one (1) year~~ terms of council service during the period that they are characterized as new dentists.

Dr. Nguyen provided an overview of current policy. As the rules currently exist, New Dentist Committee (NDC) members can serve (4) consecutive one-year terms and they just recently obtained voting rights. The NDC would like to have additional time to experience the full effect of the recent rule change, which provides volunteers with flexibility. Dr. Nguyen noted that the NDC did not support the proposed changes.

The Council voted not to support the **Resolution**.

### **2018-2019 CGA Chair and Vice Chair Candidate Forum:**

Chair: Dr. Craig Armstrong, running unopposed was nominated to serve as Chair.  
Dr. Phil Fijal was elected to serve as Vice Chair.

### **Presentation from the Executive Director**

Dr. Kathleen O'Loughlin, ADA executive director, provided an update to the Council on the state of affairs of the Association and discussed the complexity of the tripartite structure and efforts the Association engages in to provide personalization in membership. She addressed the ADA's current goals: increase member value and engagement; financial sustainability; and capacity building within the tripartite. Dr. O'Loughlin provided the Council with an update on the Business Model Project. Currently, Wisconsin, Arizona and a third state (TBD) will participate in the pilot program.

Dr. O'Loughlin provided the Council with an update on membership across the Association, including within the tripartite; the CVS partnership; the Find-a-Dentist campaign; and efforts to increase services within the ADA's client services division to provide support to state and local dental societies.

### **Medicare Discussion and Report from the Oral Health America Symposium**

The ADA Board of Directors met on August 12-14<sup>th</sup> in Chicago, and reviewed the Dental Benefit in Medicare Resolution, as presented by the Council on Dental Benefit Programs. Dr. O'Loughlin, Dr. Preble and Dr. Asai provided the Council with an update on the Board's activities on the issue and shared that the Board is recommending referral of the resolution. The Council was supportive of the referral and additional time for the Association to address the issue.

Drs. Bishop and White provided the Council with a summary and their perspectives on attending the Oral Health America (OHA) 2018 Symposium. The Council discussed the OHA grassroots campaign; the state of affairs of entitlement programs; payment and coding for a dental benefit in Medicare; the potential scope of a benefit; government intervention and availability of federal appropriations; and the reputational risk for the ADA.

The Council also received an update on efforts to request that the Centers for Medicare and Medicaid Services (CMS) consider utilizing its administrative authority to provide Medicare coverage for medically necessary oral/dental health therapies. The ADA added its name to a community statement in April 2017 in accordance with existing ADA policy (Elimination of Disparities in Coverage for Dental Procedures Provided Under Medicare). The number of organizations participating in the community statement has grown to 80. The ADA supported a bipartisan and bicameral Congressional letter to the Secretary of Health and Human Services and the CMS Administrator encouraging the use of existing statutory authority for Medicare coverage for beneficiaries requiring medically necessary oral and dental care.

At the conclusion of the discussion, Dr. Graham stated that as part of the policy review process, a working group will be appointed to review existing Medicare and other health care policies assigned to the Council.

### **Sugar Sweetened Beverage Taxes**

Dr. Terlet provided an overview California's recent experience with sugar-sweetened beverage taxes. The city of Berkeley engaged in a grassroots initiative in November 2014. Berkeley became the first city in the United States to pass a sugar-sweetened beverage (SSB) tax and it has expanded to four additional cities. As a result, sales of taxed drinks fell; sales of non-taxed healthier drink options, such as water, increased; and overall beverage sales in Berkeley increased. Mr. Burns provided context for the ADA's historical response to calls for taxing sugar-sweetened beverages and prohibiting certain groups from purchasing them.

**Special Guest:** Rear Admiral Nicholas S. Makrides, D.M.D., M.A., M.P.H., Chief Dental Officer, U.S. Public Health Service is retiring this year and joined the meeting for lunch. Dr. Graham presented Dr. Makrides with an ADA Presidential Citation from Dr. Joseph Crowley to thank him for his service.

### **Congressional Affairs Update**

Mr. Tampo, Ms. Mortimer and Ms. Hales provided an update on legislative activities, highlighting ADA successes including the Action for Dental Health Act, which passed out of the Senate Health, Education, Labor and Pensions Committee. ADA priorities include moving the McCarran-Ferguson legislation in the Senate; achieving a full Senate vote on the ADH legislation; increasing support for Non-Covered Services legislation; easing the credentialing process for volunteer dentists in the Indian Health Service; repealing the medical device tax; and expanding dental benefit options through the use of Flexible Savings Accounts and Health Savings Accounts, among other issues.

### **CGA Representatives on ADA Workgroups, Committees and Subcommittees**

Dr. Graham and Dr. Bishop provided an update on the Dental Quality Alliance. The DQA addressed governance issues and membership during its last meeting. The DQA continues to work on pediatric measures and working with state Medicaid agencies on adopting certain measures, including the sealant measure.

### **Dental Benefits: Assignment of Benefits, Coordination of Benefits**

Dr. Fijal, Mr. Olson and Mr. O'Connor led a discussion focused on current state level activity addressing dental benefits legislation, including assignment of benefits and non-covered services. The Council discussed ways to address the issues, at the state and federal level, and necessary resources to move legislative efforts forward.

**Resolved,** that staff be directed to explore the feasibility of conducting a research project on ERISA reform to address assignment of benefits.



The Council adopted the resolution.

### **State Public Affairs Oversight Workgroup Update**

Mr. Olson and Mr. O'Connor provided the Council with an update on the State Public Affairs Oversight Workgroup. The update included a review of state-level workforce activity; third-party payer issues; Medicaid and tribal issues; and an overview of the ongoing survey to certain states on their work with state legislators.

### **Federal Limits on Opioid Prescribing**

Dr. Armstrong stated that the interim opioid policy, initiated during the March meeting and adopted as interim policy by the Board, will be addressed during the House of Delegates. Ms. Merullo noted that the media coverage was excellent, with 300+ news stories and 500+ million impressions on the ADA's efforts. Ms. Hales noted that there are a number of pieces of legislation, and 44 hearings have been conducted on this topic. Congress is expected to pass a large legislative package before the end of the year focused on opioids.

### **ADA Master Brand & Vision Presentation**

Ms. Von Lehmden, senior director, Integrated Marketing Communications, presented the new Master Plan and Vision statement to the Council via webinar. She described the ADA's role as the crucial connector between the profession and the public. The Council discussed why the new master brand and vision was necessary; its role in external partnerships; and how volunteers can communicate the brand and vision in district.

### **Action for Dental Health Update**

Dr. Grover provided the Council with an update on Action for Dental Health activities. Priority areas include: Community Water Fluoridation; ED referral and outreach with external stakeholders; expansion and promotion of the CDHC program, currently 18 schools offer the program and there have been 275 graduates; promotion of ADH strategies; and providing Medicaid "boot camps" to providers in the states. Ms. Merullo provides an update on communications activities focused on ADH.

### **Higher Education Policy and Legislation**

Ms. Mortimer led a discussion on existing ADA policy focused on student debt and higher education. She provided an overview of current legislation and the potential need for the Council to address new legislation in early 2019 once the new Congress begins. Dr. Nguyen stated that student loan debt is a concern for many new dentists. Mr. Burns stated that a number of existing education policies will be reviewed over the next year as part of the review process.

**Report of the American Dental Political Action Committee** Dr. Harrison thanked Dr. Graham for attending the July ADPAC Board Meeting. Dr. Harrison stated that the giving cycle year follows a July 30-June 1 calendar. The Diamond Club level is \$1,000 and the Double Diamond is \$2,000. Dr. Harrison thanked the Council for its engagement with ADPAC and stressed the important role ADPAC has in advancing the ADA's brand and priorities.

The Council on Government Affairs meeting was **adjourned** at 4:20 PM, ET on Friday, August 17, 2018

**Council on Government Affairs (CGA)  
Unofficial Report of Major Actions  
August 16-17, 2018**

The Council on Government Affairs met August 16-17, 2018 in the Washington D.C. office. The following is a summary of major actions taken by the Council.

1. The Council reviewed and considered the resolution transmitted from the Council on Dental Practice on the term change for the New Dentist Committee. Upon vote, the Council defeated the motion.
1. The Council elected the 2018-2019 Chair and Vice Chair. Dr. Craig Armstrong was elected to serve as the Chair and Dr. Philip Fijal was nominated to serve as the Vice Chair.
2. Dr. Frank Graham, chair, presented Rear Admiral Nicholas S. Makrides, D.M.D., M.A., M.P.H., Chief Dental Officer, U.S. Public Health Service, with an ADA Presidential Citation from Dr. Joseph Crowley to thank him for his service. Rear Admiral Makrides will retire August 31 from the U.S. Public Health Service and the Bureau of Prisons.
3. The Council received an update from Dr. Kathleen O'Loughlin, executive director, on the strategic plan and the business model project. She requested that the Council consider short and long-term impact on the profession and act strategically when conducting Council business.
4. The Council discussed the issue of a dental benefit in Medicare. The Council, through a workgroup, will review all Medicare policies assigned to the Council on Government Affairs as part of the policy review process and provide recommendations at the February 2019 meeting.
5. The Council received an update on state and federal activity to address the opioid issue. The Council's action in March 2018 allowed the BOT to consider and adopt interim policy on opioid prescribing. The ADA interim policy was shared with federal agency officials and members of Congress to advocate for guidelines to address opioid prescribing for acute dental pain.
6. The Council received an update on the ADA Master Brand and Vision from Ms. Pamela Von Lehmden, senior director, Integrated Marketing and Communications. Ms. Von Lehmden encouraged the Council to utilize the vision statement in both Council actions and in district.
7. The Council discussed dental benefits legislative activity at the Federal and state level. The Council adopted a motion directing staff to explore the feasibility of conducting a research project on ERISA reform to address Assignment of Benefits.
8. The Council received an update on ADA Washington D.C. branding and the Stanton Park property on the Senate side from Michael Graham, senior vice president of Government and Public Affairs. The Council toured the property Friday evening.

**CGA Council Members:**

Dr. Frank Graham, Chair, NJ  
Dr. Craig Armstrong, Vice-Chair, TX  
Dr. Jeanne Beauchamp, TN  
Dr. Deborah Bishop, AL  
Dr. Daniel Cheek, NC

Dr. Mark Desrosiers, CT  
Dr. Philip Fijal, IL  
Dr. Marty Garrett, LA  
Dr. Rhonda Hennessey, MI  
Dr. Zacharias Kalarickal, FL  
Dr. Lauro Medrano-Saldano, NY  
Dr. Matthew Messina, OH  
Dr. Dave Minahan, WA  
Dr. Robin Nguyen, FL, New Dentist Committee  
Dr. David Reitz, PA  
Dr. Ariane Terlet, CA  
Dr. David White, NV  
Dr. Emily Willett, NE

**Liaisons:**

Dr. Rickland Asai, Trustee-Liaison, Eleventh Trustee District, OR  
Dr. Thomas Harrison, chair-elect, American Dental Political Action Committee, FL  
Dr. Timothy Fagan, chair, Council on Advocacy for Access and Prevention  
Ms. Janette Sonnenberg, Alliance of the American Dental Association, UT  
Dr. Kyle Lantz, American Student Dental Association

**The Council will meet February 7-9, 2019 in Washington, DC.**