# 2018 House of Delegates Addendum



#### 2016-2018 STRATEGIC PLAN

# Goal 1–Education: Become the most valued resource of quality dental continuing education for general dentists at all stages of their career.

**Strategy 1:** Create a Scientific Session that will annually attract at least 5 percent of AGD members by the end of 2018.

**Strategy 2:** Facilitate education programs that promote members' success and advancement through all stages of their dental career using traditional as well as innovative, cutting-edge methods.

**Strategy 3:** Partner with AGD constituents in the development and delivery of continuing education programs.

**Strategy 4:** Protect PACE and increase the number of PACE providers.

## Goal 2-Advocacy: Strengthen and protect the general dentistry profession and the oral health of the public.

**Strategy 1:** Represent the unique interests of general dentists in all advocacy arenas.

**Strategy 2:** Advocate on behalf of the general dentistry profession as it relates to policymaking, insurance, licensing, education, and all levels of government.

**Strategy 3:** Advocate on behalf of the public to ensure safe, best quality dentistry practices and appropriate access to care.

**Strategy 4:** Develop strong working relationships where appropriate with the AGD constituents, the ADA, and dental specialty organizations in addressing issues of common interest.

**Strategy 5:** Pursue instruments and resources to empower the AGD's advocacy agenda.

#### Goal 3–Membership: Increase the number of full-duesequivalent members to 27,000 and retain the existing marketshare of United States members by the end of 2018; whereby the 'existing marketshare' was the marketshare as of December 31, 2015.

**Strategy 1:** Utilize market and member research to determine which current and new member benefits will best serve the AGD in attracting and retaining members.

**Strategy 2:** Provide and promote products and services that meet the current and future needs of members and prospective members in all stages of practice and career paths.

**Strategy 3:** Retain at least 50 percent of new graduate members through 2018.

**Strategy 4:** Actively recruit dental student members and retain them when they become practicing dentists.

**Strategy 5:** Attract nonmember general dentists by promoting the value of a lifelong learning mindset.

# Goal 4—Communications: Promote the AGD as an organization dedicated to advancing general dentistry through quality continuing education and advocacy.

**Strategy 1:** Position the AGD as the leading source of information on oral health issues for general dentistry.

**Strategy 2:** Create and promote a consistent AGD brand that is applied to all marketing vehicles and collateral materials.

**Strategy 3:** Increase public awareness of the value AGD general dentists bring as gatekeepers to oral health.

**Strategy 4:** Focus communication efforts on engaging members to advocate on behalf of general dentistry.

**Strategy 5:** Enhance AGD publications and digital-based communication vehicles to effectively communicate to all AGD stakeholders.

# Goal 5—Organizational Excellence: Ensure that the AGD is financially viable, functions efficiently in a cost-effective manner, and has a mutually supportive relationship with its constituents.

Strategy 1: Ensure the fiscal soundness of the AGD.

**Strategy 2:** Improve the effectiveness and efficiency of AGD Headquarters operations.

**Strategy 3:** Streamline the AGD governance structure and operations.

**Strategy 4:** Promote an organizational culture that best supports attainment of strategic goals and a healthy operating environment.

**Strategy 5:** Ensure the success of constituents in meeting the needs of grassroots members.

#### Mission Statement

Advancing general dentistry and oral health through quality continuing education and advocacy

#### **Vision Statement**

Oral health and better lives through the Academy of General Dentistry



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#### **Schedule of Events**

(As of October 11, 2018)

Please see the full meeting schedule in your Onsite Program for all events and more detailed descriptions. All times and locations are subject to change. All rooms are located in McCormick Place unless otherwise noted.

<del>5</del> an	Start Time	End Time	Event			
Wednesday, 10/31/18	1:00 p.m.	6:00 p.m.	Constituent Leader Resource Workshop – Hyatt Conference Center Adler			
Thursday 11/1/18	8:00 a.m.	5:00 p.m.	Regional Directors Meeting (By Invitation) – S103BC			
	10:00 a.m.	5:00 p.m.	AGD Foundat	ion Meeting	(By Invitation, Offsite)	
	1:00 p.m.	5:00 p.m.	Spokesperson	Training (By	Invitation, Offsite)	
	3:00 p.m.	7:00 p.m.	Attendee Regi	istration Desl	k – Grand Ballroom S100AB	
	4:00 p.m.	6:00 p.m.			Committee Meeting (By Invitate	ion) S101B
Friday 11/2/18	7:00 a.m.	10:30 a.m.			k – Grand Ballroom S100AB	,
	8:00 a.m.	10:30 a.m.	House of Dele	gates First S	ession & Awards Ceremony –	Grand Ballroom S100AB
	11:00 a.m.	12:00 p.m.	Candidates Fo	_		
	12:00 p.m.	1:00 p.m.			ch (By Invitation) S106A	
	12:00 p.m.	1:00 p.m.			nch (By Invitation) S106B	
	1:00 p.m.	2:30 p.m.			Advocacy & Other Priorities –	S102BCD
	2:30 p.m.	4:00 p.m.			Administration, Image & Memb	
	4:00 p.m.	5:30 p.m.			Continuing Education – S102B	
	5:30 p.m.	7:00 p.m.			rand Ballroom S100C	<u> </u>
Saturday 11/3/18	8:00 a.m.	10:00 a.m.	Town Hall Me	•		
			Start time 11:00 AM	End time 3:00 PM	Official Function Name Region 1 Caucus	Room S405A
			10:15 AM	1:30 PM	Region 2 Caucus	S403A
			10:15 PM	1:00 PM	Region 3 Caucus	S401D
			10:15 AM	2:00 PM	Region 4 Caucus	S403B
			10:15 AM	4:00 PM	Region 5 caucus	S105D
			10:15 AM	4:00 PM	Region 6 Caucus	S105BC
			10:15 AM	1:00 PM	Lionel French Region 7 Caucus	S401A
			10:15 AM	4:00 PM	Region 8 Caucus	S106B
			10:15 AM	1:00 PM	Region 9 Caucus	S402A
	10:15 a.m.	4:00 p.m.	10:15 AM	3:00 PM	Region 10 Caucus	S404D
		P	10:15 AM	4:00 PM	Region 11 Caucus	S104A
			10:15 AM	2:30 PM		S404A
			10:15 AM	4:00 PM	Region 13 Caucus	S405B
			10:15 AM	2:30 PM	Region 14 Caucus	S404BC
			10:15 AM	1:15 PM	Region 15-16 Caucus	S402B
			10:15 AM	4:00 PM	Region 17 Caucus	S104B
			10:15 AM	1:00 PM	Region 18 Caucus	S401BC
			10:15 AM	4:00 PM	Region 19 Caucus	S103D
			10:30 AM	4:00 PM	Region 20 Caucus	S106A
			10:15 AM	4:00 PM	Caucus Support	S103A
	6:00 p.m.	TBD		eception – (R	egistration Required) Revel Me	
Sunday 11/4/18	7:00 a.m.	8:00 a.m.	a.m. Election – Grand Ballroom S100AB			
		House of Dele	use of Delegates Second Session – Grand Ballroom S100AB			
	12:00 p.m.	1:00 p.m.	HOD Lunch E	Break – On O	wn	
	12:00 p.m.	1:00 p.m.	Board Lunch	(current and i	incoming Trustees) – S103D	
	1:00 p.m.	End	House of Delegates Third Session (If necessary) – Grand Ballroom S100AB			
6	45 minutes p	ost HOD	Board Meeting – S103BC			

### **2018 Resolution Index Summary**

Bryan C. Edgar, DDS, MAGD, AGD Speaker of the House; Michael W. Lew, DMD, MAGD, AGD Secretary; and Jennifer Goler, Associate Director, Governance, Governance

Resolution #	Brief Description	Ref. Comm.
		Assignment
101	Adopt the 2019-2021 AGD Strategic Plan	Admin/Image/Mem
		2:30 – 4:00 pm
<u>102</u>	Region II Dental Student Subsidy Resolution For the	Admin/Image/Mem
	2018 Governance Meeting	2:30 – 4:00 pm
<u>103</u>	AGD Financial Support of AGD Student Chapters	Admin/Image/Mem
		2:30 – 4:00 pm
<u>104</u>	AGD Membership Dues Waiver for AGD Student	Admin/Image/Mem
	Chapter Faculty Advisors/Leaders	2:30 – 4:00 pm
150	Approve 2019 Budget	Admin/Image/Mem
		2:30 – 4:00 pm
201	Amend HOD Policy 2015:309-H-6	Continuing Education
		4:00– 5:30 pm
202	Lifelong Learning and Service Recognition Guideline	Continuing Education
	Changes Recognition to Award	4:00– 5:30 pm
203	Lifelong Learning and Service Recognition Guideline	Continuing Education
	Changes Limitation to One Recognition	4:00– 5:30 pm
204	Scientific Session Registration Cancellation Policy	Continuing Education
	2014:105R-H-6 Amendment	4:00– 5:30 pm
205	Amend the Names of the Exam Committees in the	Continuing Education
	BPM, HOD Policy Manual and Constitution and	4:00– 5:30 pm
	Bylaws	
301	Create Electronic Information Reception Policy	Advocacy/Other
		Priorities
202	D 1 1110D D 11 00 00 115 11 11 G D 6	1:00 – 2:30 pm
302	Rescind HOD Policy 93:28 H 7 Health Care Reform	Advocacy/Other
	Criteria	Priorities
202	A IDI CD I HODD C	1:00 – 2:30 pm
303	Amend Rules of Procedure HOD Reference Committee	Advocacy/Other
	Timing	Priorities
20.4		1:00 – 2:30 pm
304	Amend Election Guidelines & Bylaws to Eliminate	Advocacy/Other
	Early Declaration of Candidacy by EC Officers	Priorities
205	A 1D1 ( D C) ( A () '( CD ') ( E) (	1:00 – 2:30 pm
305	Amend Bylaws to Reflect Authority of President-Elect	Advocacy/Other
	to Make Council and Committee Appointments	Priorities
207	Adam Dallas Davidana an Davida	1:00 – 2:30 pm
<u>306</u>	Adopt Policy Positions on Dental Benefits for the	Advocacy/Other
	Medicare Population	Priorities
		1:00 – 2:30 pm



## Reports to be reviewed by the

# Reference Committee on

# **Advocacy & Other Priorities**

Friday, November 2, 2018

1:00 p.m.

Room S102BCD – McCormick Place Convention Center

Dr. Narpat Jain, Chair	New Jersey 15
Dr. Jennifer Bone	Texas 16
Dr. Gordon Isbell, IV	Alabama 17
Dr. Michael Kaner	Pennsylvania 18
Dr. Tyler Scott	Ohio 19
Dr. Joseph Battaglia, Consultant	New Jersey 20
Dr. Steven Ghareeb, Consultant	West Virginia 22
Dr. Guy Acheson, Board Monitor	California 22 23
Dr. K. David Stillwell, Board Monitor	Arkansas

The Full AIRs for the following resolutions can be found in the 2018 HOD Manual.

#### **Resolution 301**

"Resolved, that all AGD leaders must receive all electronic communications emanating from AGD, and that opting-out of receiving such electronic communications shall be construed as immediate resignation from all applicable leadership positions, and be it further,

Resolved, that all AGD leaders be required to receive all materials for all AGD agencies via electronic means, and that staff be prohibited from making paper copies of such materials

2 President or Executive Director." 3 4 **Resolution 302** 5 6 "Resolved, that AGD HOD policy 93:28-H-7 be rescinded: 7 8 93:28 H 7 9 "Resolved, that it is the policy of the Academy of General Dentistry that if dentistry is to be 10 included in any government health care program reform, it must: 11 12 Be adequately funded to provide broad access: 2) Permit freedom of choice of dentists; 13 3) Be based on fee for service; and 14 4) Assure high quality dental care. 15 16 17 and be it further 18 19 Resolved, in any case where dentistry is included in health care reform, the AGD support 20 the following six recommendations set forth by the American Dental Association: 21 22 Maintain the advantages of the current dental care and dental benefits system, 23 which would not require inclusion of dental benefits for population groups currently 24 receiving regular dental care, and which would not require public sector participation and 25 subsequent cost transfer. The Association strongly opposes any change in the tax 26 deductibility of current dental benefit coverage. 27 28 Continue existing policy support for a separate, restructured program of publicly 29 funded dental benefits for indigent persons. Priority consideration should be given to 30 programs for children. The Association urges that these programs be administered in the 31 private sector wherever possible. 32 33 For population groups currently not receiving regular dental care the Association 34 supports the opportunity for a) small employers purchase dental plans in the private sector, b) development of cooperative dental benefit purchasing alliances administered in 35 36 the private sector. 37 The Association recommends that preventive services and educational programs for 38 39 children be included in any health system reform proposal. Preventive services may 40 include but are not necessarily limited to, fluoridation of community water supplies, oral prophylaxis and application of topical fluorides and sealants; dietary fluoride supplements; 41 42 restoration of carious teeth; maintenance of space resulting from the early loss of primary 43 teeth and patient education. 44 45 The Association recommends that in the event that a more comprehensive program 46 is enacted, preventive, diagnostic, emergency services and basic restorative and periodontal care be included for children and the elderly. 47

and transmitting such copies to any AGD leader, unless otherwise authorized by the

6. The Association believes that if the Medicare program is expanded to include coverage for additional dental health care services, we would endorse the inclusion of a defined dental benefit plan for the elderly population. These services would be expressly focused on those elderly who are in long term residential care or home bound. Delivery of these services should not be compromised by discrimination by category of provider (physician or dentist)."

#### **Resolution 303**

"Resolved, that the Rules of Procedure for Conducting The Reference Committee Hearings and Business of the Academy of General Dentistry's House of Delegates be amended at paragraph 5 (e), so that they read:

All <u>Each</u> Reference Committees must remain in session for a minimum of 90 minutes or until there are no all attendees at the microphones have left the room so that delegates have the opportunity to present their views before all each of the Reference Committees."

#### **Resolution 304**

"Resolved, that the Election Guidelines be amended, at Paragraph VIII (e), so that they read:

A candidate will formally declare his or her candidacy for the coming year's election to constituent officers, Regional Directors, members of the Board and council and committee chairs not earlier than the latter of the commencement of the AGD Board meeting III or January 1st of the year in which the election is held. Notwithstanding this section, all AGD officers are primarily subject to the provisions of the AGD Bylaws, Chapter IX, Section 1(B)4, which states "An AGD officer must declare for a new office within the thirty (30) days prior to Board Meeting III, and resign his or her current office effective at the close of the annual meeting pursuant Chapter IX, Section 1, paragraph D. Once an AGD officer declares for a new office, said resignation is irrevocable." Such notice may contain biographical and issue oriented information on his or her candidacy. A candidate shall not announce or circulate petitions for signatures at the preceding annual meeting. Nothing in these guidelines, including the filing deadline for other candidates, shall prohibit a candidate who makes a valid declaration of candidacy from campaigning, subject to all provisions of these guidelines.

And be it further,

Resolved, that the Bylaws be amended at Chapter IX B (4), so that they read

An AGD officer must declare for a new office at least within the thirty (30) days before prior to Board Meeting III, and resign his or her current office effective at the close of the annual meeting, pursuant Chapter IX, Section 1, paragraph D. Once an AGD officer declares for a new office, said resignation is irrevocable."

#### **Resolution 305** 1 2 3 "Resolved, that the Bylaws be amended at Chapter IX, Section 2 A 8 so that the entire 4 sequence is stricken, so that it reads: 5 6 8. To appoint, subject to the final approval of the Board, members to serve on the AGD 7 councils and committees that are listed in Chapter XIII, Sections 2 and 3 of these Bylaws, 8 subject to the following stipulations: 9 10 To have the authority with regard to AGD councils to appoint only to those positions which have an expiration date at the annual meeting at which the president 11 assumes that office. 12 13 14 Council and committee appointments, that are listed in Chapter XIII, Sections 2 and 3 of 15 these Bylaws, are subject to approval by the Board. The Board may reject specific appointments made by the president-elect until such time as the president-elect provides 16 17 the Board with a suitable selection. 18 19 And be it further, 20 21 Resolved, that the Bylaws be amended at Chapter IX, Section 2 B, by the addition of a new 22 paragraph 9, so that it reads: 23 24 9. To appoint, subject to the final approval of the Board, members to serve on the AGD councils and committees that are listed in Chapter XIII, Sections 2 and 3 of these Bylaws, 25 26 subject to the following stipulations: 27 28 To have the authority with regard to AGD councils to appoint only to those 29 positions which have an expiration date at the annual meeting at which the president 30 assumes that office. 31 32 Council and committee appointments, that are listed in Chapter XIII, Sections 2 and 3 of these Bylaws, are subject to approval by the Board. The Board may reject specific 33 34 appointments made by the president-elect until such time as the president-elect provides 35 the Board with a suitable selection." 36 37 **Resolution 306** 38 39 "Resolved, that the AGD's positions on dental benefits for the Medicare population are as 40 follows: 41 42 1. General dentists are committed to delivering quality dental care to patients of all ages 43 and to advocating for optimal oral health. 44 45 2. The AGD believes that the Medicare Part B program is fiscally unsustainable and

cannot support the inclusion of dental benefits.

- 3. The AGD suggests enhanced benefits and reimbursement in private sector initiatives for dental benefits.
- 4. The AGD believes that it is the responsibility of every person to exercise good oral health habits that will provide them with a foundation for optimal oral and systemic health throughout their lifetime, and that resources directed toward increasing oral health literacy will support this effort."

#### **Resolution 306** "Resolved, that the AGD's positions on dental benefits for the Medicare population are as follows: 1. General dentists are committed to delivering quality dental care to patients of all ages and to advocating for optimal oral health. 2. The AGD believes that the Medicare Part B program is fiscally unsustainable and cannot support the inclusion of dental benefits. 3. The AGD suggests enhanced benefits and reimbursement in private sector initiatives for dental benefits. 4. The AGD believes that it is the responsibility of every person to exercise good oral health habits that will provide them with a foundation for optimal oral and systemic health throughout their lifetime, and that resources directed toward increasing oral health literacy will support this effort." AIRBIII2018#01 - Adopt Policy Positions on Dental Benefits for the Medicare Population **Prepared by:** Jeanie Kennedy, Manager, Dental Practice & Policy Date of Report: May 23, 2018 **Staff Resources:** \$50 (Approx. 1 hour of staff time to draft the AIR) **Total Financial Cost:** \$50 in staff resources (no direct costs) **Budget Ramifications:** None Action/Timeline: Record vote at 2017-2018 Board Meeting III, for forwarding to the 2018 AGD HOD. At 2017-2018 Board Meeting III the Board adopted an amended version of the resolution but

upon request of the councils for the Board to have adopted the resolution as originally presented notwithstanding one editorial correction, the Board then adopted the resolution as requested by the councils at the July 24 Zoom.

#### **BOARD RECOMMENDS ADOPTION AIRBIII2018#01**

Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gehrig, Gorman, Guter, Hanson, Harunani, King, Olsen, Smith, Stillwell, Tillman, Uppal, White, Wooden

N-Kozelka, Shelly

a - Gajjar, Lew, Low, Winland, Worm

1 2 *N/A - Cordero* 3 4 BOARD RECOMMENDS ADOPTION IX. AIR - Amendment to Board Action on 5 Medicare 6 7 Y-Drumm, Dubowsky, Edgar, Gehrig, Gorman, Guter, Hanson, King, Lew, Olsen, Shelly, 8 Smith, Tillman, Uppal, White, Worm 9 10 N- Kozelka 11 12 A – Acheson, Cheney, Gajjar, Harunani, Low 13 14 a - Dyzenhaus, Stillwell, Winland, Wooden 15 16 *N/A* – *Cordero* 17 18 **How It Fits into the Strategic Plan (2016-18):** 19 20 Goal 2 – Advocacy: Strengthen and protect the general dentistry profession and the oral health of 21 the public. 22 Strategy 1: Represent the unique interests of general dentists in all advocacy arenas. 23 Strategy 2: Advocate on behalf of the general dentistry profession as it relates to policy making, 24 insurance, licensing, education, and all levels of government. 25 26 How it Fits into the Corporate Objectives: 27 28 Corporate Objective #10 (Advocacy B): Ensuring that AGD HOD policies are current and 29

appropriate is a prerequisite to enable representing policies of the AGD before CODA, the ADA, and state and federal regulatory bodies.

#### **Introduction:**

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In January 2018, at the request of the Legislative & Governmental Affairs (LGA) Chair, the Dental Practice Council discussed development of an AGD policy paper on addressing dental benefits for the Medicare-eligible population.

Specifically, the Council discussed three options: dentistry as a part of Medicare; dental benefits through private payers under Medicare Advantage supplemental plans; and the free market. Members of the Council opposed dentistry as part of Medicare, and favored improved reimbursement rates for private solutions.

The Council assigned Dental Practice & Policy staff with the task of developing a policy paper on the issue.

Accordingly, the Manager, Dental Practice & Policy, crafted a confidential draft policy paper, entitled AGD Position Statement on Dental Benefits for the Medicare Population, and presented the paper to the Dental Practice Council and LGA Council via AGD Connect prior to the May meeting, as well as at the May council meetings, for review, discussion, and recommendation for adoption.

1 2

The Councils applauded the research and work put into the paper. While the Councils noted the need for further ongoing refinement of the background content of the position paper, they found the conclusive policy positions at the end of the paper to be suitable for immediate adoption, with some amendment. All but three members of the Councils, collectively, voted affirmatively in support of these amended policy positions.

The present AIR requests adoption of these four amended policy positions, in an effort to have AGD provisional policies on the matter ASAP, especially in light of ongoing advocacy efforts of councils of the American Dental Association and other organizations on this issue.

It is the intent of the AGD Dental Practice and LGA Councils that the entire policy paper, inclusive of these four policy positions, will be presented to the 2017-2018 Board Meeting IV for adoption, to include and supercede the policy positions adopted at 2017-2018 Board Meeting III.

#### **Necessary Information:**

- Note: Members of the DP & LGA Councils believed that the language in policy position #2 as amended by the Board at 2017-18 Board Meeting III could have positioned the AGD as an unsophisticated consumer of federal health care information and data. Some members of the councils believed that the AGD would have damage its reputation as a credible organization if the Board-approved policy position #2 were to have been presented in the public domain. Specifically, the members of the DP & LGA Councils believed that it would have been perilous territory to open the door to enable the federal government to impose new taxes to support dental benefits for the Medicare population. Council members believed that the AGD should not be party to proposals or language that would increase taxes on American citizens. Previous AGD House of Delegates tax positions are in favor of tax credits, tax incentives, tax deductions, and tax reform, not tax increases. Accordingly, the councils brought the policy position #2 back to the Board with the request that the Board undo its amendments and accept the policy position as originally presented at Board Meeting III, notwithstanding an editorial edit.
- Dr. Steven Ghareeb, Chair, Dental Practice Council, has provided input into this report.
- Dr. Joseph Battaglia, Chair, LGA Council, has provided input into this report.
- At their 2018 House of Delegates meeting, the American Dental Association (ADA) delegates are expected to vote on a policy statement advocating for the inclusion of dental benefits into Medicare Part B.
- The ADA is purported to have hired a federal lobbyist for the express purpose of acquiring support for legislation to include dental benefits into Medicare Part B.
- The AGD intends to take a different position with respect to Medicare than the ADA, specifically that the Medicare Part B program cannot support the inclusion of dental benefits.
- Editing of the background sections of the full policy paper (*AGD Position Statement on Dental Benefits for the Medicare Population*) is ongoing and expected to be completed for submission to the Board in July 2018 for approval at the 2017-2018 Board Meeting IV in August.

#### What We Don't Know:

• Staff is investigating other policies in the HOD Policy Manual that will be inconsistent with the new AGD policy clauses. In an effort to have clear and concise positions that are effective for AGD's legislative and communication purposes, staff and the Council(s) may request rescission of some existing HOD policies upon submission of the full policy paper for the 2017-2018 Board Meeting IV.

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#### **Pros and Cons:**

#### Pros:

- Adoption of the content of the four policy clauses as AGD HOD policy would cement its
  principles as the formal position of the AGD for use in legislative, regulatory, and public
  relations efforts.
- Adoption of the content of the 4 policy clauses in June will enable the AGD to hold them out to legislators and other organizations as the AGD's 'provisional' policy, without having to wait until further deliberation of the councils on the background of the full policy paper for adoption at 2017-2018 Board Meeting IV.

#### Cons:

• Adoption of the content of the 4 policy clauses may not find 100% agreement within the AGD membership, as noted by the three negative votes within the representation of the Dental Practice and LGA Councils.

#### **Executive Director/CEO Recommendations:**

#### **How It Fits into the Market Research:**

The Custom Study of Academy of General Dentistry (AGD) Members: Membership Benefits Survey (September 2012) (i.e., the Market Research) focused on member-facing programs. While the present request does not fit neatly into the measurement targets of the Market Research, the present request is ultimately expected to strengthen our advocacy efforts. State Advocacy and Federal Advocacy were generally rated as high value, moderate satisfaction in the Market Research.

# Does this conflict with the Constitution and Bylaws, an AGD HOD Policy or Board Policy? If yes, please provide the conflict and how you propose to resolve it:

Yes, staff will recommend the deletion of the 93:28-H-7 policy as it will not be consistent with new AGD policy. However, the Dental Practice and Legislative & Governmental Affairs councils have not yet deliberated a resolution on this matter, but are expected to do so for submission of a rescission or amendment request to 93:28-H-7 for 2017-2018 Board Meeting IV.

## Responsible Staff Liaison & AGD member:

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5 6	Staven A. Cheroch DDS EACD
	Steven A. Ghareeb, DDS, FAGD Chair Dantal Practice Council
7	Chair, Dental Practice Council
8	304.744.3333 - p
9 10	sstevenamos@aol.com
11 12	Suggested Council or Agencies to Complete Action:
13 14	Dental Practice and Legislative & Governmental Affairs Councils, and the HOD
15 16	Suggested Councils or Agencies to be Involved in Collaboration:
17 18	The Dental Practice and Legislative & Governmental Affairs Councils, and the HOD
19 20 21	Chair Approval Email:
22	From: Steven Ghareeb [mailto:sstevenamos@aol.com]
23	Sent: Thursday, May 24, 2018 9:06 AM
24	To: Jeanie Kennedy < Jeanie.Kennedy@AGD.org>; battagja@prodigy.net
25	Cc: Srinivasan Varadarajan <srinivasan.varadarajan@agd.org></srinivasan.varadarajan@agd.org>
26	Subject: Re: Medicare AIR- Response Requested by end of day Thurs. May 24, 2018
27	
28 29	I approve. Great job. there is a lot that went into this one.
30	steven
31	
32	From: J B [mailto:battagja@prodigy.net]
33	<b>Sent:</b> Thursday, May 24, 2018 9:56 AM
34	To: Jeanie Kennedy < Jeanie. Kennedy @ AGD.org >
35	Subject: Re: Medicare AIR- Response Requested by end of day Thurs. May 24, 2018
36	
37	Approved.
38	
39	Division Coordinator Review Email:
40	
41	From: Gerald Botko [mailto:drbee35@gmail.com]
42	<b>Sent:</b> Thursday, May 24, 2018 3:32 PM
43	To: Jeanie Kennedy < Jeanie.Kennedy@AGD.org>
44	Cc: Christa Ojeda <christa.ojeda@agd.org>; Gehrig, Robert D., DMD, FAGD <rdgehrig@comcast.net>;</rdgehrig@comcast.net></christa.ojeda@agd.org>
45	Max Moses <max.moses@agd.org>; Srinivasan Varadarajan <srinivasan.varadarajan@agd.org></srinivasan.varadarajan@agd.org></max.moses@agd.org>
46	Subject: Re: Medicare AIR- Response requested end of day Thurs. May 24, 2018
47	
48	Looks good to me.

1	Board Liaison Review Email:
2	
3	From: Robert D. Gehrig [mailto:rdgehrig@comcast.net]
4	<b>Sent:</b> Friday, May 25, 2018 10:19 AM
5	To: Jeanie Kennedy < Jeanie.Kennedy@AGD.org>; Christa Ojeda < Christa.Ojeda@AGD.org>;
6	Max Moses <max.moses@agd.org></max.moses@agd.org>
7	<b>Subject:</b> Re: 2nd Request- Medicare AIR- Response requested end of day Thurs. May 24, 2018
8	
9	As Board Liason, I approve of the submission of the AIR as presented.
10	
11	Thanks! BobG
12	Best Regards,
13	Robert D. Gehrig, DMD, FAGD, FACD
14	rdgehrig@comcast.net
15	
16	CEO Review Email:
17	
18	From: Max Moses
19	Sent: Friday, May 25, 2018 8:28 AM
20	To: Jeanie Kennedy < Jeanie.Kennedy@AGD.org>
21 22	<b>Subject:</b> RE: 2nd Request- Medicare AIR- Response requested end of day Thurs. May 24, 2018
23	I approve this AIR for discussion by the Board.
24	
25	CFO Review Email:
26	
27	From: Christa Ojeda
28	<b>Sent:</b> Friday, May 25, 2018 9:30 AM
29	To: Jeanie Kennedy < Jeanie.Kennedy @ AGD.org>
30	<b>Subject:</b> Re: Medicare AIR- Response requested end of day Thurs. May 24, 2018
31	
32	I have reviewed the AIR and recommend it be sent to the Board for discussion.
33	
34	Christa

1	AIR Addendum – HOD Policy Change Request						
2							
3							
4	Action	n: Ao	ld	_X	Revise	Delete	
5							
6							
7	Existi	ng Policy to	Revise	/Delete	:		
8							
9	This A	IR requests	an addi	tion to 1	policy, not a revi	sion or deletion.	
10	11101	11040000			policy, 1100 to 10 11		
11	Howey	ver, current i	olicy 9	3:28-H	-7 (pasted below	) supports ADA poli	cy that states, in part, "The
12		-	•		·-		de coverage for additional
13						-	d dental benefit plan for
14		lerly populat		,	outa chaonse the	merasion of a define	a deficult senionic prant for
15	the era	erry popular	1011.				
16	This w	ould conflic	t with t	he new	nolicy which or	moses inclusion of d	ental benefits in Medicare
17	Part B		t with th	iic iic w	poncy, which op	poses metasion of a	situi benerits in Wedicare
18	Tartb	•					
19	Furthe	rmore Medi	care Pa	rt C ot	herwise known a	s Medicare Advanta	ge, which is a privately
20							ayment to providers.
21	mpici	nented solut	ion, ma	y not ci	iniciy be based t	on a rec-ror-service p	ayment to providers.
22	Acar	scult of these	discret	ancies	with the enticine	ated new AGD policy	y the staff
23			-			• •	as it will not be consistent
24		ew AGD pol		mu, or	resemu in part, u	ne 93.26-11-7 poncy	as it will not be consistent
2 <del>4</del> 25	WILII	ew AGD po.	iicy.				
	However, the question of whether to rescind 93:28-H-7, either in whole or in part, has not yet						
26 27							ž .
	been deliberated by the Dental Practice and Legislative & Governmental Affairs councils.						
28							
29	Accordingly, it is the recommendation of staff and the council chairs to present rescission of this						
30	policy along with the entire policy paper at the 2017-2018 Board Meeting IV, and to adopt the						
31	policy provisions presented with this AIR as a stopgap measure to ensure that we have						
32	provisional policy available ASAP for advocacy purposes.						
33							
34		0 1				1	D
35						=	Dentistry that if dentistry
36					-	ogram reform, it mu	St:
37	1)				rovide broad acc	cess;	
38	2)	Permit free					
39	3)	Be based or					
40	4)	Assure high	n quality	y dental	care.		
41							
42	and be it further						
43							
44		-					, the AGD support the
45	following six recommendations set forth by the American Dental Association:					ciation:	
46							
47	1.			_			enefits system, which
48	would	not require	nclusio	n of de	ntal benefits for J	population groups cu	rrently receiving regular

dental care, and which would not require public sector participation and subsequent cost transfer. The Association strongly opposes any change in the tax deductibility of current dental benefit coverage.

1 2

2. Continue existing policy support for a separate, restructured program of publicly funded dental benefits for indigent persons. Priority consideration should be given to programs for children. The Association urges that these programs be administered in the private sector wherever possible.

3. For population groups currently not receiving regular dental care the Association supports the opportunity for a) small employers purchase dental plans in the private sector, b) development of cooperative dental benefit purchasing alliances administered in the private sector.

4. The Association recommends that preventive services and educational programs for children be included in any health system reform proposal. Preventive services may include but are not necessarily limited to, fluoridation of community water supplies, oral prophylaxis and application of topical fluorides and sealants; dietary fluoride supplements; restoration of carious teeth; maintenance of space resulting from the early loss of primary teeth and patient education.

5. The Association recommends that in the event that a more comprehensive program is enacted, preventive, diagnostic, emergency services and basic restorative and periodontal care be included for children and the elderly.

6. The Association believes that if the Medicare program is expanded to include coverage for additional dental health care services, we would endorse the inclusion of a defined dental benefit plan for the elderly population. These services would be expressly focused on those elderly who are in long-term residential care or home-bound. Delivery of these services should not be compromised by discrimination by category of provider (physician or dentist)."

**Resolution Presented for Approval:** 

Resolved, that the AGD's positions on dental benefits for the Medicare population are as follows::

1. General dentists are committed to delivering quality dental care to patients of all ages and to advocating for optimal oral health.

2. The AGD believes that the current Medicare Part B program is fiscally unsustainable and cannot support the inclusion of dental benefits.

3. The AGD suggests enhanced benefits and reimbursement in private sector initiatives for dental benefits.

4. The AGD believes that it is the responsibility of every person to exercise good oral health habits that will provide them with a foundation for optimal oral and systemic health

1 throughout their lifetime, and that resources directed toward increasing oral health 2 literacy will support this effort. 3 4 No additional resolution is presented for approval at this time absent the above four policy 5 clauses. 6 7 **Related Existing HOD Policies:** 8 9 See above. Other HOD policies will be reviewed and assessed following council input and 10 recommendations. 11 12 Are existing AGD policies inadequate or no longer appropriate? Explain. 13 14 Yes, see above. 15 16 For additions/revisions, how often should this policy be reviewed? [Default is every 5 years] 17 18 Every five years. 19 20 Any documentation or literature considered in developing this submission? 21 22 U.S. Congressional Budget Office, The Budget and Economic Outlook: 2018 to 2028, Keith Hall 23 before the U.S. Senate Committee on the Budget, April 11, 2018. 24 https://www.cbo.gov/system/files/115th-congress-2017-2018/reports/53721-testimony.pdf 25 26 U.S. Senate Committee on the Budget, The Coming Crisis: America's Dangerous Debt. Dr. 27 Laurence Kotlikoff, February 25, 2015. 28 https://www.budget.senate.gov/imo/media/doc/PDF.Kotlikoff%20-29 %20Testimony%20to%20Senate%20Budget%20Committe%202-25-2015.pdf 30 31 Rauh, Joshua, D. Hoover Institution Essay: Hidden Debt, Hidden Deficits: 2017 Edition. 32 https://www.hoover.org/sites/default/files/research/docs/rauh debtdeficits 36pp final digital v2 33 revised4-11.pdf 34 35 International Monetary Fund, World Economic Outlook, April 2018, Cyclical Upswing. Structural Change, http://www.imf.org/en/Publications/WEO/Issues/2018/03/20/world-36 37 economic-outlook-april-2018 38 Medicare Payment Advisory Commission (MEDPAC) Report to the Congress: Medicare 39 Payment Policy, March 2018. http://www.medpac.gov/docs/default-40 source/reports/mar18 medpac entirereport sec.pdf?sfvrsn=0 41 42 Keehan, SP et.al. National Health Expenditure Projections, 2016-25: Price Increases, Aging Push 43 Sector to 20 Percent of Economy. Health Affairs 36(3), 2017:553-563. 44 45 Medicare Payment Advisory Commission (MEDPAC) Report to the Congress: Health Care Spending and the Medicare Program, June 2017. http://medpac.gov/docs/default-source/data-46 book/iun17 databookentirereport sec.pdf?sfvrsn=0 47

2017 Annual Report of The Boards of Trustees of the Federal Hospital Insurance and Federal

- 3 Supplementary Medical Insurance Trust Funds, July 13, 2017. https://www.cms.gov/Research-
- 4 Statistics-Data-and-Systems/Statistics-Trends-and-
- 5 Reports/ReportsTrustFunds/Downloads/TR2017.pdf

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- U.S. Government Accountability Office (GAO) High-Risk Series: Progress on Many High-Risk
- 8 Areas, While Substantial Effort Needed on Others. February 2017.
- 9 https://www.gao.gov/assets/690/682765.pdf

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- 11 U.S. Centers for Disease Control and Prevention, National Center for Health Statistics. General
- Fertility Rate: 12-Month Ending 2015-Quarter 2, 2017.
- 13 https://www.cdc.gov/nchs/nvss/vsrr/natality-dashboard.htm

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- 15 America's biggest and most predictable train wreck. Unfunded Liabilities. 13D Research.
- 16 https://latest.13d.com/americas-biggest-and-most-predictable-train-wreck-unfunded-liabilities-
- 17 5c6520b469be

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- 19 Tanner, Michael. Taxes Don't Cover America's Expenses. *National Review*. April 18, 2018.
- 20 https://www.nationalreview.com/2018/04/federal-debt-problem-entitlement-reform-only-
- 21 solution/

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- 23 Centers for Medicare and Medicaid. "The only exception is hospice care. If a senior is in need of
- hospice care, payment is rendered from traditional Medicare. Centers for Medicare & Medicaid
- 25 Services." <a href="https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-">https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-</a>
- 26 MLN/MLNProducts/Downloads/hospice pay sys fs.pdf

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- Baker, LC, et al. Medicare Advantage Plans Pay Hospitals Less Than Traditional Medicare Pays.
- 29 Health Affairs. Vol. 35, No. 8. August 2016.

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- 32 Age Adults, Increases among the Elderly, Stable among Children. Research Brief. American
- 33 Dental Association Health Policy Institute. October 2013.
- 34 http://www.ada.org/~/media/ADA/Science%20and%20Research/HPI/Files/HPIBrief\_1013\_2.as
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- 38 Interventions and Healthcare Costs and Utilization. Evidence from an Integrated Dental,
- 39 Medical, and Pharmacy Commercial Claims Database. *Health Economics*. 26: 519-527 (2017).
- 40 Published online Jan. 22, 2016 in Wiley Online Library.

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- 42 Jeffcoat, MK, Jeffcoat, RL, Gladowski, PA, et. al. Impact of Periodontal Therapy on General
- Health: Evidence from Insurance Data for Five Systemic Conditions. *Am J Prev Med.* 2014;
- 44 47(2):166-74.

- 46 United Healthcare. Medical Dental Integration Study 2013.
- 47 https://www.uhc.com/content/dam/uhcdotcom/en/Private%20Label%20Administrators/100-
- 48 12683%20Bridge2Health Study Dental Final.pdf

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2	Sullivan, Peter. Poll: Seniors more satisfied with Medicare Advantage. The Hill. March 31, 2015
3	http://thehill.com/policy/healthcare/237492-poll-seniors-more-satisfied-with-medicare-advantage
4	
5	Morning Consult Poll Results. March 23, 2016. <a href="http://medicarechoices.org/wp-">http://medicarechoices.org/wp-</a>
6	content/uploads/2016/03/National-poll-resultspdf
7	
8	The National Academies of Sciences, Engineering, Medicine. Extending Medicare Coverage for
9	Preventive and Other Services. <i>National Academies Press</i> . 2000. Page 63.
10	https://www.nap.edu/read/9740/chapter/6
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12	Guay, Albert H. The differences between dental and medical care. Implications for dental benefit
13	plan design. <i>JADA</i> , Vol. 137, June 2006: 801-806.
14	
15	Avnet HH, Nibrios MK. Insured dental care: A research project report. New York: Group Health
16	Dental Insurance; 1967:3-7.
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18	Payton, Bre. Poll: Nearly Half of Millennials Prefer Socialism to Capitalism. November 1, 2017.
19	The Federalist. http://thefederalist.com/2017/11/01/study-nearly-half-millennials-prefer-
20	socialism-capitalism/
21	
22	Other Comments?
23	



# Reports to be reviewed by the

## Reference Committee on

## 

# **Continuing Education**

Friday, November 2, 2018 

4:00 p.m. 

## Room S102BCD – McCormick Place Convention Center

Dr. George Schmidt, Chair	New Jersey 14
Dr. Ann Hunsicker-Morrissey	Pennsylvania 15
Dr. Leigh Jacopetti-Kondraski	Pennsylvania 16
Dr. Nahid Kashani	Michigan 17
Dr. Kristopher Rappold	Louisiana 18
Dr. Richard Knowlton, Consultant	Pennsylvania 19
Dr. Eric Wong, Consultant	California 20
Dr. Michael King, Board Monitor	Tennessee 21 22
Dr. John Olsen, Board Monitor	Wisconsin 23
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## The Full AIRs for the following resolutions can be found in the 2018 HOD Manual.

#### **Resolution 201**

"Resolved that Policy 2015:309-H-6 be amended as follows.

2015:309-H-6 "Resolved, that HOD Policy 2014:107-H-6 be amended to read:

"Resolved, that the AGD take advantage of super saver and other discounted airfares whenever possible in scheduling meetings and be it further

Resolved, that officers, members of the Board, Council and Committee be encouraged to take advantage of super saver airfares by:

- 1. Offering an extra per diem to an individual staying over on a Saturday night when the savings in airfare more than compensates for it.
- 2. Holding Board Meetings within the continental United States in locations where Board members can be encouraged to stay over on a Saturday night to obtain a super saver airfare, and be it further

"Resolved, that all Council and Committee Meetings be held in Chicago except for:

- 1. Meetings of the Annual Meetings Council Scientific Meeting Council which may be held at sites selected for Annual Scientific Meetings to be held within three years.
- 2. Such other meetings as the President may deem necessary which have to be moved to a location outside of Chicago because of justifiable logistical reasons, where the total cost of the airfare will be less or not appreciably more than it would have been held in Chicago.
- 3. Any meeting held in conjunction with the AGD's Annual or Scientific Meeting.
- 4. Any meeting held in conjunction with the American Dental Association's Annual Meeting."

#### **Resolution 202**

If Resolution 202 is adopted, Resolution 203 will be ruled moot.

"Resolved, that the Lifelong Learning & Service Guidelines be amended to read:

**Lifelong Learning & Service Recognition Recipient Award Guidelines** 

#### Why Achieve Recognition?

Lifelong Learning & Service Recognition (LLSR) is a program of formal recognition for Academy of General Dentistry (AGD) Masters in the areas of continuing education, dental-related community service and service to organized dentistry. It is not a credential and in no way may be represented to the public as such. LLSR was created to recognize the achievements of those AGD Masters who clearly recognize the professional obligation to remain current in their profession and to create an example so that each member of the dental profession never loses sight of this obligation. Achieving the LLSR from the AGD tells colleagues and patients of your continued commitment to lifelong learning and quality patient care. A Master may receive LLSR multiple times, in a sequential manner, as long as all requirements are met. Once a Master is first recognized by this achievement, subsequent recognitions may include only those credits and points earned since the date of the previous LLSR recognition.

#### A Charge to all Masters

Masters of the AGD embody the AGD's principles and ideals. They accept an obligation to continually prove themselves worthy of that designation throughout their professional lives. There are certain obligations that go along with the honor of becoming a Master in the AGD. Masters are expected to:

1) Continue their commitment to lifelong learning

- 2) Be a mentor to associates and new dentists
- 2 3) Improve the quality of continuing education
- 3 4) Be a voice of the general dentist.
- 4 | LLSR Requirements

- 5 1) All applicants must be AGD Masters, with AGD membership in good standing at the
- 6 time of application and when recognition is received.
- 7 2) Completion of 500 credit hours of FAGD/MAGD-approved continuing education credit
- 8 with at least 300 hours in course attendance. LLSR credit begins to accrue Jan. 1 of the
- 9 <u>year a member is approved to receive AGD Mastership</u> are required in course attendance,
- 10 teaching or publications earned since the date Mastership was received or since a previous
- 11 LLSR was received. A breakdown of these credits can be found below in the Course
- 12 **Attendance section.**
- 13 3) Completion of 100 hours of AGD-approved dental-related community/volunteer service
- 14 and/or service to organized dentistry is required. Hours must have been performed since
- 15 the date Mastership was received or since a previous LLSR was received LLSR
- 16 community/volunteer service points begin to accrue Jan. 1 of the year a member is
- 17 approved to receive AGD Mastership. The acceptability of points is subject to review by
- 18 | the Dental Education Council. Examples of acceptable dental-related volunteer service can
- 19 be found below in the Community and Volunteer Service section.
- 20 4) Attendance at a Convocation ceremony held during the AGD scientific sessions to
- 21 <u>receive the award. Successful candidates are allowed three years following approval to</u>
- 22 attend the convocation and receive their award.
- 23 An application must be submitted with the designated application processing fee, which is
- 24 determined annually by the Dental Education Council. This fee covers direct costs, plus
- 25 \$\\$100 for overhead costs. Applications must be postmarked by December 31.
- 26 5) Acceptance or denial will be communicated to applicants following review of the
- 27 application by the Dental Education Council. All decisions of the council are final.
- 28 Recognition of LLSR recipients will be at the constituent and/or regional level and through
- 29 AGD publications. Recipients will be invited to be present and attend the Convocation
- 30 Ceremony where they will be celebrated by inclusion of their names in the Convocation
- 31 program. Recipients will be seated in a designated area and will walk across the stage to be
- 32 honored, and have each of their names read, prior to the FAGD and MAGD awardees."
- 33
- 34 | Course Attendance
- 35 1) Completion of 500 hours of FAGD/MAGD-approved continuing education credit. Hours
- must have been earned since the date January 1 of the year member was approved for
- 37 Mastership was received or since a previous LLSR was received:
- a) At least 150 continuing education hours must be earned in participation course
- 39 **attendance**;
- 40 b) A maximum of 100 credits for teaching is allowed;
- 41 c) A maximum of 100 credits for publications is allowed.
- 42
- 2) Credits for course attendance, teaching or publications must be in at least eight (8) of the following disciplines, although there are no minimums or maximum by discipline. Note: No
- credits will be accepted for advanced academic education programs, such as residencies or
- 46 advanced degree programs.
- 47

1	Subject Category	Subject Code
2	<b>Basic Science</b>	010
3	Endodontics	070
4	Electives	130
5	Myofacial Pain/	
6	Occlusion Orofacial Pain*	200
7	<b>Operateive Dentistry</b>	250
8	Oral/Max Surgery	310
9	Anes/Pain Mgmt/Pharm*	340
10	Orthodontics	370
11	Pediatrics	430
12	Periodontics	490
13	<b>Practice Mgmt</b>	550
14	Fixed Prosth	610
15	Removable Prosth	670
16	Implants	690
17	Oral Med/Oral Dx	730
18	Special Pt Care	750
19	Esthetics	780
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\*These changes go into effect January 1, 2019. Any member that has not achieved or applied for Fellowship, Mastership, or LLSR by December 31, 2016, will be expected to meet the updated continuing education requirements at that time.

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#### **Teaching and Publication Credit**

- 1) Full or part-time faculty positions in ADACODA/CDA-accredited institutions are eligible for up to ten (10) credit hours each year. Verification of teaching appointments is required from each institution and should be included with the application.
- 2) Teaching continuing dental education courses for organizations that are approved by AGD-PACE3 or ADA-CERP or an AGD constituent are eligible for credit. Verification is required that indicates the dental discipline and the number of hours. Credit will be given hour-for-hour for each presentation.
- 3) The publication of a scientific article, case report, technique paper or clinical research report in a scientific journal or textbook is worth ten (10) credit hours. A copy of the articles, with dates of publication, should be submitted with the application.

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#### **Dental-Related Community and Volunteer Service**

- 1) One community service point is equal to one hour of <u>dental-related</u> volunteer community service. The Dental Education Council will determine which additional categories of service not described in these guidelines may be eligible. Volunteer work for a for-profit organization, such as a dental manufacturer, is not eligible.
- 2) To document dental-related community service, a representative of the organization for which the community/volunteer work was done must complete and sign the provided
- 44 Volunteer Service Verification Form, which specifies the type(s) and term(s) of volunteer
- 45 service(s) provided. If additional verification is needed, please attach necessary
- 46 documentation to this form.

3) No financial remuneration or "in-kind" remuneration may be received for service/volunteer work. Reimbursement of expenses such as airfare, transportation, meals, etc., is allowed.

4

- Categories of <u>dental-related</u> community and volunteer service may include, but are not limited to:
- 7 a. Providing pro bono dental services through a not-for-profit organization;
- 8 **b.** Mentoring a <u>dental</u> student, emerging dentist or struggling colleague, through a
- 9 recognized dental organization;
- 10 c. Service in a volunteer dental clinic;
- 11 d. Service overseas on a dental mission;
- 12 e. Volunteer <u>dental-related</u> service in a community program, such as a health fair;
- 13 **f. Providing presentation on dental-related topics to schools, civic, church or other**14 **community groups or other health professionals;**
- 15 g. Providing oral cancer screenings at a local church, synagogue, school, health fair,
- 16 **nursing home, retirement community, etc.**;
- 17 h. Providing dental screenings to athletes through the Special Olympics Special Smiles;
- i. Volunteer work at a local or national dental meeting, such as working at the organization's booth;
- j. Serving as an unpaid team dentist for a school, college, professional sports team or youth athletic association;
- 22 k. Instituting a mouth guard program for a school, college, professional sports team or vouth athletic association;
- 24 | 1. Providing dental education programs at elementary or secondary schools;
  - m. Volunteering as a Boy/Girl Scout merit badge leader for dental health.

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Service to Organized Dentistry:

- Holding a local, state/provincial or national appointment or an elected office in a dental organization is considered service to organized dentistry. Points are awarded for each month of service, up to 12 points per year per national or local organization.
- 1) A maximum of 12 points may be earned annually for serving in a national position in a dental organization. Service time of less than one year will be prorated by month. Holding multiple positions at the national level in the same organization is acceptable only up to the 12-point limit each year.
- 2) A maximum of 12 points may be earned annually for serving in state/provincial,
- 36 constituent or component positions in a dental organization. Service time of less than one
- year will be prorated by month. Holding multiple positions in the same local organization is acceptable only up to the 12-point limit each year.
- 39 **3)** To document service to organized dentistry, a representative of the organization for which the service was done must complete and sign the provided Volunteer Service
- 41 Verification Form, which specifies the type(s) and term(s) of volunteer service(s) provided.
- 42 | If additional verification is needed, please attach necessary documentation to this form.

- 44 Application Procedures and Deadline
- 45 <u>1)</u> All LLSR requirements must be completed by the December 31 application deadline to be considered for the class immediately following the year the application is submitted.

1 2) Applications must be postmarked no later than December 31 to be considered for the 2 class immediately following the year the application deadline is submitted, and must 3 include the designated application fee. This fee is determined annually by the Dental 4 Education Council and includes a non-refundable processing fee. The AGD is not 5 responsible for lost or delayed mail. 3) Only the Dental Education Council may determine the acceptability of LLSR 6 7 applications. Applicants are notified by letter of the Council's decision, and all decisions of 8 the Council are final. Recognition will be provided at the Convocation Ceremony at the 9 AGD Annual Meeting & Exhibits through the inclusion of names of the new recipients in 10 the Convocation program and in AGD publications. 11 4) Acceptance or denial will be communicated to applicants following review of the 12 13 application by the Dental Education Council. All decisions of the council are final. 14 5) Recipients are required to attend the annual Convocation ceremony held during the 15 AGD scientific sessions to receive the award. Successful candidates are allowed three years 16 following approval to attend convocation and received their award. Additional recognition 17 of LLSR recipients may occur at the constituent or regional levels and thorough AGD 18 19 publications. 20 21 22 Direct inquiries regarding the LLSR to: 23 24 **Academy of General Dentistry** 25 **Department of Dental Education** 560 W. Lake Street, Sixth Floor 26 27 **Chicago, Illinois 60661-6600** 28 Phone 888.AGD.DENT (243.3368) 29 Fax 312.335.3428 30 Adopted HOD 7/2003 31 32 Amended HOD 6/2015 33 34 And be it further, 35 36 Resolved that AGD House Policy 2000:9-H-7 Advertising FAGD/MAGD Credentials be modified to allow AGD members to advertise the LLSR Award as a Credential, similar to 37 38 the FAGD/MAGD. 39 40 Advertising FAGD/MAGD/LLSR Credentials 41

Fellow, or Master, or Lifelong Learning & Service Recipient of the Academy of General Dentistry

44 General Dentist

- 45 "Resolved, that the following language be accepted by the Academy of General Dentistry as
- 46 the appropriate use of the Fellowship, and Mastership, and Lifelong Learning and Service
- 47 Recipient designation to the public by way of advertising, listing, or office signage:

1 2 , DDS, BDS, or DMD, FAGD, or MAGD, or LLSR 3 Fellow, or Master or Lifelong Learning & Service Recipient of the Academy of General 4 **Dentistry** 5 6 and be it further 7 8 Resolved, that our members be advised through AGD printed communications that our 9 Principles of Ethics allow general dentists to announce Fellowship, or Mastership or 10 Lifelong Learning & Service Recipient in the area of general dentistry in their 11 announcement of services to patients so long as they avoid any communication that 12 expresses specialization and clearly write out the definition of the initials, in order to not 13 lead the reasonable person to believe that the designation represents an academic degree." 14 15 And be it further, Resolved that House Policy 81:12-H-7 Defending their capabilities to render dental 16 17 procedures be modified to read: 18 19 Resolved, that members faced... C. Verification that the individual has achieved Fellowship, or Mastership, or Lifelong 20 21 Learning & Service Recipient status in the AGD. ... 22 23 And be it further, 24 Resolved that House Policy 99:44-H-7, Approve procedures for processing FAGD and 25 MAGD applications be modified to read: 26 27 Approval procedures for processing FAGD, and MAGD, and LLSR applications 28 29 Resolved, that the AGD Board approve procedures and procedural changes related to the 30 mechanics of processing the applications for the Fellowship, and-Mastership, and Lifelong 31 **Learning & Service Recipient Awards.** 32 33 34 And be it further, 35 36 Resolved that House Policy 96:49-H-7 Appeal of application deadline be modified to read: 37 38 **Appeal of application deadline** 39 Resolved, that the following guided be established for considering appeals of the 40 FAGD/MAGD/LLSR application deadline: 41 42 GUIDELINES FOR APPEALS OF 43 THE FAGD/MAGD/LLSR APPLICATION DEADLINE 44 45 An application for the Fellowship, or Mastership, or Lifelong Learning & Service Recipient 46 award that is received in the Chicago headquarter office... 47

1	And be it further,
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3	Resolved that House Policy 2002:20-H-7 Category of membership, Fellowship as, be
4	modified to read:
5	
6	Resolved, that the AGD recognize the its Fellowship, and Mastership, and Lifelong
7	<b><u>Learning &amp; Service Recipient</u></b> designation are categories of membership in the organization
8	that may be announced appropriately to the public but only while an individual maintains
9	membership in the organization, and be further
10	
11	Resolved, that constituent academies recognize that they may report to appropriate
12	licensing bodies instances of non-members announcing FAGD, and MAGD, and LLSR
13	designation to the public because it is false advertising.
14	a congruence to the public because it is ruise any or assing.
15	And be it further,
16	And be it further,
17	Resolved that House Policy 78:19-H-6 Changes in, be modified to read:
18	Resolved that House I only 78.19-11-0 Changes in, be mounted to read.
	Declared that shows a suit in the Fallenghia and Martaughia and iffilm I coming 0
19	Resolved, that changes made in the Fellowship, or Mastership, or Lifelong Learning &
20	Service Recipient guidelines which make those guidelines more restrictive, be made
21	effective for all members of the AGD five (5) years after the date of passage of such changes
22	by the AGD House of Delegates.
23	
24	And be it further,
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26	Resolved, that House Policy 2003:3-H-7 Lifelong Learning and Service Recognition
27	Recipient Program be modified to read:
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29	Lifelong Learning and Service Recognition Recipient Award Program
30	"Resolved, that the AGD offer the Lifelong Learning and Service Recognition Recipient
31	Award (LLSR) program to recognize the accomplishment of AGD Masters for their
32	continuing education and volunteer service to dentistry, and be it further
33	
34	Resolved, that the document Lifelong Learning and Service Recognition Recipient Award
35	(LLSR) Guidelines be adopted."
36	•
37	Resolution 203
38	<u></u>
39	If Resolution 202 is adopted, Resolution 203 will be ruled moot.
40	If Resolution 202 is anopied, Resolution 200 ii in occinion
41	"Resolved, that the Lifelong Learning & Service Guidelines be amended to read:
42	Resolved, that the Eliciong Learning & Service Guidennes be amended to read.
43	Lifelong Learning & Service Recognition Guidelines
<del>4</del> 3	Enclosing Learning & Sci vice Accognition Guidennes
45	Why Achieve Recognition?
45 46	Lifelong Learning & Service Recognition (LLSR) is a program of formal recognition for
47	Academy of General Dentistry (AGD) Masters in the areas of continuing education, dental-

related community service and service to organized dentistry. It is not a credential and in no way may be represented to the public as such. LLSR was created to recognize the achievements of those AGD Masters who clearly recognize the professional obligation to remain current in their profession and to create an example so that each member of the dental profession never loses sight of this obligation. Achieving the LLSR from the AGD tells colleagues and patients of your continued commitment to lifelong learning and quality patient care. A Master may receive LLSR multiple times, in a sequential manner, as long as all requirements are met. Once a Master is first recognized by this achievement, subsequent recognitions may include only those credits and points earned since the date of the previous LLSR recognition.

1 2

#### A Charge to all Masters

- Masters of the AGD embody the AGD's principles and ideals. They accept an obligation to continually prove themselves worthy of that designation throughout their professional lives. There are certain obligations that go along with the honor of becoming a Master in the AGD. Masters are expected to:
- 17 1) Continue their commitment to lifelong learning
- 18 2) Be a mentor to associates and new dentists
  - 3) Improve the quality of continuing education
    - 4) Be a voice of the general dentist.

#### LLSR Requirements

- 1) All applicants must be AGD Masters, with AGD membership in good standing at the time of application and when recognition is received.
- 2) 500 credit hours are required in course attendance, teaching or publications earned since the date Mastership was received or since a previous LLSR was received. A breakdown of these credits can be found below in the Course Attendance section.
- 3) Completion of 100 hours of AGD-approved dental-related community/volunteer service and/or service to organized dentistry is required. Hours must have been performed since the date Mastership was received or since a previous LLSR was received. The acceptability of points is subject to review by the Dental Education Council. Examples of acceptable dental-related volunteer service can be found below in the Community and Volunteer Service section.
  - 4) An application must be submitted with the designated application processing fee, which is determined annually by the Dental Education Council. This fee covers direct costs, plus \$100 for overhead costs. Applications must be postmarked by December 31.

5) Acceptance or denial will be communicated to applicants following review of the application by the Dental Education Council. All decisions of the council are final. In addition to recognition on a national level, additional recognition of LLSR recipients can also will be at the constituent and/or regional level and through AGD publications. Recipients will be invited requested to be present and attend the Convocation Ceremony where they will be celebrated by inclusion of their names in the Convocation program. Recipients will be seated in a designated area and will walk across the stage to be honored, and have each of their names read, prior to following the FAGD and MAGD awardees."

#### **Course Attendance**

- 1 1) Completion of 500 hours of FAGD/MAGD-approved continuing education credit. Hours 2 must have been earned since the date Mastership was received or since a previous LLSR 3 was received:
- 4 a) At least 150 continuing education hours must be earned in participation course 5 attendance;
  - b) A maximum of 100 credits for teaching is allowed;
    - c) A maximum of 100 credits for publications is allowed.

9 2) Credits for course attendance, teaching or publications must be in at least eight (8) of the 10 following disciplines, although there are no minimums or maximums by discipline for nonparticipation credits. Note: No credits will be accepted for advanced academic education 11 12 programs, such as residencies or advanced degree programs.

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14	Subject Category	<b>Subject Code</b>
15	<b>Basic Science</b>	010
16	Endodontics	070
17	Electives	130
18	Myofacial Pain/	
19	Occlusion Orofacial Pain*	200
20	Operateive Dentistry	250
21	Oral/Max Surgery	310
22	Anes/Pain Mgmt/Pharm*	340
23	Orthodontics	370
24	Pediatrics	430
25	Periodontics	490
26	Practice Mgmt	550
27	Fixed Prosth	610
28	Removable Prosth	670
29	Implants	690
30	Oral Med/Oral Dx	730
31	Special Pt Care	750
32	Esthetics	<b>780</b>

\*These changes go into effect January 1, 2017. Any member that has not achieved or applied for Fellowship, Mastership, or LLSR by December 31, 2016, will be expected to meet the updated continuing education requirements at that time.

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- **Teaching and Publication Credit**
- 39 1) Full or part-time faculty positions in ADA/CDA-accredited institutions are eligible for 40 up to ten (10) credit hours each year. Verification of teaching appointments is required from each institution and should be included with the application. 41
- 42 2) Teaching continuing dental education courses for organizations that are approved by
- PACE, or an AGD constituent are eligible for credit. Verification is required that indicates 43
- 44 the dental discipline and the number of hours. Credit will be given hour-for-hour for each

45 presentation. 3) The publication of a scientific article, case report, technique paper or clinical research report in a scientific journal or textbook is worth ten (10) credit hours. A copy of the articles, with dates of publication, should be submitted with the application.

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- **Community and Volunteer Service**
- 6 1) One community service point is equal to one hour of volunteer community service. The
- 7 Dental Education Council will determine which additional categories of service not
- 8 described in these guidelines may be eligible. Volunteer work for a for-profit organization,
- 9 such as a dental manufacturer, is not eligible.
- 10 2) To document community service, a representative of the organization for which the
- community/volunteer work was done must complete and sign the provided Volunteer
- 12 | Service Verification Form, which specifies the type(s) and term(s) of volunteer service(s)
- provided. If additional verification is needed, please attach necessary documentation to this form.
- 15 3) No financial remuneration or "in-kind" remuneration may be received for
- service/volunteer work. Reimbursement of expenses such as airfare, transportation, meals,
- 17 etc., is allowed.

18 19

- Categories of community and volunteer service may include, but are not limited to:
- 20 a. Providing pro bono dental services through a not-for-profit organization;
- b. Mentoring a student, emerging dentist or struggling colleague, through a recognized
- dental organization;
- 23 c. Service in a volunteer dental clinic;
- 24 d. Service overseas on a dental mission;
- 25 e. Volunteer service in a community program, such as a health fair;
- 26 | f. Providing presentation on dental-related topics to schools, civic, church or other
- community groups or other health professionals;
- 28 g. Providing oral cancer screenings at a local church, synagogue, school, health fair,
- 29 nursing home, retirement community, etc.;
- 30 h. Providing dental screenings to athletes through the Special Olympics Special Smiles;
- i. Volunteer work at a local or national dental meeting, such as working at the
- 32 | organization's booth;
- j. Serving as an unpaid team dentist for a school, college, professional sports team or youth
- 34 athletic association;
- k. Instituting a mouth guard program for a school, college, professional sports team or
- 36 **vouth athletic association**;
- 37 | I. Providing dental education programs at elementary or secondary schools:
- 38 m. Volunteering as a Boy/Girl Scout merit badge leader for dental health.

- 40 | Service to Organized Dentistry:
- 41 Holding a local, state/provincial or national appointment or an elected office in a dental
- 42 organization is considered service to organized dentistry. Points are awarded for each
- 43 month of service, up to 12 points per year per national or local organization.
- 44 1) A maximum of 12 points may be earned annually for serving in a national position in a
- dental organization. Service time of less than one year will be prorated by month. Holding
- 46 | multiple positions at the national level in the same organization is acceptable only up to the
- 47 | **12-point limit each year.**

1	2) A maximum of 12 points may be earned annually for serving in state/provincial,
2	constituent or component positions in a dental organization. Service time of less than one
3	year will be prorated by month. Holding multiple positions in the same local organization is
4	acceptable only up to the 12-point limit each year.
5	3) To document service to organized dentistry, a representative of the organization for
6	which the service was done must complete and sign the provided Volunteer Service
7	Verification Form, which specifies the type(s) and term(s) of volunteer service(s) provided.
8	If additional verification is needed, please attach necessary documentation to this form.
9	
10	Application Procedures and Deadline
11	1) All LLSR requirements must be completed by the December 31 application deadline.
12	2) Applications must be postmarked no later than December 31 to be considered for the
13	class immediately following the application deadline is submitted, and must include the
14	designated application fee. This fee is determined annually by the Dental Education
15	Council and includes a non-refundable processing fee. The AGD is not responsible for lost
16	or delayed mail.
17	3) Only the Dental Education Council may determine the acceptability of LLSR
18	applications. Applicants are notified by letter of the Council's decision, and all decisions of
19	the Council are final. Recognition will be provided at the Convocation Ceremony at the
20	AGD Annual Meeting & Exhibits through the inclusion of names of the new recipients in
21	the Convocation program and in AGD publications.
22	Direct inquiries regarding the LLSR to:
23	
24	Academy of General Dentistry
25	Department of Dental Education
26	560 W. Lake Street, Sixth Floor
27	Chicago, Illinois 60661-6600
28	Phone 888.AGD.DENT (243.3368)
29	Fax 312.335.3428
30	
31	Adopted HOD 7/2003
32	Amended HOD 6/2015
33	
34	And be it further,
35	
36	Resolved, that House Policy 2003:3-H-7 Lifelong Learning and Service Recognition
37	Program be modified to read:
38	
39	Lifelong Learning and Service Recognition Program
40	"Resolved, that the AGD offer the Lifelong Learning and Service Recognition (LLSR)
41	program to recognize the accomplishment of AGD Masters for their continuing education
42	and volunteer service to dentistry, and be it further
43	
44	Resolved, that the document Lifelong Learning and Service Recognition (LLSR)
45	Guidelines be adopted."

 "Resolved, that HOD Policy 2014:105R-H-6 be rescinded.

2014:105R-H-6 "Resolved, that the Meeting Services Guidelines Scientific Session Fees Annual Meetings Council be amended to read

**Scientific Session Fees Annual Meetings Council** 

AGD member dentist registrants who purchase tickets for scientific sessions and then find that they are elevated to delegate or alternate delegate status may obtain a full refund of their scientific session ticket(s)

#### **REFUNDS FOR TICKETS PURCHASED**

Cancellation requests received less than 30 days prior to the first official day of the annual meeting, with the exception of AGD member dentist registrants who have been elevated to delegate or alternate delegate status, will not be eligible for a credit or refund.

And be it further,

Resolved, that the Board Policy Manual be amended to include Policy Type: VI. Board Guidelines, E. Scientific Session Refunds

AGD member dentist registrants who purchase registration and/or tickets for the Scientific Session may obtain a refund of that purchase, less a processing fee, up to 30 days before the first day of the Session. AGD member dentist registrant refund requests will incur a \$50 processing fee. Guest registrant refund requests will incur a \$15 processing fee. Requests received less than 30 days before the first day of the Session will not be eligible for a credit or refund.

Monitoring: Review by Board annually in April

## Resolution 205

"Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance Process, M., Section 2., Examinations Council to read:

#### E. Examinations Council

1. The Examinations Council shall consist of six (6) members, including the chairperson, the chairs of the Fellowship Exam Committees (A, B, and C), Examination Development Committee, Examination Assessment Committee and Examination Materials Committee, chair of the Self-Instruction Committee, and one (1) other members who has have served at least one (1) term on the Examination Council or Self-Instruction Committee. All members of the council must and each of whom have achieved Fellowship or Mastership status within the organization.

a. To be responsible for overseeing the construction, administration, scoring, and security of the Fellowship  $\underline{\mathbf{E}}$ xamination;

b. To help develop and administer, in conjunction with the Examination Committees Examination Development Committee, Examination Assessment Committee and Examination Materials Committee, any other examination, quizzes, or instruments of measurement when so directed by the HOD, or Board;

c. To audit the Fellowship Review Course annually to ensure the quality of the course materials is consistent with the overall premise of the Fellowship Exam<u>ination;</u>

d. To recommend and enforce policies pertaining to examinations for which it is responsible.

e. To evaluate the quality and effectiveness of *General Dentistry's* Self-Instruction program once a year.

3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board Policy Statements.

4. A quorum of the council and the <u>examination committees</u> exam teams shall be a majority of members present.

5. Each Council and Committee shall evaluate the revenues and expenses pricing of all its programs and services annually as part of the budget process. Additionally, each Council and Committee shall provide a complete revenue and expense analysis to the Board at Board Meeting IV at least every three years, beginning 2019.

6. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's reporting structure under the Sunshine Act. The staff liaison will compile all of their individual's forms, and share them with their chairperson and also the executive office staff, who will in turn, forward them to the Audit Committee for further review.

And be it further:

Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance Process, M., Section 3H, Examinations Items Bank Committee (Team C) to read:

H. Examinations Items Bank Materials Committee (Team C)

1. The Examination <u>Item Bank Materials</u> Committee (<u>Team C</u>) shall be composed of six (6) members, each of whom have achieved Fellowship or Mastership status within the organization and each of whom have served a minimum of two (2) years on either <u>Team A or Team B the Examination Development Committee</u> or <u>of the Fellowship</u> Examination Assessment Committee;

Committee members shall serve no more than two (2) consecutive three (3) year terms on the committee;

2. It shall be the duty of the committees:

a. To ensure that each item in the item bank is appropriately and consistently categorized in accordance with the examination content outline;

b. To review periodically the content outline for the Fellowship Examination and recommend changes in the outline to the council;

c. To develop the Fellowship Examination Study Guide annually per the established development guidelines set forth by the council;

3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board Policy Statements.

4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its programs and services annually as part of the budget process. Additionally, each Council and Committee shall provide a complete revenue and expense analysis to the Board at Board Meeting IV at least every three years, beginning 2019.

5. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's reporting structure under the Sunshine Act. The staff liaison will compile all of their individual's forms, and share them with their chairperson and also the executive office staff, who will in turn, forward them to the Audit Committee for further review.

And be it further:

Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance Process, M., Section 3 I. Fellowship Exam Committee (Teams A and B) to read:

I. Fellowship Exam Committee (Teams A and B) Examination Development Committee

1. The Fellowship Exam Committee (Teams A and B) Examination Development Committee shall be composed of twelve (12) six (6) members, at least one (1) of whom shall be a member of the Examinations Council, with each of the twelve (12) six (6) members having achieved Fellowship or Mastership status within the organization;

Those committee members who are not members of the Examinations Council shall serve no more than two (2) consecutive three- (3) year terms on the committee;

2. It shall be the duty of the committee:

a. To construct, review, and score the Fellowship Examination;

b. To make recommendations for an official passing score, based on the statistical analyses, for the annual Fellowship Examination to the Examinations Council;

c. To maintain an adequate pool of examination items that can be utilized for the Fellowship Examination.

3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board Policy Statements.

4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its programs and services annually as part of the budget process. Additionally, each Council and Committee shall provide a complete revenue and expense analysis to the Board at Board Meeting IV at least every three years, beginning 2019.

5. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's reporting structure under the Sunshine Act. The staff liaison will compile all of their individual's forms, and share them with their chairperson and also the executive office staff, who will in turn, forward them to the Audit Committee for further review.

IJ. Fellowship Exam Committee (Teams A and B) Examination Assessment Committee

1. The Fellowship Exam Committee (Teams A and B) Examination Assessment

Committee shall be composed of twelve (12) six (6) members, at least one (1) of whom shall be a member of the Examinations Council, with each of the twelve (12) six (6) members having achieved Fellowship or Mastership status within the organization;

Those committee members who are not members of the Examinations Council shall serve no more than two (2) consecutive three- (3) year terms on the committee;

2. It shall be the duty of the committee:

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**Continuing Education Division** 43

**Examinations Council** 

- 45 Fellowship Exam Committee (Teams A and B) Examination Assessment Committee
- 46 Fellowship Exam Committee (Teams A and B) Examination Development Committee 47
  - **Examinations Items Bank Committee (Team C)** Examination Materials Committee

- a. To construct, review, and score To review the preliminary and approve the final version of the Fellowship Examination;
- To make recommendations for an official passing score, based on the statistical analyses, for the annual Fellowship Examination to the Examinations Council To review all course materials for the Fellowship Review Course annually;
- c. To maintain an adequate pool of examination items that can be utilized for the Fellowship Examination.
- 3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board **Policy Statements.**
- 4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its programs and services annually as part of the budget process. Additionally, each Council and Committee shall provide a complete revenue and expense analysis to the Board at Board Meeting IV at least every three years, beginning 2019.
- 5. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's reporting structure under the Sunshine Act. The staff liaison will compile all of their individual's forms, and share them with their chairperson and also the executive office staff, who will in turn, forward them to the Audit Committee for further review.
- And be it further,
- Resolved that all subsequent committee charges be renumbered appropriately in the Board Policy Manual.
- And be it further,
- Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance Process, H. Division Coordinator Duties be amended to read:
- **Dental Education Council**

1 **Local Advisory Committee** 2 **PACE Council** 3 **Scientific Meeting Council** 4 **Self Instruction Committee** 5 6 And be it further, 7 8 Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: V. Board 9 Policy Statements, Q. Sunset Review Process and Schedule be amended to read: 10 11 12 13 **Sunset Review Process schedule** 14 15 2015-2016 **Credentials and Elections Committee** 16 17 **Examinations** Council 18 Fellowship Exam Committee (Teams A and B) Examination Assessment Committee 19 Fellowship Exam Committee (Teams A and B) Examination Development Committee 20 Examinations Items Bank Committee (Team C) Examination Materials Committee 21 22 And be it further, 23 24 Resolved, that HOD Policy 2017-101-H-11 be amended to read: 25 26 2017-101-H-11 "Resolved, that AGD HOD policy 2002:8-H-7 be revised as follows: 27 28 "Resolved, that the following system be used to guide the incoming President in making 29 council and committee appointments: 30 1. The incoming President will send a letter in April to all Constituent Presidents, 31 32 Regional Directors, and Trustees asking for council and committee appointment 33 recommendations. The letter will be accompanied by a suggested geographical distribution 34 based on the number of members in each region to help make the appointments as 35 geographically balanced as possible. This geographical distribution list will be based on 36 the present council and committee structure, not including the Local Advisory Committees, 37 the Professional Relations Committee, and all Board Committees. Members of the Examination Council shall not be counted a second time if also serving on Exam 38 39 Committee A, Exam Committee B, or Exam Committee C Examination Assessment 40 Committee, Examination Development Committee, and Examination Materials Committee. 41 The deadline for responding to this communication will be June 30 of each year. 42 43 And be it further, 44 45 Resolved that the AGD Constitution and Bylaws be amended to read: 46 **CHAPTER XIII, Divisions, Councils and Committees** 47

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2	Section 2. Each of the following councils and committees shall be assigned to the following
3	Divisions:
4	
5	•••
6	C. Continuing Education Division
7	
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10	4. Examinations Council
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12	a. Examination Assessment Committee
13	
14	b. Examination Development Committee
15	
16	c. Examination Materials Committee
17	
18	bd. Self Instruction Committee
19	
20	a. Examinations Item Bank Committee (Team C)
21	
22	d. Fellowship Examination Committee (Teams A & B)"
23	
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# Reports to be reviewed by the

# Reference Committee on

# Administration, Image & Membership

Friday, November 2, 2018

11 2:30 p.m.

Room S102BCD – McCormick Place Convention Center

Dr. Chethan Chetty, Chair	California 15
Dr. Mohamed Attia	Virginia 16
Dr. Jennifer Nguyen	Alberta 17
Dr. Seung-Hee Rhee	New York 18
Dr. Ricardo Suarez	California 19
Dr. Colleen DeLacy, Consultant	Michigan 20
Dr. Aldo Mirando-Collazo, Consultant	Puerto Rico 21
Dr. Robert Kozelka, Board Monitor	Illinois 22
Dr. J. C. Cheney, Board Monitor	Utah 24
	25

The Full AIRs for the following resolutions can be found in the 2018 HOD Manual.

# **Resolution 101**

"Resolved, that the 2019-2021 AGD Strategic Plan be adopted, effective January 1, 2019, so that it reads:

# **Continuing Education**

Expand the breadth, depth and convenience of high quality continuing education opportunities for AGD members.

#### Goals

2 3

General dentists provide superior patient clinical outcomes.

**High-Level Strategy** 

To achieve these goals, AGD will do the following:

• **Continuing Education** - Deliver multi-channel continuing dental education through AGD, AGD Constituents or other AGD collaborative relationships.

o Provide a portfolio of online or web-based offerings to make CE accessible and affordable.

- Explore direct-to-member CE facilitated by AGD for instances where constituent-led CE is not viable.
- O Support constituent led CE including the development of efforts to provide high quality education.

• **Expanded educational recognition opportunities** – Create more opportunities to receive recognition for continuing education.

• **Micro-education** - AGD will explore developing micro-education to specifically address key clinical training meeting applicable licensure or AGD credentialing requirements.

Creates new initiatives to help AGD members lead more financially successful practices by providing practice leadership education and business support.

Goals

AGD members lead or work in successful practices with positive business and clinical outcomes. **High-Level Strategy** 

To achieve these goals, AGD will do the following:

**Practice Leadership and Support** 

 • **Improve Dental Practice Leadership** – Educate and train dental practice leaders on effective practice management and leadership techniques. Activities include, but are not limited to, the following.

• Create robust practice management education providing practice leaders with critical business and leadership resources.

• **Help Dental Students and Residents** – Lead efforts helping students and residents manage financial impact of their education through best practices.

 Improve Practice Performance – Make available national buying program or direct supplier negotiation providing discounts on practice supplies, equipment and other services. Activities include, but are not limited to, the following.

o Investigate developing an expanded portfolio of direct practice services (billing, EHR, legal) designed to provide AGD members with vetted, trusted and useful practice management and leadership assistance.

 Investigate direct negotiations with high quality dental practice suppliers to provide for cost savings or service improvements to AGD dentists and their practice.

# **Public and Policy Advocacy**

Improves the climate for practicing dentistry through patient and policy maker education on the value of oral care and general dentistry and by promoting AGD members' lifelong commitment to continuing education and successful patient outcomes.

8 comm 9 Goals

Patients will seek out AGD members or member led practices.

Policy makers will support policies encouraging viable general dentist practices and improving oral health.

# **High-Level Strategy**

To achieve these goals, AGD will do the following:

- **Increase Patients** Promoting efforts highlighting the clinical differentiation between AGD members and other oral care options.
- **Educate Policy Makers** Educate policy makers on the positive patient clinical outcomes of dentist led general dentistry practices.
- Advocate for the Dental Home Concept AGD will identify and implement strategies to educate policy makers and the public on the value of the dentist led Dental Home Concept.

## And be it further,

Resolved, that the Strategic Plan Synopsis be employed as the primary document for public dissemination and distribution.

# AGD 2018 Strategic Planning Text Narrative (This language will be utilized for public campaigns)

The Academy of General Dentistry (AGD) recognizes that current and future dentists will practice in a dynamic and evolving world. It is a priority of the AGD to prepare and support general dentists, regardless of their personal goals, career path or practice setting, to be successful within this environment. As a result, the AGD Strategic Plan is designed to outline high level goals and strategies to focus AGD efforts to support general dentistry.

The AGD Strategic Plan is inclusive of all individuals considering, practicing or supporting the practice of general dentistry and who share AGD members' commitment to high quality patient outcomes and a life-long commitment to learning. The following summarizes key elements of the AGD Strategic Plan.

The AGD Strategic Plan through its Vision and Mission reiterates members' Visionary commitment to *oral health and better lives because of the Academy of General Dentistry* through its continuing Mission of *advancing general dentistry and oral health through quality education and advocacy*.

This Vision and Mission will be achieved by ensuring the following:

- General dentists provide high quality patient clinical outcomes through high quality and accessible continuing education.
- General dentists provide lead or work in successful practices with positive business and clinical outcomes through AGD provided practice management, leadership education, practice support services.
- Patients will seek out general dentists or general dentist led practices and policy makers will support policies encouraging viable general dentist practices because of AGD advocacy, patient education and marketing efforts.

Resolved, that HOD Policy 2015:102-H-6, the 2015-2018 AGD Strategic Plan be rescinded, effective December 31, 2018:

2016-2018 Strategic Plan

Goal 1 - <u>Education</u>: Become the most valued resource of quality continuing dental education for general dentists at all stages of their career.

Strategy 1: Create a Scientific Session that will annually attract at least 25% of AGD members by the end of 2018.

Strategy 2: Facilitate education programs that promote members' success and advancement through all stages of their dental career using traditional as well as innovative, cutting edge methods.

Strategy 3: Partner with AGD constituents in the development and delivery of continuing education programs.

Strategy 4: Protect PACE and increase the number of PACE providers.

Goal 2 - <u>Advocacy:</u> Strengthen and protect the general dentistry profession and the oral health of the public.

Strategy 1: Represent the unique interests of general dentists in all advocacy arenas.

Strategy 2: Advocate on behalf of the general dentistry profession as relates to policy making, insurance, licensing, education, and all levels of government.

Strategy 3: Advocate on behalf of the public to ensure safe, best quality dentistry practices and appropriate access to care.

Strategy 4: Develop strong working relationships where appropriate with the AGD constituents, the ADA, and dental specialty organizations in addressing issues of common interest.

Strategy 5: Pursue instruments and resources to empower the AGD's advocacy agenda.

Goal 3 - Membership: Achieve a 25% increase in full-dues-equivalent members and student members by the end of 2018. Strategy 1: Utilize market and member research to determine which current and new member benefits will best serve AGD in attracting and retaining members. Strategy 2: Provide and promote products and services that meet the current and future needs of members and prospective members in all stages of practice and career paths. Strategy 3: Achieve at least a 10% increase in members' assessments of AGD value by the end of 2018. Strategy 4: Actively recruit dental student members and retain them when they become practicing dentists. Strategy 5: Attract non-member general dentists by promoting the value of a lifelong learning mindset. Goal 4 - Communications: Promote the AGD as an organization dedicated to advancing general dentistry through quality continuing education and advocacy. Strategy 1: Position the AGD as the leading source of information on oral health issues for general dentistry. Strategy 2: Create and promote a consistent AGD brand that is applied to all marketing vehicles and collateral materials. Strategy 3: Increase public awareness of the value AGD general dentists bring as gatekeepers to oral health. Strategy 4: Focus communication efforts on engaging members to advocate on behalf of general dentistry. Strategy 5: Enhance AGD publications and digital-based communication vehicles to effectively communicate to all AGD stakeholders. Goal 5 - Organizational Excellence: Ensure that the AGD is financially viable, functions efficiently in a cost-effective manner, and has a mutually supportive relationship with its constituents. Strategy 1: Ensure the fiscal soundness of AGD. Strategy 2: Improve the effectiveness and efficiency of AGD headquarters operations. Strategy 3: Streamline the AGD governance structure and operations. 

Strategy 4: Promote an organizational culture that best supports attainment of strategic goals and a healthy operating environment Strategy 5: Ensure the success of constituents in meeting the needs of grassroots members." **Resolution 102** "Resolved, that national AGD should contribute to each region with a dental school the sum of \$2000 for each school for the purpose of cultivating student activity and participation with that region. This will include dental education, social events, and integration with region's governance. And be it further, Resolved, that \$152,000 be allocated from the 2019 Contingency Fund (76 schools x \$2000." **Resolution 103** "Resolved, that effective starting with the 2020 fiscal year, the Academy of General Dentistry forward 100% of student member dues to the respective constituent or component that financially supports the Student Chapter." **Resolution 104** "Resolved, that effective starting with the 2020 fiscal year, the Academy of General Dentistry waive annual membership dues for two (2) faculty members for each Student Chapter." **Resolution 150** "Resolved, that the 2019 Budget with Revenues of \$14,839,221 and Expenses of \$14,839,221 netting out to 0 Net Loss from Operations with a Contingency of \$123,497 and capital budget of \$481,522 be approved. And be it further, Resolved, that House Policy 2017:150S4-H-11 be rescinded. 2017:150S4-H-11 "Resolved, that the 2018 budget with Net Income from Operations of \$0 pre-spending and \$0 post-spending and a capital budget of \$89,500 be approved. And be it further, resolved, that the budget be amended to include a \$3 increase in student

dues and be it further resolved that the contingency fund be reduced by \$34,420.

#### **Resolution 102** 1 2 3 "Resolved, that national AGD should contribute to each region with a dental school the 4 sum of \$2000 for each school for the purpose of cultivating student activity and 5 participation with that region. This will include dental education, social events, and 6 integration with region's governance. And be it further, 7 8 Resolved, that \$152,000 be allocated from the 2019 Contingency Fund (76 schools x \$2000." 9 10 REGION II DENTAL STUDENT SUBSIDY RESOLUTION FOR THE 2018 11 **GOVERNANCE MEETING** 12 13 Prepared by: Region Il NYSAGD (Dr. Brian Ciporin, President 14 15 Date of Report: September 20, 2018 16 17 **Staff Resources:** N/A 18 19 **Total Financial Cost:** \$152,000 + \$500 (Staff Cost = 10 hours @ \$50 per hour) 20 **Budget Ramifications:** 21 22 23 **Action/Timeline:** 2018 HOD 24 25 **How It Fits into the Strategic Plan:** 26 Strategic Plan: 27 28 29 Goal 5—Organizational Excellence: Ensure that the AGD is financially viable, functions efficiently in a cost-effective manner, and has a mutually supportive relationship with its constituents. Strategy 5: Ensure the success of constituents in meeting the needs of grassroots members. 30 31 **How it Fits into the Corporate Objectives:** 8. AGD Student Chapters - By December 31, 2018, have AGD Student Chapters registered at 85% of 32 33 US dental schools. G3, S1, S2, S4, S5 34 35 **Introduction:** 36 The AIR will help retain student membership in the AGD upon graduation. The AGD loses over 37 90% of our students when they graduate. 38 39 **Necessary Information:** 40 There are 66 dental schools in America and 10 dental schools in Canada. These schools 41 are the life blood of the future AGD. 42 43 What We Don't Know: 44 1) Is \$2000 enough funds? 45 • 2) Which dental schools to receive the funds? • 3)Should we only subsidize those schools that we have a relationship with? 46

1 **Pros and Cons:** 2 3 **Pros:** 4 What better way to use our resources than on our future members? 5 6 Cons: 7 • 1)The financial cost 8 • 2)The results are not guaranteed 9 3) May deplete the Contingency Fund 10 **Executive Director/CEO Recommendations:** 11 12 **From:** Max Moses 13 **Sent:** Monday, October 01, 2018 2:25 PM 14 To: Jennifer Goler <jennifer.goler@agd.org>; Brian Ciporin <dr.brianrc@gmail.com>; Christa 15 Ojeda < Christa. Ojeda @ AGD. org> 16 Subject: RE: Dr. Ciporin Resolution 17 18 This AIR is in compliance with the rules of the HOD for submitting resolutions, and I thus 19 recommend its transmittal to the HOD. However, given the significant financial cost as well as 20 the political ramifications of interacting with the various dental schools, I recommend to the 21 HOD that it refer this resolution to the appropriate agencies, including, but not limited to: the 22 Membership Council, the Budget & Finance Committee, and ultimately the Board. In addition, 23 it would be helpful if this concept was further developed through the use of a business 24 plan. Finally, it should be noted that the cost of this new endeavor would exceed the balance of 25 the 2019 contingency fund and require cuts in other programming. 26 27 Max G. Moses, JD, CPA, MBA 28 **Executive Director** 29 Academy of General Dentistry 30 560 W. Lake St., Sixth Floor 31 Chicago, IL 60661-6600 32 312.440.4303 Direct 33 888.AGD.DENT Main 34 888.243.7392 Exclusive AGD Leader Line 35 312.335.3438 Fax Max.Moses@agd.org 36 37 www.agd.org 38 39 40 41 **How It Fits into the Market Research:** 42 43 Does this conflict with the Constitution and Bylaws, an AGD HOD Policy or Board Policy? If yes, please provide the conflict and how you propose to resolve it: 44 45 No

46

**Responsible Staff Liaison & AGD member:** 

I	Dr. Brian Ciporin, NYSAGD President
2	AGD # 141490
3	646-327-0197
4	
5	
6	Suggested Council or Agencies to Complete Action:
7	Budget and Finance, Membership Council, and Strategic Planning Task Force
8	budget and Finance, Weinbership Council, and Strategie Flamming Task Force
	Suggested Councils on Agencies to be Involved in Collaboration.
9	Suggested Councils or Agencies to be Involved in Collaboration:
10	Budget and Finance, Membership Council, and Strategic Planing Task Force/Councils to
11	be informed before HOD meets
12	
13	
14	Chair Approval Email:
15	
16	Division Coordinator Review Email:
17	
18	
19	Board Liaison Review Email:
20	
21	CFO Review Email:
22	02 0 240 140 III 2244444
23	
24	From: Christa Ojeda
25	Sent: Tuesday, October 02, 2018 3:50 PM
26	<b>To:</b> Max Moses <max.moses@agd.org>; Jennifer Goler <jennifer.goler@agd.org>; Brian</jennifer.goler@agd.org></max.moses@agd.org>
27	Ciporin <dr.brianrc@gmail.com></dr.brianrc@gmail.com>
28	Subject: RE: Dr. Ciporin Resolution
29	
30	The current balance of the contingency fund in the budget being presented to the HOD is just
31	over \$123K. I concur with the sentiments of the Executive Director regarding this AIR.
32	
33	Also, the retention rate presented in this AIR is not that of the AGD as a whole. This AIR states
34	that "we lose over 90% of our students when they graduate". I checked with the Membership
35	Department and the retention rate for students has been between 40-46% over the last three
36	years, and over 64% for those that participated in the New Grad Kit promotion in FY2017.
37	
38	
39	Christa Ojeda, CPA
40	Chief Financial Officer
41	Academy of General Dentistry
42	560 W. Lake St., Sixth Floor
43	Chicago, IL 60661-6600
<del>4</del> 3	312.440.4315 (Direct)
45	888.AGD.DENT (Main)
46 47	christa.ojeda@agd.org

1	AIR Addendum – HOD Policy Change Request					
2						
3	A 49	4.33	<b>T</b> 7	ъ.	<b>D</b> 1.4	
4	Action:	Add	X	_ Revise	Delete	
5 6	Existing D	olicy to Revise	/Doloto			
7	None	oncy to Kevise	Delete.			
8	Hone					
9 10	Resolution	Presented for	Approv	al:		
11	"Resolved,	that national	AGD sh	ould contribut	e to each region with a dental sc	hool the
12	sum of @2	000 for each s	chool for	r the purpose o	f cultivating student activity and	d
13					e dental education, social events	, and
14	integration	with region's	govern	ance. And be i	t further,	
15				. 16 (1 0	010 C	1 00000
16	Resolved, t	that \$152,000	be alloca	ited from the 2	019 Contingency Fund (76 school	ols x \$2000."
17	Doloted Ev	riatina IIOD D	olioiog.			
18 19	None know	xisting HOD P	oncies:			
20	None Know	VII OI				
21	Are existin	g AGD policie	es inadeo	nuate or no lon	ger appropriate? Explain.	
22	No	81102 Ponor		1 01 110 1011	Ser mbb. observes ===b-m	
23						
24	For addition	ons/revisions,	how ofte	n should this p	olicy be reviewed? [Default is ex	very 5 years]
25	<b>Every five</b>	years				
26						
27	·				developing this submission?	
28				Goal 3 (Strate	,	1 4 . • .
29					-equivalent members to 27,000 a	
30 31					bers by the end of 2018; whereby f December 31, 2015.	y the
32	_				aduate members through 2018	
33					bers and retain them when they	become
34	practicing	•				
35						
36	Other Con	nments?				
37	From the 2	2018 Members	ship Valu	ie Survey:		
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39	-	_		_	through the AGD Student Chap	-
40	_	-			vly practicing dentist, the AGD i	increases the
41 42	conversion	rate of Stude	iit iviem	vers to AGD D	entist Member.	
42	Once a nos	sitive awarene	ss of gan	eral dentistry	has been created, specific tactics	designed to
44	_		_	•	ssion becomes important.	acsigned to
45			y	protect	pvi min	
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#### **Resolution 103** "Resolved, that effective starting with the 2020 fiscal year, the Academy of General Dentistry forward 100% of student member dues to the respective constituent or component that financially supports the Student Chapter." **AGD Financial Support of AGD Student Chapters Prepared by:** Texas AGD **Date of Report:** 8/15/2018 **Staff Resources: Total Financial Cost: Budget Ramifications: Action/Timeline:** Submission to the 2018 House of Delegates to become effective in fiscal year **How It Fits into the Strategic Plan:** Goal 1—Education: Become the most valued resource of quality dental continuing education for general dentists at all stages of their career. Strategy 2: Facilitate education programs that promote members' success and advancement through all stages of their dental career using traditional as well as innovative, cutting-edge methods. Strategy 3: Partner with AGD constituents in the development and delivery of continuing education programs. Through FellowTrack (FT) programs, the Texas AGD, Houston AGD, Dallas AGD, and San Antonio AGD already partner with AGD to deliver monthly continuing education programs throughout the school year to the respective AGD Student Chapters. This is the hands-on aspect of the partnership. Currently, the entire financial burden of running these programs falls to the state and local AGD levels. Through financial support of Student Chapters, AGD fully honors its commitment to partner with constituents and/or components to facilitate educational programs for student members. Student Chapters provide their members critical first-impression experiences that validate and solidify the perception that AGD is a trusted and vital

<u>Goal 3</u>—Membership: Increase the number of full-dues equivalent members to 27,000 and retain the existing marketshare of United States members by the end of 2018; whereby the 'existing marketshare' was the marketshare as of December 31, 2015.

resource for quality continuing education.

<u>Strategy 2:</u> Provide and promote products and services that meet the current and future needs of members and prospective members in all stages of practice and career paths

Student Chapters, at their foundation, represent an AGD product/service that is geared toward meeting the needs of students at the pre-professional stage of their career path. Helping to financially support them is also helping to "provide and promote" them.
 Strategy 3: Retain at least 50 percent of new graduate members through 2018.
 Strategy 4: Actively recruit dental student members and retain them when they become practicing dentists.

• AGD Student Chapters are the best marketing opportunity we have for recruiting dental student members and retaining them when they become practicing dentists. Student Chapter experiences are personal, and they provide an ongoing and meaningful chance to share AGD core values with students in a way that no other AGD program or publication can. Student Chapters give us the best chance for retention of new graduate members (whether in 2018 or beyond). That is why it is imperative that AGD provide financial support for these programs at the national level.

<u>Goal 5</u>—Organizational Excellence: Ensure that the AGD is financially viable, functions efficiently in a cost-effective manner, and has a mutually supportive relationship with its constituents.

<u>Strategy 5</u>: Ensure the success of constituents in meeting the needs of grassroots members.

• Partnering with constituents and/or components to financially support Student Chapters is instrumental to building a mutually supportive relationship between national AGD and the state and local levels. In this case, all the parties share in the financial burden of running the Student Chapters—not just the constituents and/or components. Meanwhile, the state and local levels remain heavily involved in the "boots on the ground" operations that keep the Chapters going. With all the organizational levels involved, we work together to ensure the success of the local, grassroots members (students) by meeting them where they are during a critical stage in their career path.

# **How it Fits into the Corporate Objectives:**

<u>Membership</u> – Increase the number of "full dues-equivalent" members to 27,000 by the end of 2018; increase existing market share of US members based on market share as of 12/31/15; <u>retain at least 50% of 2015 new graduate members as of 12/31/18</u>; increase Student members by 5% over 12/31/17 number.

<u>AGD Student Chapters</u> – By December 31, 2018, have AGD Student Chapters registered at 85% of US dental schools. G3, S1, S2, S4, S5

• Student Chapters are incubators for future AGD full dues-paying members. Capturing them as students gives us the best chance of holding on to them through their careers. National funding of Student Chapters is a tangible incentive to create and grow Student Chapters, to spread the AGD message to new generations of dentists, and to ensure the viability of the organization's future.

#### **Introduction:**

The strength of the Academy of General Dentistry tomorrow depends upon the student members of today. AGD's investment in this membership category is imperative to sustaining and growing the organization and to advancing its mission within the realms of advocacy and lifelong learning.

AGD Student Chapters are incubators. They serve as the critical first point of engagement for members in their journey from student to new dentist to AGD Fellow, Master, and Life Long Service Recognition recipient. They present high-touch, ongoing opportunities to share the AGD message, create organizational buy-in and even develop future leaders. *No other AGD program offers this level of attention to students or provides the same potential for membership recruitment beyond dental school.* 

Currently, the burden of support for AGD Student Chapters rests solely on constituents and/or components. They volunteer time and energy to develop successful programs. They are resourceful in finding speakers who often do not require honoraria. They pay for any marketing efforts and for meals during meetings. They often cover the cost of student membership dues to stimulate maximum AGD exposure among an impressionable population.

In 2017, three Texas components invested a total of \$16,770.23 in support of AGD Student Chapters (\$5,970.26 for Dallas, \$9,233.68 for Houston, and \$1,566.29 for San Antonio). In 2018, Texas AGD invested a total of \$6000 in support of AGD Student Chapters. We believe that AGD should share in this investment in the future of the organization. Whether or not the local component or constituent pays for the national student member dues, we feel it is appropriate that the student dues collected by AGD be forwarded to the supporting component or constituent to help offset the cost of running the respective Student Chapter. It would be a tangible commitment by AGD to financially support Student Chapters, to share in responsibility for future member recruitment, and to lay a foundation for the future. It's the right thing to do.

#### **Necessary Information:**

#### What We Don't Know:

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We don't know the total cost to AGD for administrative support of each student membership.
We don't know how to consistently and effectively recruit new members once students

We don't know how to consistently and effectively recruit new members once students graduate from dental school. If they didn't receive that message during their school days, the opportunity is largely lost.
 We don't know how many members of AGD Student Chapters will maintain AGD

membership as new dentists. On the other hand, there is no guarantee that dental students who were *not* involved with AGD Student Chapters will go on to become AGD members, either. It is reasonable to assume that early exposure to the AGD culture is more likely than not to lead to AGD membership. We must fully take advantage of this "captive audience" while they are in dental school.

#### **Pros and Cons:**

**Pros:** 

- Student Chapters are a tremendous marketing opportunity for AGD member recruitment and development.
- Growth of Student Chapters helps safeguard the future of AGD by growing new members.
- National funding of Student Chapters is a tangible incentive to grow Student Chapters across the nation.
- National funding of Student Chapters promises to relieve, at least in part, the financial operational burden felt by constituents and components engaged in running the chapters.

Cons:

• National funding of Student Chapters represents a substantial, but crucial, marketing investment for the AGD.

#### **Executive Director/CEO Recommendations:**

**From:** Max Moses

**Sent:** Tuesday, October 16, 2018 3:15 PM

**To:** Jennifer Goler <jennifer.goler@agd.org>

**Cc:** Daniel Buksa <daniel.buksa@agd.org>; Thomas Killam <Thomas.Killam@AGD.org>;

22 Christa Ojeda < Christa. Ojeda @ AGD. org>

Subject: Executive Director Comments for Texas AIR to HOD re: student dues

The Texas AGD has brought to the House of Delegates a proposal to address a very important facet of AGD membership: Dental Students. While I applaud the Texas AGD for starting the conversation, I believe that this AIR is premature.

There is a great deal of information that the HOD needs to know before adopting such a "sea change" approach as suggested by the Texas AGD. For example, how does support for student member chapters vary among the constituents? What are the metrics of success? How would the constituents improve student recruitment and retention? How will this transfer of funds improve the conversion rate of students to active members? What standardization of approach is required? How will AGD replace the over \$100,000 in student dues and still provide over \$300,000 in services? Fundamental questions such as what will the \$100,000+ be used for by the constituents? How will differences among the capabilities of constituents that have student chapters be equalized?

We collectively need to identify gaps, crossovers of benefits, duplication of efforts, etc. to identify common denominators among the student chapters to try to determine what should be replicated because it is successful and what should be discouraged because it isn't effective.

As is clear from the chart below, It requires over \$58 to support each student collectively over \$300,000 – significantly more than the \$20 in dues that they pay. This is in addition to what constituents and components are spending on behalf of the student chapters.

Cost of Student Support			
Function/Budgeted Item	Amount		
Funding HOD reps	\$3,000		
ASDA Sponsorship	\$36,160		
ASDA Booth/Exhibit	\$8,405		
Recruitment	\$25,400		
Leadership at ASDA meeting	\$1,575		
Lunch/Learn const scholarship	\$6,000		
Student chapter of year award	\$4,000		
Publications	\$146,740		
Direct Student Chapter staffing	\$69,560		
Scientific Session direct cost to register	\$1,425		
Webinar direct cost to register	\$590		
ePoster costs	\$8,500		
RAC winners	\$2,000		
Total Annual Direct Student Support	\$313,355		
# of students	\$5,336		
Per Student Direct Cost	\$58.72		
St. dark Bura Barray	Å4.05.700		
Student Dues Revenue	\$106,720		
Less: Annual Support Costs	\$313,355		
Student Annual Subsidy	(\$206,635)		
Indirect Cost:			
Scientific Sessions deferred revenue \$12			
Webinar deferred revenue \$4,4			

In conclusion, this is very premature and requires a great deal more thought and study.

6 Max G. Moses, JD, CPA, MBA

7 Executive Director

- 8 Academy of General Dentistry
- 9 560 W. Lake St., Sixth Floor
- 10 Chicago, IL 60661-6600
- 11 312.440.4303 Direct
- 12 888.AGD.DENT Main
- 13 888.243.7392 Exclusive AGD Leader Line
- 14 312.335.3438 Fax
- 15 Max.Moses@agd.org
- 16 <u>www.agd.org</u>

17 18

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1	How It Fits into the Market Research:
2	
3	Does this conflict with the Constitution and Bylaws, an AGD HOD Policy or Board Policy?
4	If yes, please provide the conflict and how you propose to resolve it:
5	• No
6	
7	Responsible Staff Liaison & AGD member:
8	Include all the staff who will be involved in the project
9	
10	Conservated Conservation Associate Conservations
11	Suggested Council or Agencies to Complete Action:
12	Membership Council Finance Committee
13	Finance Committee
14 15	Suggested Councils on Agencies to be Involved in Collaboration.
15 16	Suggested Councils or Agencies to be Involved in Collaboration:  Include all the councils who will be involved in the project and information on when the staff
10 17	liaisons/Council Chairs were notified
18	uaisons/Council Chairs were notified
19	
20	Chair Approval Email:
21	• N/A
22	- 17/11
23	Division Coordinator Review Email:
24	• N/A
25	- V
26	Board Liaison Review Email:
27	• N/A
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29	CFO Review Email:
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1		AIR A	ddendum – HOD Po	icy Change Request	
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4	Action:	Add	Revise	Delete	_
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6	<b>.</b>				
7	Existing Po	olicy to Revise/Delo	ete:		
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10	Resolution	Presented for App	proval:		
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15	D.1.4.1E	'a' a HOD Dal'a'			
16	Related Ex	xisting HOD Policion	es:		
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23	Are existin	ig AGD policies ina	adequate or no longe	r appropriate? Explain.	
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34	Any docum	nentation or literat	ture considered in de	veloping this submission	9
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37					
36 37 38					
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40	Other Con	nments?			
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# "Resolved, that effective starting with the 2020 fiscal year, the Academy of General Dentistry waive annual membership dues for two (2) faculty members for each Student Chapter." AGD Membership Dues Waiver for AGD Student Chapter Faculty Advisors/Leaders Prepared by: Texas AGD Date of Report: 8/15/2018 Staff Resources: Total Financial Cost: TBD by AGD Staff Budget Ramifications: TBD by AGD Staff

**Resolution 104** 

## **How It Fits into the Strategic Plan:**

<u>Goal 1</u>—Education: Become the most valued resource of quality dental continuing education for general dentists at all stages of their career.

Action/Timeline: Submission to the 2018 House of Delegates to become effective in fiscal year

<u>Strategy 2</u>: Facilitate education programs that promote members' success and advancement through all stages of their dental career using traditional as well as innovative, cutting-edge methods.

<u>Strategy 3</u>: Partner with AGD constituents in the development and delivery of continuing education programs.

Through support of Student Chapters, AGD fully honors its commitment to partner with constituents and/or components to facilitate educational programs for student members. Student Chapters and their faculty advisors/leaders provide their members critical first-impression experiences that validate and solidify the perception that AGD is a trusted and vital resource for quality continuing education.

<u>Goal 3</u>—Membership: Increase the number of full-dues equivalent members to 27,000 and retain the existing marketshare of United States members by the end of 2018; whereby the 'existing marketshare' was the marketshare as of December 31, 2015.

<u>Strategy 2:</u> Provide and promote products and services that meet the current and future needs of members and prospective members in all stages of practice and career paths

• Student Chapters, at their foundation, represent an AGD product/service that is geared toward meeting the needs of students at the pre-professional stage of their career path. Helping to support their faculty leadership is also helping to "provide and promote" them.

Strategy 3: Retain at least 50 percent of new graduate members through 2018.

<u>Strategy 4</u>: Actively recruit dental student members and retain them when they become practicing dentists.

• AGD Student Chapters are the best marketing opportunity we have for recruiting dental student members and retaining them when they become practicing dentists. Student Chapter experiences are personal, and they provide an ongoing and meaningful chance to share AGD core values with students in a way that no other AGD program or publication can. Student Chapters give us the best chance for retention of new graduate members (whether in 2018 or beyond). That is why it is imperative that AGD provide support for these programs at the national level.

<u>Goal 5</u>—Organizational Excellence: Ensure that the AGD is financially viable, functions efficiently in a cost-effective manner, and has a mutually supportive relationship with its constituents.

Strategy 5: Ensure the success of constituents in meeting the needs of grassroots members.

• Partnering with constituents and/or components to support faculty leadership within Student Chapters is instrumental to building a mutually supportive relationship between national AGD and the state and local levels. We work together to ensure the success of the local, grassroots members (students) by meeting them where they are during a critical stage in their career path.

# **How it Fits into the Corporate Objectives:**

<u>Membership</u> – Increase the number of "full dues-equivalent" members to 27,000 by the end of 2018; increase existing market share of US members based on market share as of 12/31/15; <u>retain at least 50% of 2015 new graduate members as of 12/31/18; increase Student members by 5% over 12/31/17 number.</u>

<u>AGD Student Chapters</u> – By December 31, 2018, have AGD Student Chapters registered at 85% of US dental schools. G3, S1, S2, S4, S5

Student Chapters are incubators for future AGD full dues-paying members. Capturing them as students gives us the best chance of holding on to them through their careers. Promoting AGD faculty leadership for Student Chapters is an incentive to create and grow Student Chapters, to spread the AGD message to new generations of dentists, and to ensure the viability of the organization's future.

#### **Introduction:**

AGD Student Chapter success is largely dependent on strong faculty leadership and mentorship. Ensuring that we have the best academic leaders in position to help facilitate Student Chapters is foundational to continued growth in student membership and ultimately to the future of our organization. It is well known that most faculty members are compensated at a much lower rate than private practitioners. Because of this, membership in organized dentistry among faculty members is generally low. In order to recruit and retain faculty involvement in Student Chapters, Texas AGD and its respective local components have committed to waive membership dues for two (2) faculty members who are dedicated to AGD Student Chapters at each school. We believe national AGD should also waive national AGD membership dues for these faculty members during the year(s) in which they serve as Student Chapter advisors/leaders. Having enthusiastic AGD members within schools will only strengthen the position of Student Chapters

across the country and help guarantee that dental students are introduced to the AGD culture as soon as possible in their professional journey.

1 2

# **Necessary Information:**

• Waiving annual membership dues for two (2) faculty member leaders/advisors per AGD Student Chapter is a strategy for increasing AGD faculty involvement in schools. It is an indirect opportunity for AGD to support Student Chapters. The presence of enthusiastic and influential AGD members within schools will only strengthen the position of Student Chapters across the country and help guarantee that dental students are introduced to AGD core values early in their careers. Therefore, any part of AGD's Strategic Plan or Corporate Objectives that applies to strengthening AGD Student Chapters would also apply to this resolution.

#### What We Don't Know:

- We do not know the total budgetary impact of this resolution. (How many student chapters are in existence now? How many will be created in the future? Etc., etc. . . .)
- We do not know how to quantitatively measure whether AGD faculty members are effective in their roles as Student Chapter advisors/leaders.
- We do not know how to establish safeguards that might keep AGD faculty members from taking advantage of the dues waiver without performing their roles as advisors/leaders to the best of their ability.

#### **Pros and Cons:**

#### **Pros:**

- Waiving annual membership dues for two (2) Student Chapter faculty advisors/leaders effectively removes a steep barrier to faculty involvement in AGD.
- AGD faculty advisors/leaders for Student Chapters may prove to be influential mentors to students. They serve in a trusted position and can personally share their own feelings about why AGD membership is valuable throughout one's career.
- Developing strong faculty advisors/leaders for Student Chapters can help to stabilize these chapters and provide continuity across multiple years.
- Any strategy that strengthens AGD Student Chapters ultimately strengthens the AGD due
  to the membership recruiting potential inherent these chapters. Development of
  enthusiastic AGD faculty advisors/leaders will ultimately strengthen the Student
  Chapters.

#### Cons:

 Waiving annual national membership dues for two (2) faculty member leaders per Student Chapter represents a substantial, but important, marketing investment for the AGD.

#### **Executive Director/CEO Recommendations:**

- **From:** Max Moses
- **Sent:** Tuesday, October 16, 2018 4:05 PM
- **To:** Jennifer Goler < jennifer.goler@agd.org>

1 **Cc:** Daniel Buksa <daniel.buksa@agd.org>; Thomas Killam <Thomas.Killam@AGD.org>; Christa Ojeda <Christa.Ojeda@AGD.org>

**Subject:** AIR re: Dues Waiver for Faculty at Student Chapter

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Texas AGD recognizes the importance of students and student chapters to the long term growth of the AGD. The AIR they have submitted to waive annual membership dues for two faculty members for each student chapter is an interesting strategy. Several questions need to be addressed in order to understand how this proposal would be implemented. For example:

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- a. How are the two faculty members selected?
- b. If more than two faculty members involved with a Student Chapter, who determines the odd person out?
- c. Do the faculty members need to be general dentists?
- d. Can the faulty members be "adjunct" or part-time faculty? Should they be full-time faculty?
- e. Are there specific expectations and standards of activity for a student chapter faculty member?
- f. How are they evaluated as "earning" their membership fee waiver?
- g. Are constituent and/or component dues waived as well?
- h. Will a 1099-MISC need to be issued to include as potential taxable income the amount "earned" by the faculty member due to the waiver of the dues?
- i. What does success look like? E.G., will more students choose general dentistry as their career path? Will more students remain members of AGD at Rate Level 5? Will more apply for a GPR or AEGD residency program?
- j. Will a separate, lower dues rate for all full-time faculty at dental schools increase overall membership in the AGD sufficiently to make up for revenue loss from those who currently pay full dues?

28 29

- 30 Max G. Moses, JD, CPA, MBA
- 31 Executive Director
- 32 Academy of General Dentistry
- 33 560 W. Lake St., Sixth Floor
- 34 Chicago, IL 60661-6600
- 35 312.440.4303 Direct
- 36 888.AGD.DENT Main
- 37 888.243.7392 Exclusive AGD Leader Line
- 38 312.335.3438 Fax
- 39 Max.Moses@agd.org
- 40 www.agd.org

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**How It Fits into the Market Research:** 

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Does this conflict with the Constitution and Bylaws, an AGD HOD Policy or Board Policy? If yes, please provide the conflict and how you propose to resolve it:

1	
2	Responsible Staff Liaison & AGD member:
3	Include all the staff who will be involved in the project
4	
5	
6	Suggested Council or Agencies to Complete Action:
7	Insert the council name here
8	
9	Suggested Councils or Agencies to be Involved in Collaboration:
10	Include all the councils who will be involved in the project and information on when the staff
11	liaisons/Council Chairs were notified
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14	Chair Approval Email:
15	• N/A
16	
17	Division Coordinator Review Email:
18	• N/A
19	
20	Board Liaison Review Email:
21	• N/A
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23	CFO Review Email:
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4	Action:	Add	Revise	Delete	_	
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7 8	Existing Po	olicy to Revise/Del	ete:			
9						
10	Resolution	Presented for Ap	proval:			
11						
12 13 14						
13 14						
15						
16	Related Ex	isting HOD Polici	es:			
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18 19						
20 21 22						
22						
23	Are existin	g AGD policies in	adequate or no longe	r appropriate? Explain.		
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25 26 27 28						
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30 31	For addition	ne/rovisions how	often should this no	icy be reviewed? [Defaul	t is overy 5 veers	
32	roi addin	JIIS/TEVISIOIIS, IIOW	often should this pol	icy be reviewed: [Defaul	t is every 5 years]	
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34	Any docun	nentation or litera	ture considered in d	eveloping this submission	?	
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36 37 38						
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40	Other Con	nments?				
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+3 14						
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#### 1 **Communications Council 2018 Report** 2 3 "The Communications Council shall consist of 10 members, including the chairperson. Initially, 4 this council shall consist of 10 members, three members serving three (3) years; three members 5 serving two (2) years; and four members serving one (1) year. 6 7 It shall be the duty of the council: 8 9 To ensure that the AGD has a comprehensive communications strategy in place to inform each 10 of its key stakeholders; 11 To ensure that the AGD utilizes current and new media vehicles to create integrated campaigns 12 that communicate AGD messages in a cohesive fashion to execute that strategy; 13 To manage, conduct, and disseminate market research in support of organizational decision 14 making; 15 To efficiently use all communication vehicles and applications to communicate the AGD brand; 16 To oversee and facilitate technology innovations and growth throughout all areas of the AGD; To oversee the AGD's print and online content, both to the profession and to the public; 17 18 To work with media representatives, constituent leaders, and members of the health care 19 community to promote the AGD and disseminate oral health information to the public; 20 To act as consultants of communications-related activities, such as advertising, policies, 21 proposals, partnerships, contracts, and agreements." 22 23 **Publications** 24 25 **AGD Impact** 26 27 2018 Highlights 28 With AGD Impact, we have continued to provide a mix of news that is relevant to the profession 29 and stories that highlight the unique abilities of our members. We constantly strive to bring in 30 new voices (as evidenced by five new Member Spotlights) and seek out new topics on which to 31 base well-researched and thought-provoking articles. 32 33 Member engagement efforts have showcased the varied and diverse voices of our members: 34 Sound Off and Member Spotlight have featured over a dozen voices 35 Opinions in Sound Off: Scott Frederick, DDS; Mai-Ly Duong, DMD, FAGD; Steven A. 36 Ghareeb, DDS, FAGD; Angela Toy, DDS, FAGD; Emily Hobart, DMD; Randy Huffines, DDS, 37 FRCS(ED); Marie M. Jackson, DMD; Partha Mukherji, DDS, FAGD; Adam Hodges, DDS 38 Dentists featured in Member Spotlight: Omowumi Ladipo, DDS, FAGD; Jarred Donald, DDS, 39 FAGD; Kay Jordan, DDS, MAGD; Aldo Miranda-Collazo, DMD; Quan Ma, DMD 40 41 New contributors so far this year include: Pamela Marzban, DDS, FAGD, LVIF, dentist with emergency preparedness experience who

- 42
- 43 provides cosmetic services to patients in Burke, Fairfax, Fairfax Station and the surrounding
- 44 Northern Virginia communities
- Lisa Knowles, DDS, international speaker and writer who focuses on leadership and business 45
- 46 communication development
- Jamie Toop, DDS, dentist in Las Vegas and current faculty member for the PDS Institute 47
- 48 Michal Christine Escobar, Chicago-based freelance writer

1 2 The Editorial team is working to coordinate collaborations with the American College of 3 Dentists and representatives from Health Resources and Services Administration.

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#### General Dentistry

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#### 2017 Submissions

In 2017, we received 222 manuscripts and accepted 77 for publication, placing our rejection rate at 65%. As of April 19, 2018, we have received 70 manuscripts. Of the 48 that have completed the peer review process, 14 were accepted, placing the acceptance rate at 29.2% for 2018. (This rate will likely rise as revised manuscripts are accepted: The rate does not include provisionally accepted manuscripts.)

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The bulk of submissions continue to come from Brazil (50.6%), the United States (28.6%), and India (11.0%), while various other countries represent a small proportion of manuscripts submitted (9.8%). Our total acceptance rate from 2014 to present is 41.2%.

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#### **Columnist Recruitment Efforts**

We have recruited two new columnists for our Oral Diagnosis column, Dr. Galal Omami, whose first column appeared in the March/April 2018 issue, and Dr. Tanya M. Gibson, who is scheduled to contribute to the July/August issue.

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Our efforts to recruit a new Ethics columnist are ongoing. We have had several candidates, but none has passed the peer-review process for columns. In the meantime, our respected former columnist, Dr. Toni Roucka, has submitted some columns on the subject.

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#### **2018 Collaboration Update**

In 2018, General Dentistry will partner with the American Academy of Pediatric Dentistry to produce a special issue emphasizing pediatric dentistry. The special issue will run in the November/December 2018 issue. We worked with Dr. Paul Casamassimo, AAPD's Chief Policy Officer, to compile a list of topics and recruit authors.

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#### General Dentistry recognized for excellence

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General Dentistry was recognized by the Association Media & Publishing EXCEL Award for its Feature Article category for "Nerve damage in dentistry," by M. Anthony Pogrel, DDS, MD, published in the March/April 2017 issue. General Dentistry was also awarded an EXCEL in the **Design Excellence** category, recognizing the journal's "use of images and design that draws the reader into the text" for the complete run of 2017 issues.

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# **Advertising**

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- AGD has created a new Corporate Relations department which will be coordinating sponsorship, advertising, exhibits, AGD Exclusive Benefits and other non-dues revenue programs. This will allow a more coordinated approach to managing and enhancing relationships with corporations who seek to reach AGD members. AGD ended its relationship with Association Management Center in 2017 and to date, the Communications team has continued to provide outreach and
- 47 48 fulfillment to generate revenue and advertising commitments.

# 1 2

## Advertising Revenue

	2017		2018 (as of 9/13/1	8)
	Goal	Actual	Goal	Actual
General Dentist			\$50,000	\$43,778
ry	\$88,000	\$21,147		
AGD Impact	\$195,000	\$84,537	\$150,000	\$100,338
Digital Channels	\$57,000	\$16,400	\$44,000	\$27,060
Annual Meeting Program	\$10,000	\$14,745	\$10,000	\$8,043

This includes commitments through the end of 2018.

Advertising was managed by AGD's Communication team until August 2018. Our new dedicated advertising representative through AGD's new Corporate Sponsorship team is having a positive impact on our advertising sales. Adverting commitments for the last four months have increased tremendously. Similarly, we are experiencing strong growth in advertising on our digital channels.

Goals for 2019 have been set at \$95,000 for *AGD Impact*, \$45,000 for *General Dentistry* and \$30,000 for AGD's online channels.

# **Other Non-Dues Revenue Reporting**

The Communications Department also supports the sale of publications subscriptions and mailing lists sales. The below table outlines these non-due revenue figures.

	2017		2018 Goals	2018 Actuals (as of 7/1/18)
	Goal	Actual	Goal	Actual
General Dentistry	\$46,020	\$45,520	\$54,520	\$32,792
AGD Impact	\$6,000	\$9,145	\$12,800	\$5,614
Mailing List Rentals	\$27,950	\$30,147	\$30,000	\$12,700

#### **AGD Website**

AGD launched its redesigned, mobile-friendly website one year ago. Since that time, AGD.org received the 2017 Platinum eHealth Leadership Award for Best Internet Site, and was a top five finalist for the Sitefinity of the Year award in the association category. AGD.org also received the Associations Standards of Excellence Award from the Web Marketing Association as part of its 2018 Web Awards Program.

The following is an update on its performance, feedback, updates made and long-term planning:

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# **Key Performance Indicators (2017 versus 2018):**

- 5 12% increase in new visitors to the website.
- 6 10% increase in returning visitors to the site.
- 7 32% of those visiting the Join AGD page are doing so from a mobile device.
- 8 Due to mobile friendliness of the site, we've seen the following increase in traffic from social
- 9 media channels:
- 10 100% increase in referrals from Instagram Stories
- 11 622% increase in referral from Instagram
- 12 486% increase in referrals from paid search advertisements

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# 14 **Top pages visited:**

- 15 Manage my CE
- 16 View Award Transcript
- 17 Continuing Education and Events
- 18 Member Center
- 19 CE Submission Guidelines

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## **Completed Updates/Enhancements**

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Since January, the following improvements/enhancements have been made to agd.org:

Request for Enhancement	Resulting Change
Create a different experience for the member upon	When an AGD member logs in, the website
login.	recognizes this and automatically drops them
	down the home page to the member benefits
	bubbles.
Make the member benefit bubbles clickable to	The member benefit bubbles are now clickable
improve the experience.	within the bubble and within the description on
	the right size of the bubbles.
Small enhancements for a better user experience.	PDF documents now open in a new browser tab to
	keep the agd.org website open and available for
	navigation.
Provide additional advertising space with the	AGD set up an advertising account with Google
ability to provide data back to advertisers.	to enable the tracking of advertisements. A
	module was created by Americaneagle to house
	advertisements and correlate to the Google
	analytics.
Create a better format to the AGD blog.	A new format has been deployed that includes a
	new design, better content tagging and a dedicated
	page for each author.

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#### FAGD/MAGD Public Awareness Campaign

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The Communications and Marketing teams are working collaboratively on a campaign to raise awareness to the public of AGD's Fellows and Masters. The campaign includes communications and marketing tools that can be used by these members to promote the value of these awards, including resources and instructions on how to use these to promote the work online. The

campaign will have a special page within the AGD.org website for these tools. The initial aspects of the campaign will be available in September 2018.

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# **KnowYourTeeth.com Redesign Proposal**

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6 KnowYourTeeth.com has not be redesigned since its launch in 2008 – with the exception of the 7 Find an AGD Dentist tool. Content has not been refreshed since 2012. AGD's communications, 8 marketing and information technology departments are proposing a redesign of

9 KnowYourTeeth.com to be completed by the end of 2018.

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# **Objective**

- 12 Redesign KnowYourTeeth.com to provide a modern, up-to-date resource for consumer/patient
- 13 facing information and to increase the public awareness of the AGD Dentist. The purpose of this

14 objective is to:

- 15 Enhance and curate updated content for patients/consumers that will be shareable across social
- 16 channels for our member dentist to use as a resource for their patients.
- 17 Increase the public's awareness of the AGD Dentist, including the understanding of AGD's
- 18 Fellowship and Mastership awards.

19 Create cohesive branding across consumer/public materials to align with AGD's new voice and

20 look.

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## FAGD/MAGD/LLSR Communities on AGD Connect

The Communications, Marketing and Education teams are working on creating specific communities online to allow Fellows, Masters and LLSRs to have specific forums through AGD Connect where they can have discussions about their work, trainings and challenges. This will

26 rollout in September 2018.

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#### **Social Media Update**

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As of June 2018, AGD has over 90,000 followers across Facebook, Twitter, Instagram, LinkedIn and YouTube. AGD realized a 3.11 percent increase in followers over year-end 2017 (87,486). These numbers are only a small part of the growth we've achieved. The implementation of the brand and website as well as the use of video and public relations clips has resulted in an increase in constituent and member/nonmember engagement and shared content.

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The Communications Council approved the developments of a Social Media Task Force.

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# AGD Blog/Daily Grind

AGD sponsors a dental blog entitled *The Daily Grind*, which is written by various AGD members. The blog is updated two to three times per week and typically describes issues that affect the everyday personal and professional lives of general dentists. AGD published 16 blogs in 2018 and has added two contributors – Dr. Conaway and Sonal Kumar, a second year dental student.

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The Daily Grind was transitioned to the agd.org domain during the development of the new website and we've continued to see readership remain the same. After reviewing the format the current blog and speaking with our team of bloggers, the AGD Communications team reached out to AmericanEagle.com to discuss redesigning *The Daily Grind* to provide our readers with a more traditional blog experience. AGD has rolled out a new design and our blog readers are experiencing a newly designed masthead that will differentiate the blog from other website pages, a more visual, colorful layout and individual author pages that contain a photo, bio and full listing of that author's articles.

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# **Podcast Update**

The podcast had more than 1,800 plays on SoundCloud since our move to the platform in May 2017, with an audience mostly located in the United States, Canada and United Kingdom.

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- January: "How to Solve the Internet Marketing Puzzle," with Mr. Scott Spencer
- 11 February: "Jumpstart a Dental Speaking Career," with Ms. Vanessa Emerson
- March: "An Overview of 3-D Printing for the General Dentist," with Dr. August de Oliveria
- 13 April: "Reflecting on Oral Cancer: Finding Purpose Through Practice," with Dr. Jeff Blackburn
- 14 May: "Laser Treatment of Periodontal Disease," with Dr. Todd McCracken
- 15 June: "Facial Esthetics: Let's Talk About Lips," with Dr. Louis Malcmacher
- 16 July: "Your Brand, Your Image, Your Success," with Ms. Janice Hurley
- 17 August: Scheduled dental industry podcast with Ms. Bonnie Hixon
- 18 September: Scheduled diabetes podcast with Mr. Tom Viola.

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# **Public Relations**

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# 2018 Public Relations Tactics

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- 24 Continue use of the Digital Demand Mapping outcomes to Understand Conversations Online
- 25 and Print
- 26 Continue to draw information from both the consumer survey and the readership study on
- 27 perceptions and interest related to general dentists
- Focus is on four key areas/campaign planning:
- 29 Establishing your dental home
- 30 Oral cancer
- 31 Oral health combined with overall health (Oral and Systemic Health Connection)
- 32 Industry policies
- Continue to utilize our spokespeople to talk about oral health/additional training for new
- 34 spokespeople.
- 35 Prepare media tools that can be utilized by AGD constituents. (Example: B-roll for video,
- 36 photography of members in action, etc.)
- Work to strengthen brand awareness on local levels through the dissemination of supporting
- 38 national content.
- 39 Develop and Align public relations efforts with content strategy.

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## Spokespeople

Training for new spokespeople will take place in 2018.

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#### Conclusion

- The council is honored to oversee the management of the AGD's communications programs,
- both to the profession and to the public. The efforts of the entire council reflect the common goal
- of moving the AGD forward in all areas of communication.

1	Communications Council Members:
2	
3	Colleen DeLacy, DDS, FAGD, Chair
4	Mohammed Attia, DDS, MAGD
5	Frank Conaway, DMD, MAGD
6	Otice Z. Helmer, DDS, MAGD
7	William Lee, DMD, MAGD
8	Elizabeth Minard, DDS
9	Sireesha Penumetcha, DDS, MAGD
10	Demarcio Reed, DMD, FAGD
11	Timothy Tinker, DMD
12	Marc Worob, DDS, FAGD
13	Timothy Kosinski, DDS, MAGD
14	Roger Winland, DDS, MS, MAGD
15	J.C. Cheney, DMD
16	Anita Rathee, DDS, FAGD
17	Scott Cayouette, DMD, FAGD, Consultant
18	
19	Responsible Council/Committee Chair & Staff Liaisons
20	
21	Colleen DeLacy
22	Communications Chair
23	810.531.7398
24	kcdelacy@gmail.com
25	
26	Kristin Gover
27	Director of Communications
28	312.440.4116
29	Kristin.gover@agd.org
30 31	Dognaatfully submitted.
32	Respectfully submitted:
33	Chair
34	From: Colleen DeLacy [mailto:colleendelacy@gmail.com]
35	Sent: Sunday, September 16, 2018 9:32 PM
36	To: Kristin Gover < Kristin.Gover@AGD.org>
37	Cc: Roger Winland <105156.3607@compuserve.com>; Jess <driccheney@aol.com>;</driccheney@aol.com>
38	ratheedds@gmail.com; Thomas Killam <thomas.killam@agd.org></thomas.killam@agd.org>
39	Subject: Re: REVISION TO COMMUNICATIONS COUNCIL REPORT
40	I approve, thank you
41	Colleen B. DeLacy, DDS, FAGD
42	Michigan AGD Immediate Past President
43	AGD Communications Council Chair
44	TOD COMMINATORS COUNTY CAME
45	Sent from my iPhone
46	
47	Division Coordinator
48	

1 **From:** Anita Rathee [mailto:ratheedds@gmail.com] 2 Sent: Tuesday, September 18, 2018 3:15 AM 3 **To:** Kristin Gover < Kristin.Gover@AGD.org> 4 Cc: Colleen DeLacy <colleendelacy@gmail.com>: Roger Winland 5 <105156.3607@compuserve.com>; Jess <driccheney@aol.com>; Thomas Killam 6 <Thomas.Killam@AGD.org> 7 Subject: Re: REVISION TO COMMUNICATIONS COUNCIL REPORT 8 9 Looks Good Kristin. I approve. 10 11 Anita Rathee, D.D.S., M.P.H., FAGD 12 Fellow of the Academy of General Dentistry 13 Chair, AGD Policy Review Committee 14 Division Coordinator, AGD Public and Professional Relations 15 Past President, San Fernando Valley Dental Society 16 Past President, SFVDS Foundation 17 Past President, California Academy of General Dentistry 18 19 **Board Liaison** 20 21 **From:** Jess [mailto:drjccheney@aol.com] 22 Sent: Friday, September 14, 2018 10:18 PM 23 **To:** Kristin Gover < Kristin.Gover@AGD.org> 24 Cc: Colleen DeLacy <colleendelacy@gmail.com>; Roger Winland 25 <105156.3607@compuserve.com>; ratheedds@gmail.com; Thomas Killam 26 <Thomas.Killam@AGD.org> 27 Subject: Re: REVISION TO COMMUNICATIONS COUNCIL REPORT 28 29 Kristin, 30 I think the revisions look good. Thanks for your continued efforts for us. 31 32 Sent from my iPhone 33 34 **Editor** 35 36 ----Original Message----37 From: Roger Winland [mailto:rwinland@compuserve.com] 38 Sent: Wednesday, September 19, 2018 7:03 AM 39 To: Kristin Gover < Kristin. Gover @ AGD.org > 40 Subject: RE: REVISION TO COMMUNICATIONS COUNCIL REPORT 41 42 Looks ok thanks roger

#### Secretary's Report to the 2018 House of Delegates The report includes actions of the Board from the 2017-2018 Board Meeting IV; and the Board Zoom Callsfrom October 2, 2018. 17-18 Board Meeting IV Minutes Dr. Acheson moved, Dr. Dubowsky seconded: "Resolved, that the agenda be approved as amended." **PASSED** Y-Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Winland, White, Wooden, Worm a – Acheson, Gajjar, Uppal A - Gehrig, Tillman N/A - Cordero **Executive Session** Dr. Dyzenhaus moved, Dr. Worm seconded: "Resolved, that the Board go into Executive Session at 8:10 a.m. to discuss the Executive Committee minutes." **PASSED** Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm A - Gehrig, Tillman N/A - Cordero Dr. Worm moved, Dr. Cheney seconded: "Resolved, that the Board come out of executive session at 8:18 a.m." **PASSED** Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm A - Gehrig, Tillman N/A - Cordero

**Consent Agenda** 

#### Dr. Hanson moved, Dr. Cheney seconded:

"Resolved, that the consent agenda be approved as amended."

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- **Audit Committee Annual Report**
- 5 **Awards Committee Annual Report**
- 6 Constitution, Bylaws and Judicial Affairs Council Annual Report
- 7 **Editor's Annual Report**
- 8 **Examinations Council Annual Report**
- 9 **HOD News Release**
- **Investment Committee Annual Report** 10
- 11 **New Dentist Committee Annual Report**
- 12 **PACE Council Annual Report** 
  - **Self-Instruction Annual Report** 
    - Treasurer's Report from AGD Impact

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#### **PASSED**

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Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm

21 a - Edgar, Shelly 22 23

A - Gehrig, Tillman

N/A - Cordero

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#### <u>AIRBIV2018#01 – Adopt the 2019-2021 AGD Strategic Plan</u>

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#### Dr. Edgar moved, Dr. Stillwell seconded:

30 31 32 "Resolved, that AIRBIV2018#01 – Adopt the 2019-2021 AGD Strategic Plan, be postponed until after lunch to allow for Dean West and Board members to craft a narrative of the plan to be included with the policy."

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#### **PASSED**

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Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm

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A - Gehrig, Tillman

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N/A - Cordero

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#### **Budget and Finance Committee Annual Report**

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#### Dr. Acheson moved, Dr. Hanson seconded:

46 47 "Resolved, that the face-to-face \$10,000 Board Training Day and travel costs associated with the additional training day be eliminated from the 2019 Budget."

#### Dr. Winland moved, Dr. Lew seconded:

"Resolved, that the 2019 Leadership Symposium funding be returned to the 2019 budget due to a lack of required budget and business plan."

#### **PASSED**

N/A - Cordero

 Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gorman, Guter, King, Kozelka, Low, Olsen, Shelly, Smith, Stillwell, Winland, White, Wooden, Worm

- N Gajjar, Harunani
- a Hanson, Lew, Uppal
- A Gehrig, Tillman
- N/A Cordero

#### AIRBIV2018#02 – Approve 2019 Budget

Dr. Worm moved, Dr. Stillwell seconded:

"Resolved, that AIRBIV2018#02 – Approve 2019 Budget discussion be postponed until Saturday, August 25, 2018 to allow for staff to amend the 2019 Budget to include the Board amendments." **PASSED** Y - Acheson, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm a – Cheney A - Gehrig, Tillman

N/A - Cordero

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#### AIRBIV2018#01 – Adopt the 2019-2021 AGD Strategic Plan

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### Dr. Stillwell moved, Dr. Olsen seconded:

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"Resolved, that AIRBIV2018#01 – Adopt the 2019-2021 AGD Strategic Plan be approved as amended."

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"Resolved, that the 2019-2021 AGD Strategic Plan be adopted, effective January 1, 2019, so that it reads:

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#### **Continuing Education**

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Expand the breadth, depth and convenience of high quality continuing education opportunities for AGD members.

29 Goals

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General dentists provide superior patient clinical outcomes.

#### **High-Level Strategy**

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To achieve these goals, AGD will do the following:

- 35 **Continuing Education** - Deliver multi-channel continuing dental education through AGD, 36 AGD Constituents or other AGD collaborative relationships. 37
  - Provide a portfolio of online or web-based offerings to make CE accessible and affordable.
- 38 Explore direct-to-member CE facilitated by AGD for instances where constituent-led CE is 39 not viable.
  - Support constituent led CE including the development of efforts to provide high quality education.

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**Expanded educational recognition opportunities** – Create more opportunities to receive recognition for continuing education.

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Micro-education - AGD will explore developing micro-education to specifically address key clinical training meeting applicable licensure or AGD credentialing requirements.

### **Practice Leadership and Support**

4 C p

Creates new initiatives to help AGD members lead more financially successful practices by providing practice leadership education and business support.

1 2

Goals

AGD members lead or work in successful practices with positive business and clinical outcomes.

High-Level Strategy

To achieve these goals, AGD will do the following:

- Improve Dental Practice Leadership Educate and train dental practice leaders on effective practice management and leadership techniques. Activities include, but are not limited to, the following.
- Create robust practice management education providing practice leaders with critical business and leadership resources.
- **Help Dental Students and Residents** Lead efforts helping students and residents manage financial impact of their education through best practices.
- Improve Practice Performance Make available national buying program or direct supplier negotiation providing discounts on practice supplies, equipment and other services. Activities include, but are not limited to, the following.
- o Investigate developing an expanded portfolio of direct practice services (billing, EHR, legal) designed to provide AGD members with vetted, trusted and useful practice management and leadership assistance.
- o Investigate direct negotiations with high quality dental practice suppliers to provide for cost savings or service improvements to AGD dentists and their practice.

**Public and Policy Advocacy** 

Improves the climate for practicing dentistry through patient and policy maker education on the value of oral care and general dentistry and by promoting AGD members' lifelong commitment to continuing education and successful patient outcomes.

Goals

Patients will seek out AGD members or member led practices.

Policy makers will support policies encouraging viable general dentist practices and improving oral health.

**High-Level Strategy** 

To achieve these goals, AGD will do the following:

- **Increase Patients** Promoting efforts highlighting the clinical differentiation between AGD members and other oral care options.
- **Educate Policy Makers** Educate policy makers on the positive patient clinical outcomes of dentist led general dentistry practices.
- Advocate for the Dental Home Concept AGD will identify and implement strategies to educate policy makers and the public on the value of the dentist led Dental Home Concept.

1 2 And be it further, 3 4 Resolved, that the Strategic Plan Synopsis be employed as the primary document for public 5 dissemination and distribution. 6 7 AGD 2018 Strategic Planning Text Narrative (This language will be utilized for public 8 campaigns) 9 The Academy of General Dentistry (AGD) recognizes that current and future dentists will 10 practice in a dynamic and evolving world. It is a priority of the AGD to prepare and support general dentists, regardless of their personal goals, career paths or practice 11 12 settings, to be successful within this environment. As a result, the AGD Strategic Plan is designed to outline high level goals and strategies to focus AGD efforts to support general 13 14 dentistry. 15 The AGD Strategic Plan is inclusive of all individuals considering, practicing or supporting 16 17 the practice of general dentistry and who share AGD members' commitment to high 18 quality patient outcomes and a life-long commitment to learning. The following 19 summarizes key elements of the AGD Strategic Plan. 20 21 The AGD Strategic Plan through its Vision and Mission reiterates members' visionary commitment to oral health and better lives because of the Academy of General Dentistry 22 23 through its continuing Mission of advancing general dentistry and oral health through 24 quality education and advocacy. 25 26 This Vision and Mission will be achieved by ensuring the following: 27 General dentists provide high quality patient clinical outcomes through high quality 28 and accessible continuing education. 29 General dentists provide, lead or work in successful practices with positive business and 30 clinical outcomes through AGD provided practice management, leadership education, and practice support services. 31 32 Patients will seek out general dentists or general dentist led practices and policy makers will support policies encouraging viable general dentist practices because of AGD 33 advocacy, patient education and promotional efforts. 34 35 36 Resolved, that HOD Policy 2015:102-H-6, the 2015-2018 AGD Strategic Plan be rescinded, 37 effective December 31, 2018: 38 2016-2018 Strategic Plan 39 40 Goal 1 - Education: Become the most valued resource of quality continuing dental 41 education for general dentists at all stages of their career.

Strategy 1: Create a Scientific Session that will annually attract at least 25% of AGD members

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by the end of 2018.

Strategy 2: Facilitate education programs that promote members' success and advancement through all stages of their dental career using traditional as well as innovative, cutting edge methods. Strategy 3: Partner with AGD constituents in the development and delivery of continuing education programs. Strategy 4: Protect PACE and increase the number of PACE providers. Goal 2 - Advocacy: Strengthen and protect the general dentistry profession and the oral health of the public. Strategy 1: Represent the unique interests of general dentists in all advocacy arenas. Strategy 2: Advocate on behalf of the general dentistry profession as relates to policy making, insurance, licensing, education, and all levels of government. Strategy 3: Advocate on behalf of the public to ensure safe, best quality dentistry practices and appropriate access to care. Strategy 4: Develop strong working relationships where appropriate with the AGD constituents, the ADA, and dental specialty organizations in addressing issues of common interest. Strategy 5: Pursue instruments and resources to empower the AGD's advocacy agenda. Goal 3 - Membership: Achieve a 25% increase in full-dues-equivalent members and student members by the end of 2018. Strategy 1: Utilize market and member research to determine which current and new member benefits will best serve AGD in attracting and retaining members. Strategy 2: Provide and promote products and services that meet the current and future needs of members and prospective members in all stages of practice and career paths. Strategy 3: Achieve at least a 10% increase in members' assessments of AGD value by the end of 2018. Strategy 4: Actively recruit dental student members and retain them when they become practicing dentists. Strategy 5: Attract non-member general dentists by promoting the value of a lifelong learning mindset. Goal 4—Communications: Promote the AGD as an organization dedicated to advancing general dentistry through quality continuing education and advocacy. 

1	Strategy 1: Position the AGD as the leading source of information on oral health issues for
2	general dentistry.
3	
4	Strategy 2: Create and promote a consistent AGD brand that is applied to all marketing
5	vehicles and collateral materials.
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7	Strategy 3: Increase public awareness of the value AGD general dentists bring as gatekeepers
8	to oral health.
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10	Strategy 4: Focus communication efforts on engaging members to advocate on behalf of
11	general dentistry.
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13	Strategy 5: Enhance AGD publications and digital-based communication vehicles to
14	effectively communicate to all AGD stakeholders.
15	egjeenvery communicate to an 110D stakenotaers.
16	Goal 5 — Organizational Excellence: Ensure that the AGD is financially viable, functions
17	efficiently in a cost-effective manner, and has a mutually supportive relationship with its
18	constituents.
19	constituents.
20	Strategy 1: Ensure the fiscal soundness of AGD.
21	Strategy 1. Ensure the fiscal soundness of AGD.
22	Strategy 2: Improve the effectiveness and efficiency of AGD headquarters operations.
23	Strategy 2. Improve the effectiveness and efficiency of MOD nearquarters operations.
24	Strategy 3: Streamline the AGD governance structure and operations.
25	Strategy 5. Streamline the AGD governance structure and operations.
26	Strategy 4: Promote an organizational culture that best supports attainment of strategic goals
27	and a healthy operating environment
28	and a neutrity operating environment
29	Strategy 5: Ensure the success of constituents in meeting the needs of grassroots members."
30	Strategy 3. Ensure the success of constituents in meeting the needs of grassroots members.
	DA CCED
31	PASSED
32 33	Y – Acheson, Cheney, Drumm, Dubowsky, Edgar, Gajjar, Gorman, Guter, King, Kozelka, Low, Olsen, Shelly,
34	Stillwell, Uppal, White, Worm
35	Silineti, Oppui, milit, moriii
36	a – Dyzenhaus, Hanson, Lew, Smith, Winland, Wooden
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38	A - Gehrig, Harunani, Tillman
39 40	N/A - Cordero
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	Annual Reports
43	Dr. Duhawaky mayad Dr. Smith gagandad
44	Dr. Dubowsky moved, Dr. Smith seconded:

"Resolved, that the Dental Practice Council and the Legislative and Government Affairs

Council investigate new policy to address government-based healthcare reform."

#### **PASSED** 1 2 3 4 5 6 7 8 9 Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, King, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm a –Lew, Kozelka A - Gehrig, Harunani, Tillman 10 N/A - Cordero 11 12 Dr. Worm moved, Dr. Cheney seconded: "Resolved, that the Dental Practice Council Report and the amended Legislative and 13 14 Government Affairs Council Report be transmitted to the House of Delegates." 15 16 **PASSED** 17 18 Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low, 19 Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm 20 21 a –Edgar 22 23 24 A - Gehrig, Harunani, Tillman 25 N/A - Cordero 26 27 Dr. Hanson moved, Dr. Olsen seconded: "Resolved, that the amended Advocacy Fund Annual Report be transmitted to the House 28 29 of Delegates." 30 31 **PASSED** 32 33 34 Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, , Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm 35 36 a - Edgar37 38 A - Gehrig, Harunani, Tillman 39

#### Dr. Hanson moved, Dr. Wooden seconded:

"Resolved, that the Academy of General Dentistry Foundation Annual Report be transmitted to the House of Delegates."

#### **PASSED**

N/A - Cordero

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Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, , Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm

a - Edgar 3 4 A - Gehrig, Harunani, Tillman N/A - Cordero Dr. Worm moved, Dr. White seconded: "Resolved, that the Communications Council Annual Report be referred to the Communications Council for inclusion of budgetary information." **PASSED** Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm a - Winland A - Gehrig, Harunani, Tillman N/A - Cordero Dr. Olsen moved, Dr. Stillwell seconded: "Resolved, that the Dental Education Annual Report be transmitted to the House of Delegates." **PASSED** Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, , Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm a - Edgar 33 A - Gehrig, Harunani, Tillman N/A - Cordero Dr. Shelly moved, Dr. Stillwell seconded: "Resolved, that the Group Benefits Annual Report be transmitted to the House of Delegates." **PASSED** Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, White, Winland, Wooden, Worm A – Edgar, Gehrig, Harunani, Tillman, Uppal N/A - Cordero 

Dr. Smith moved, Dr. Worm seconded:

"Resolved, that the Membership Council Annual Report be transmitted to the House of Delegates as editorially amended."

#### **PASSED**

a - Edgar

Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm

A - Gehrig, Harunani, Tillman

N/A - Cordero

#### <u>AIRBIV2018#04 - Lifelong Learning and Service Recognition Guideline Changes</u> Recognition to Award

#### Dr. Kozelka moved, Dr. Cheney seconded:

"Resolved, that AIRBIV2018#04 – Lifelong Learning and Service Recognition Guideline Changes Recognition to Award be approved."

"Resolved, that the Lifelong Learning & Service Guidelines be amended to read:

Lifelong Learning & Service Recognition Recipient Award Guidelines

#### Why Achieve Recognition?

Lifelong Learning & Service Recognition (LLSR) is a program of formal recognition for Academy of General Dentistry (AGD) Masters in the areas of continuing education, dental-related community service and service to organized dentistry. It is not a credential and in no way may be represented to the public as such. LLSR was created to recognize the achievements of those AGD Masters who clearly recognize the professional obligation to remain current in their profession and to create an example so that each member of the dental profession never loses sight of this obligation. Achieving the LLSR from the AGD tells colleagues and patients of your continued commitment to lifelong learning and quality patient care. A Master may receive LLSR multiple times, in a sequential manner, as long as all requirements are met. Once a Master is first recognized by this achievement, subsequent recognitions may include only those credits and points earned since the date of the previous LLSR recognition.

#### A Charge to all Masters

- 41 Masters of the AGD embody the AGD's principles and ideals. They accept an obligation to
- 42 continually prove themselves worthy of that designation throughout their professional
- 43 lives. There are certain obligations that go along with the honor of becoming a Master in
- 44 the AGD. Masters are expected to:
- 45 1) Continue their commitment to lifelong learning
- **2)** Be a mentor to associates and new dentists
- 47 3) Improve the quality of continuing education

- 4) Be a voice of the general dentist.
- 2 LLSR Requirements

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- 1) All applicants must be AGD Masters, with AGD membership in good standing at the time of application and when recognition is received.
- 5 2) Completion of 500 eredit hours of FAGD/MAGD-approved continuing education credit
- 6 with at least 300 hours in course attendance. LLSR credit begins to accrue Jan. 1 of the
- 7 year a member is approved to receive AGD Mastership are required in course attendance,
- 8 teaching or publications earned since the date Mastership was received or since a previous
- 9 **LLSR was received.** A breakdown of these credits can be found below in the Course
- 10 **Attendance section.**
- 11 3) Completion of 100 hours of AGD-approved dental-related community/volunteer service
- 12 and/or service to organized dentistry is required. Hours must have been performed since
- 13 the date Mastership was received or since a previous LLSR was received LLSR
- community/volunteer service points begin to accrue Jan. 1 of the year a member is
- 15 approved to receive AGD Mastership. The acceptability of points is subject to review by
- 16 | the Dental Education Council. Examples of acceptable dental-related volunteer service can
- 17 | be found below in the Community and Volunteer Service section.
- 18 4) Attendance at a Convocation ceremony held during the AGD scientific sessions to
- 19 receive the award. Successful candidates are allowed three years following approval to
- 20 attend the convocation and receive their award.
- 21 An application must be submitted with the designated application processing fee, which is
- 22 determined annually by the Dental Education Council. This fee covers direct costs, plus
- 23 \$\\$100 for overhead costs. Applications must be postmarked by December 31.
- 24 5) Acceptance or denial will be communicated to applicants following review of the
- 25 application by the Dental Education Council. All decisions of the council are final.
- 26 Recognition of LLSR recipients will be at the constituent and/or regional level and through
- 27 AGD publications. Recipients will be invited to be present and attend the Convocation
- 28 Ceremony where they will be celebrated by inclusion of their names in the Convocation
- 29 program. Recipients will be seated in a designated area and will walk across the stage to be
- 30 honored, and have each of their names read, prior to the FAGD and MAGD awardees."

32 Course Attendance

- 1) Completion of 500 hours of FAGD/MAGD-approved continuing education credit. Hours
- must have been earned since the date January 1 of the year member was approved for
- 35 Mastership was received or since a previous LLSR was received:
- a) At least 150 continuing education hours must be earned in participation course
- 37 **attendance**;
- 38 **b)** A maximum of 100 credits for teaching is allowed;
- 39 c) A maximum of 100 credits for publications is allowed.
- 2) Credits for course attendance, teaching or publications must be in at least eight (8) of the
- 42 | following disciplines, although there are no minimums or maximum by discipline. Note: No
- credits will be accepted for advanced academic education programs, such as residencies or
- 44 advanced degree programs.

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- 46 Subject Category Subject Code
- 47 Basic Science 010

1	Endodontics	070
2	Electives	130
3	Myofacial Pain/	
4	Occlusion Orofacial Pain*	200
5	<b>Operateive Dentistry</b>	250
6	Oral/Max Surgery	310
7	Anes/Pain Mgmt/Pharm*	340
8	Orthodontics	370
9	Pediatrics	430
10	Periodontics	490
11	<b>Practice Mgmt</b>	550
12	<b>Fixed Prosth</b>	610
13	Removable Prosth	670
14	Implants	690
15	Oral Med/Oral Dx	730
16	Special Pt Care	750
17	Esthetics	780
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\*These changes go into effect January 1, 2019. Any member that has not achieved or applied for Fellowship, Mastership, or LLSR by December 31, 2016, will be expected to meet the updated continuing education requirements at that time.

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#### **Teaching and Publication Credit**

- 1) Full or part-time faculty positions in <u>ADACODA/CDAC</u>-accredited institutions are eligible for up to ten (10) credit hours each year. Verification of teaching appointments is required from each institution and should be included with the application.
- 2) Teaching continuing dental education courses for organizations that are approved by <u>AGD-PACE<sub>7</sub>or ADA-CERP</u> or an AGD constituent are eligible for credit. Verification is required that indicates the dental discipline and the number of hours. Credit will be given hour-for-hour for each presentation.
- 3) The publication of a scientific article, case report, technique paper or clinical research report in a scientific journal or textbook is worth ten (10) credit hours. A copy of the articles, with dates of publication, should be submitted with the application.

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#### **Dental-Related Community and Volunteer Service**

- 1) One community service point is equal to one hour of <u>dental-related</u> volunteer community service. The Dental Education Council will determine which additional categories of service not described in these guidelines may be eligible. Volunteer work for a for-profit organization, such as a dental manufacturer, is not eligible.
- 2) To document <u>dental-related</u> community service, a representative of the organization for which the community/volunteer work was done must complete and sign the provided
- 42 Volunteer Service Verification Form, which specifies the type(s) and term(s) of volunteer
- 43 service(s) provided. If additional verification is needed, please attach necessary
- 44 documentation to this form.
- 45 3) No financial remuneration or "in-kind" remuneration may be received for
- service/volunteer work. Reimbursement of expenses such as airfare, transportation, meals,
- 47 etc., is allowed.

1 Categories of <u>dental-related</u> community and volunteer service may include, but are not limited to:

- a. Providing pro bono dental services through a not-for-profit organization;
- 5 b. Mentoring a <u>dental</u> student, emerging dentist or struggling colleague, through a
- 6 recognized dental organization;

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- 7 c. Service in a volunteer dental clinic;
- 8 d. Service overseas on a dental mission;
- 9 e. Volunteer dental-related service in a community program, such as a health fair;
- 10 **f. Providing presentation on dental-related topics to schools, civic, church or other** community groups or other health professionals;
- g. Providing oral cancer screenings at a local church, synagogue, school, health fair,
- 13 **nursing home, retirement community, etc.**;
- 14 h. Providing dental screenings to athletes through the Special Olympics Special Smiles;
- i. Volunteer work at a local or national dental meeting, such as working at the organization's booth;
- j. Serving as an unpaid team dentist for a school, college, professional sports team or youth athletic association;
- 19 k. Instituting a mouth guard program for a school, college, professional sports team or vouth athletic association;
- 21 | l. Providing dental education programs at elementary or secondary schools;
- 22 m. Volunteering as a Boy/Girl Scout merit badge leader for dental health.

#### Service to Organized Dentistry:

- Holding a local, state/provincial or national appointment or an elected office in a dental organization is considered service to organized dentistry. Points are awarded for each month of service, up to 12 points per year per national or local organization.
- 1) A maximum of 12 points may be earned annually for serving in a national position in a dental organization. Service time of less than one year will be prorated by month. Holding multiple positions at the national level in the same organization is acceptable only up to the 12-point limit each year.
- 2) A maximum of 12 points may be earned annually for serving in state/provincial,
- constituent or component positions in a dental organization. Service time of less than one year will be prorated by month. Holding multiple positions in the same local organization is acceptable only up to the 12-point limit each year.
- 3) To document service to organized dentistry, a representative of the organization for which the service was done must complete and sign the provided Volunteer Service
- Werification Form, which specifies the type(s) and term(s) of volunteer service(s) provided.
- If additional verification is needed, please attach necessary documentation to this form.

#### Application Procedures and Deadline

- 42 1) All LLSR requirements must be completed by the December 31 application deadline to
- 43 <u>be considered for the class immediately following the year the application is submitted.</u>
- 44 2) Applications must be postmarked no later than December 31 to be considered for the
- class immediately following the <u>year the</u> application <del>deadline</del> <u>is submitted</u>, and must
- 46 include the designated application fee. This fee is determined annually by the Dental

1	Education Council and includes a non-refundable processing fee. The AGD is not
2	responsible for lost or delayed mail.
3	3) Only the Dental Education Council may determine the acceptability of LLSR
4	applications. Applicants are notified by letter of the Council's decision, and all decisions of
5	the Council are final. Recognition will be provided at the Convocation Ceremony at the
6	AGD Annual Meeting & Exhibits through the inclusion of names of the new recipients in
7	the Convocation program and in AGD publications.
8	program and miles publications.
9	4) Acceptance or denial will be communicated to applicants following review of the
10	application by the Dental Education Council. All decisions of the council are final.
11	application by the Benear Buteution Country in decisions of the country are interested
12	5) Recipients are required to attend the annual Convocation ceremony held during the
13	AGD scientific sessions to receive the award. Successful candidates are allowed three years
14	following approval to attend convocation and received their award. Additional recognition
15	of LLSR recipients may occur at the constituent or regional levels and thorough AGD
16	publications.
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19	Direct inquiries regarding the LLSR to:
20	1
21	Academy of General Dentistry
22	Department of Dental Education
23	560 W. Lake Street, Sixth Floor
24	Chicago, Illinois 60661-6600
25	Phone 888.AGD.DENT (243.3368)
26	Fax 312,335,3428
27	
28	Adopted HOD 7/2003
29	Amended HOD 6/2015
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31	And be it further,
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33	Resolved that AGD House Policy 2000:9-H-7 Advertising FAGD/MAGD Credentials be
34	modified to allow AGD members to advertise the LLSR Award as a Credential, similar to
35	the FAGD/MAGD.
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37	Advertising FAGD/MAGD/LLSR Credentials
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39	Fellow, or Master, or Lifelong Learning & Service Recipient of the Academy of General
40	Dentistry
41	General Dentist
42	"Resolved, that the following language be accepted by the Academy of General Dentistry as
43	the appropriate use of the Fellowship, and Mastership, and Lifelong Learning and Service
44	Recipient designation to the public by way of advertising, listing, or office signage:
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16	DDS RDS or DMD FACD or MACD or LLSR

Fellow, or Master or Lifelong Learning & Service Recipient of the Academy of General 1 2 **Dentistry** 3 4 and be it further 5 6 Resolved, that our members be advised through AGD printed communications that our 7 Principles of Ethics allow general dentists to announce Fellowship, or-Mastership or 8 Lifelong Learning & Service Recipient in the area of general dentistry in their 9 announcement of services to patients so long as they avoid any communication that 10 expresses specialization and clearly write out the definition of the initials, in order to not lead the reasonable person to believe that the designation represents an academic degree." 11 12 13 And be it further, 14 Resolved that House Policy 81:12-H-7 Defending their capabilities to render dental 15 procedures be modified to read: 16 17 Resolved, that members faced... 18 C. Verification that the individual has achieved Fellowship, or Mastership, or Lifelong 19 Learning & Service Recipient status in the AGD. ... 20 And be it further, 21 22 Resolved that House Policy 99:44-H-7, Approve procedures for processing FAGD and 23 MAGD applications be modified to read: 24 Approval procedures for processing FAGD, and MAGD, and LLSR applications 25 26 27 Resolved, that the AGD Board approve procedures and procedural changes related to the mechanics of processing the applications for the Fellowship, and Mastership, and Lifelong 28 29 **Learning & Service Recipient Awards.** 30 31 And be it further, 32 33 Resolved that House Policy 96:49-H-7 Appeal of application deadline be modified to read: 34 35 Appeal of application deadline 36 Resolved, that the following guided be established for considering appeals of the 37 FAGD/MAGD/LLSR application deadline: 38 39 **GUIDELINES FOR APPEALS OF** 40 THE FAGD/MAGD/LLSR APPLICATION DEADLINE 41 42 An application for the Fellowship, or-Mastership, or Lifelong Learning & Service Recipient 43 award that is received in the Chicago headquarter office... 44 45 And be it further, 46

1	Resolved that House Policy 2002:20-H-7 Category of membership, Fellowship as, be
2	modified to read:
3	
4	Resolved, that the AGD recognize the its Fellowship, and Mastership, and Lifelong
5	Learning & Service Recipient designation are categories of membership in the organization
6	that may be announced appropriately to the public but only while an individual maintains
7	membership in the organization, and be further
8	
9	Resolved, that constituent academies recognize that they may report to appropriate
10	licensing bodies instances of non-members announcing FAGD, and LLSR
11	designation to the public because it is false advertising.
12	
13	And be it further,
14	
15	Resolved that House Policy 78:19-H-6 Changes in, be modified to read:
16	Testive that House I oney 70.12 II o Changes in, be mounted to read.
17	Resolved, that changes made in the Fellowship, or Mastership, or Lifelong Learning &
18	Service Recipient guidelines which make those guidelines more restrictive, be made
19	effective for all members of the AGD five (5) years after the date of passage of such changes
20	by the AGD House of Delegates.
21	by the AGD House of Delegates.
22	And be it further,
23	And be it furtiles,
23 24	Decelved that House Policy 2002.2 H 7 Lifeleng Learning and Corvice December
24 25	Resolved, that House Policy 2003:3-H-7 Lifelong Learning and Service Recognition
	Recipient Program be modified to read:
26 27	Lifelong Learning and Sarviga December Decinion Award Draguer
	Lifelong Learning and Service Recognition Recipient Award Program  "Posselved that the ACD offer the Lifelong Learning and Service Recognition Recipient
28	"Resolved, that the AGD offer the Lifelong Learning and Service Recognition Recipient
29	Award (LLSR) program to recognize the accomplishment of AGD Masters for their
30	continuing education and volunteer service to dentistry, and be it further
31 32	Descrived that the decument Lifeleng Learning and Convice Descrition Desiries Assessed
	Resolved, that the document Lifelong Learning and Service Recognition Recipient Award
33	(LLSR) Guidelines be adopted."
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35	DEFEATED
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37 38	Y –Edgar, Gajjar, Kozelka, Lew, Olsen, Shelly, Stillwell, Uppal
39	N – Acheson, Drumm, Dubowsky, Dyzenhaus, Gorman, Guter, Hanson, King, Low, Smith, Winland, Wooden, Worm
40	1. Henoson, Dimini, Duodining, Dycanians, Gorman, Guier, Hunson, Bing, Low, Shun, Hunand, Wolden, Wolff
41	a - Cheney
42	
43	A - Gehrig, Harunani, Tillman, White
44 45	N/A Condana
	N/A - Cordero
46	AIDDIVIOLOUGE LIGHT I COMPANY OF THE CLASSIC CONTRACTOR OF THE COMPANY OF THE COM
47	AIRBIV2018#05 – Lifelong Learning and Service Recognition Guideline Changes

**Limitation to One Recognition** 

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Dr. Cheney moved, Dr. Guter seconded:

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"Resolved, that AIRBIV2018#05 - Lifelong Learning and Service Recognition Guideline Changes Limitation to One Recognition be approved."

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"Resolved, that the Lifelong Learning & Service Guidelines be amended to read:

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**Lifelong Learning & Service Recognition Guidelines** 

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Why Achieve Recognition?

Lifelong Learning & Service Recognition (LLSR) is a program of formal recognition for Academy of General Dentistry (AGD) Masters in the areas of continuing education, dentalrelated community service and service to organized dentistry. It is not a credential and in no way may be represented to the public as such. LLSR was created to recognize the achievements of those AGD Masters who clearly recognize the professional obligation to remain current in their profession and to create an example so that each member of the dental profession never loses sight of this obligation. Achieving the LLSR from the AGD tells colleagues and patients of your continued commitment to lifelong learning and quality patient care. A Master may receive LLSR multiple times, in a sequential manner, as long as all requirements are met. Once a Master is first recognized by this achievement, subsequent recognitions may include only those credits and points earned since the date of the previous LLSR recognition.

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A Charge to all Masters

Masters of the AGD embody the AGD's principles and ideals. They accept an obligation to continually prove themselves worthy of that designation throughout their professional lives. There are certain obligations that go along with the honor of becoming a Master in the AGD. Masters are expected to:

- 1) Continue their commitment to lifelong learning
- 30 2) Be a mentor to associates and new dentists
- 31 3) Improve the quality of continuing education
- 32 4) Be a voice of the general dentist.

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LLSR Requirements

- 1) All applicants must be AGD Masters, with AGD membership in good standing at the time of application and when recognition is received.
- 38 2) 500 credit hours are required in course attendance, teaching or publications earned since 39 the date Mastership was received or since a previous LLSR was received. A breakdown of 40 these credits can be found below in the Course Attendance section.
- 3) Completion of 100 hours of AGD-approved dental-related community/volunteer service 41 and/or service to organized dentistry is required. Hours must have been performed since 42 43 the date Mastership was received or since a previous LLSR was received. The acceptability
- of points is subject to review by the Dental Education Council. Examples of acceptable 44
- dental-related volunteer service can be found below in the Community and Volunteer 45
- 46 Service section.

4) An application must be submitted with the designated application processing fee, which is determined annually by the Dental Education Council. This fee covers direct costs, plus \$100 for overhead costs. Applications must be postmarked by December 31.

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5) Acceptance or denial will be communicated to applicants following review of the application by the Dental Education Council. All decisions of the council are final. In addition to recognition on a national level, additional recognition of LLSR recipients can also will be at the constituent and/or regional level and through AGD publications. Recipients will be invited requested to be present and attend the Convocation Ceremony where they will be celebrated by inclusion of their names in the Convocation program. Recipients will be seated in a designated area and will walk across the stage to be honored, and have each of their names read, prior to following the FAGD and MAGD awardees."

#### **Course Attendance**

- 1) Completion of 500 hours of FAGD/MAGD-approved continuing education credit. Hours must have been earned since the date Mastership was received or since a previous LLSR was received:
- a) At least 150 continuing education hours must be earned in participation course attendance;
  - b) A maximum of 100 credits for teaching is allowed;
  - c) A maximum of 100 credits for publications is allowed.

2) Credits for course attendance, teaching or publications must be in at least eight (8) of the following disciplines, although there are no minimums or maximums by discipline <u>for non-participation credits</u>. Note: No credits will be accepted for advanced academic education programs, such as residencies or advanced degree programs.

28	Subject Category	<b>Subject Code</b>
29	Basic Science	010
30	Endodontics	070
31	Electives	130
32	Myofacial Pain/	
33	Occlusion Orofacial Pain*	200
34	Operateive Dentistry	250
35	Oral/Max Surgery	310
36	Anes/Pain Mgmt/Pharm*	340
37	Orthodontics	370
38	Pediatrics	430
39	Periodontics	490
40	Practice Mgmt	550
41	Fixed Prosth	610
42	Removable Prosth	670
43	Implants	690
44	Oral Med/Oral Dx	730
45	Special Pt Care	<b>750</b>
46	Esthetics	<b>780</b>
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\*These changes go into effect January 1, 2017. Any member that has not achieved or applied for Fellowship, Mastership, or LLSR by December 31, 2016, will be expected to meet the updated continuing education requirements at that time.

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- **Teaching and Publication Credit**
- 1) Full or part-time faculty positions in ADA/CDA-accredited institutions are eligible for up to ten (10) credit hours each year. Verification of teaching appointments is required from each institution and should be included with the application.
- 2) Teaching continuing dental education courses for organizations that are approved by PACE, or an AGD constituent are eligible for credit. Verification is required that indicates the dental discipline and the number of hours. Credit will be given hour-for-hour for each presentation.
  - 3) The publication of a scientific article, case report, technique paper or clinical research report in a scientific journal or textbook is worth ten (10) credit hours. A copy of the articles, with dates of publication, should be submitted with the application.

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- Community and Volunteer Service
- 1) One community service point is equal to one hour of volunteer community service. The
  Dental Education Council will determine which additional categories of service not
- described in these guidelines may be eligible. Volunteer work for a for-profit organization, such as a dental manufacturer, is not eligible.
- 22 2) To document community service, a representative of the organization for which the community/volunteer work was done must complete and sign the provided Volunteer
- 24 Service Verification Form, which specifies the type(s) and term(s) of volunteer service(s)
- provided. If additional verification is needed, please attach necessary documentation to this form.
- 3) No financial remuneration or "in-kind" remuneration may be received for service/volunteer work. Reimbursement of expenses such as airfare, transportation, meals, etc., is allowed.

- Categories of community and volunteer service may include, but are not limited to:
- a. Providing pro bono dental services through a not-for-profit organization;
- b. Mentoring a student, emerging dentist or struggling colleague, through a recognized dental organization;
- 35 c. Service in a volunteer dental clinic;
- d. Service overseas on a dental mission;
- e. Volunteer service in a community program, such as a health fair;
- 38 **f. Providing presentation on dental-related topics to schools, civic, church or other**
- 39 community groups or other health professionals;
- 40 g. Providing oral cancer screenings at a local church, synagogue, school, health fair,
- 41 | nursing home, retirement community, etc.;
- 42 h. Providing dental screenings to athletes through the Special Olympics Special Smiles:
- i. Volunteer work at a local or national dental meeting, such as working at the
- 44 organization's booth;
- 45 **j.** Serving as an unpaid team dentist for a school, college, professional sports team or youth
- 46 athletic association;

k. Instituting a mouth guard program for a school, college, professional sports team or youth athletic association;

l. Providing dental education programs at elementary or secondary schools;

m. Volunteering as a Boy/Girl Scout merit badge leader for dental health.

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Service to Organized Dentistry:

Holding a local, state/provincial or national appointment or an elected office in a dental organization is considered service to organized dentistry. Points are awarded for each month of service, up to 12 points per year per national or local organization.

- 1) A maximum of 12 points may be earned annually for serving in a national position in a dental organization. Service time of less than one year will be prorated by month. Holding multiple positions at the national level in the same organization is acceptable only up to the 12-point limit each year.
- 2) A maximum of 12 points may be earned annually for serving in state/provincial, constituent or component positions in a dental organization. Service time of less than one year will be prorated by month. Holding multiple positions in the same local organization is acceptable only up to the 12-point limit each year.
  - 3) To document service to organized dentistry, a representative of the organization for which the service was done must complete and sign the provided Volunteer Service Verification Form, which specifies the type(s) and term(s) of volunteer service(s) provided. If additional verification is needed, please attach necessary documentation to this form.

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Application Procedures and Deadline

- 1) All LLSR requirements must be completed by the December 31 application deadline.
- 25 2) Applications must be postmarked no later than December 31 to be considered for the class immediately following the application deadline is submitted, and must include the designated application fee. This fee is determined annually by the Dental Education

  Coupeil and includes a new refundable processing for The ACD is not responsible for least
- Council and includes a non-refundable processing fee. The AGD is not responsible for lost or delayed mail.
- 30 3) Only the Dental Education Council may determine the acceptability of LLSR
- applications. Applicants are notified by letter of the Council's decision, and all decisions of
- 32 | the Council are final. Recognition will be provided at the Convocation Ceremony at the
- AGD Annual Meeting & Exhibits through the inclusion of names of the new recipients in the Convocation program and in AGD publications.
- 35 Direct inquiries regarding the LLSR to:

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- 37 **Academy of General Dentistry**
- Department of Dental Education 560 W. Lake Street, Sixth Floor
- 39 | 560 W. Lake Street, Sixth Floor 40 | Chicago, Illinois 60661-6600
- 41 **Phone 888.AGD.DENT (243.3368)**
- 42 **Fax 312.335.3428**

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- 44 **Adopted HOD 7/2003**
- 45 **Amended HOD 6/2015**

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And be it further,

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Resolved, that House Policy 2003:3-H-7 Lifelong Learning and Service Recognition Program be modified to read:

Resolved, that the document Lifelong Learning and Service Recognition (LLSR)

Y - Cheney, Dubowsky, Gorman, Guter, Kozelka, Low, Olsen, Smith, Stillwell, Uppal, Winland

program to recognize the accomplishment of AGD Masters for their continuing education

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5 Lifelong Learning and Service Recognition Program 6 "Resolved, that the AGD offer the Lifelong Learning and Service Recognition (LLSR)

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**PASSED** 

a - Edgar, Gajjar

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been done in the past.

course provider in order for it to be displayed on the members' AGD Licensing and Award

A - Gehrig, Harunani, Tillman, White

Dr. Stillwell moved, Dr. Cheney seconded:

Guidelines be adopted."

N/A - Cordero

N-Acheson, Drumm, Dyzenhaus, Hanson, King, Lew, Shelly, Wooden, Worm

and volunteer service to dentistry, and be it further

### AIRBIV2018#06 – Elimination of CE Submissions Requiring Manual Data Entry

"Resolved, that AIRBIV2018#06 – Elimination of CE Submissions Requiring Manual Data Entry be approved."

"Resolved, that Policy Type: V. Board Policy Statements, I. Membership Maintenance be

# amended to read:

# Continuing dental education is a fundamental value of the AGD, and membership in the

AGD requires a minimum of 75 hours of CE every three (3) years. Therefore, all members are required to verify this requirement by signing a statement with their annual dues renewal that this requirement is being satisfied. Members requiring documentation for the AGD awards or other needs, such as licensure, will submit course documentation as has

**Submission of CE by Members** 

I. Membership Maintenance

Effective April 17, 2015 August 31, 2019 all Continuing Education hours (CE) must be submitted to AGD using the AGD online CE submission form by its members and be

accompanied by a course completion certificate or verifiable equivalent issued by the

Transcripts.

And be it further, Resolved, that the AGD be a repository for the certificates. Approved 17-18 Board Meeting IV2015 Board Meeting III" **PASSED** Y - Acheson, Cheney, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Uppal, Winland, Worm N – Stillwell a - Drumm, Edgar, Hanson, Wooden A - Gehrig, Harunani, Tillman, White N/A - Cordero AIRBIV2018#03 – Rescind HOD Policy 93:28 H 7 Health Care Reform Criteria Dr. Shelly moved, Dr. Cheney seconded: "Resolved, that AIRBIV2018#03 - Rescind HOD Policy 93:28 H 7 Health Care Reform Criteria be approved." "Resolved, that AGD HOD policy 93:28-H-7 be rescinded: 93:28 H 7 "Resolved, that it is the policy of the Academy of General Dentistry that if dentistry is to be included in any government health care program reform, it must: 1) Be adequately funded to provide broad access; 2) Permit freedom of choice of dentists: 3) Be based on fee for service; and 4) Assure high quality dental care. and be it further Resolved, in any case where dentistry is included in health care reform, the AGD support the following six recommendations set forth by the American Dental Association: -Maintain the advantages of the current dental care and dental benefits system, which would not require inclusion of dental benefits for population groups currently receiving regular dental care, and which would not require public sector participation and subsequent cost transfer. The Association strongly opposes any change in the tax deductibility of current dental benefit coverage.

- Continue existing policy support for a separate, restructured program of publicly funded dental benefits for indigent persons. Priority consideration should be given to programs for children. The Association urges that these programs be administered in the private sector wherever possible. For population groups currently not receiving regular dental care the Association supports the opportunity for a) small employers purchase dental plans in the private sector, b) development of cooperative dental benefit purchasing alliances administered in the private sector. The Association recommends that preventive services and educational programs for children be included in any health system reform proposal. Preventive services may include but are not necessarily limited to, fluoridation of community water supplies, oral prophylaxis and application of topical fluorides and sealants; dietary fluoride supplements; restoration of carious teeth; maintenance of space resulting from the early loss of primary teeth and patient education. The Association recommends that in the event that a more comprehensive program is enacted, preventive, diagnostic, emergency services and basic restorative and periodontal care be included for children and the elderly.
  - 6. The Association believes that if the Medicare program is expanded to include coverage for additional dental health care services, we would endorse the inclusion of a defined dental benefit plan for the elderly population. These services would be expressly focused on those elderly who are in long term residential care or home bound. Delivery of these services should not be compromised by discrimination by category of provider (physician or dentist)."

#### **PASSED**

Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm

a - Winland

A - Gehrig, Tillman

N/A - Cordero

#### <u>AIRBIV2018#07 – Amend Rules of Procedure Reference Committee Timing</u>

Dr. White moved, Dr. Cheney seconded:

"Resolved, that AIRBIV2018#07 – Amend Rules of Procedure Reference Committee Timing be approved."

"Resolved, that the Rules of Procedure for Conducting The Reference Committee Hearings and Business of the Academy of General Dentistry's House of Delegates be amended at paragraph 5 (e), so that they read:

All <u>Each</u> Reference Committees must remain in session for a minimum of 90 minutes or until there are no all attendees at the microphones have left the room so that delegates have the opportunity to present their views before all each of the Reference Committees."

Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm

a - Edgar

A - Gehrig, Tillman

N/A - Cordero

**PASSED** 

### AIRBIV2018#08 – Request to Increase Terms of Policy Review Committee Members

#### Dr. Stillwell moved, Dr. Cheney seconded:

"Resolved, that AIRBIV2018#08 – Request to Increase Terms of Policy Review Committee Members be referred to the Policy Review Committee with edits to stagger member terms and bring back to the October 15, 2018, 17-18 Board Zoom for approval."

"Resolved, that Policy Type: II. Governance Process, N. Charges of Council and Committees, O. Policy Review Committee be amended to read:

**Policy Review Committee** 

1. The Policy Review Committee shall consist of three (3) persons, including the chairperson who will each serve a two (2) year term, and may be reappointed to followed by up to one additional two (2) year term, by appointment of the incoming President. The Speaker of the House will serve as a consultant to the committee.

2. It shall be the duty of the committee to continually review AGD House of Delegates (HOD) policies, and develop recommendations on their maintenance, development, and strategic implementation.

3 .It shall be the duty of the committee to establish, maintain, and/or clarify policy lexicon to ensure consistent use of terms in the HOD policy manual.

4. This committee shall be a committee of the Board and not merely a committee contained within the Dental Practice Council or LGA Council."

5. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board **Policy Statements.** 

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6. Evaluate the pricing of all programs and services annually during the fall (at the Joint Council Meetings I if meeting) to be included as part of the budget process and provide a complete pricing analysis to the Board at the Board Meeting III at least every three years.

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7. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's reporting structure under the Sunshine Act. The staff liaison will compile all of their individual's forms, and share them with their chairperson and also the executive office staff, who will in turn, forward them to the Audit Committee for further review.

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And be it further,

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Resolved, that the terms of the current members of the committee be amended as follows:

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Dr. Anita Rathee, Region 13, (11/13/2017-11/04/2018-11/10/2019), Chair, 4th term Dr. Shahram Shekib, Region 02, (11/13/2017-11/04/2018 11/10/2019), 1st term

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Dr. Gary Myers, Region 19. (04/24/2018-11/04/2018 11/10/2019), 1st term"

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#### **PASSED**

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Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm

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A - Gehrig, Tillman

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N/A - Cordero

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AIRBIV2018#09 – Scientific Session Registration Cancellation Policy 2014:105R-H-6 **Amendment** 

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Dr. Hanson moved, Dr. Guter seconded:

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"Resolved, that AIRBIV2018#09 – Scientific Session Registration Cancellation Policy 2014:105R-H-6 be approved."

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"Resolved, that HOD Policy 2014:105R-H-6 be rescinded.

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2014:105R-H-6 "Resolved, that the Meeting Services Guidelines Scientific Session Fees **Annual Meetings Council be amended to read** 

**Scientific Session Fees Annual Meetings Council** AGD member dentist registrants who purchase tickets for scientific sessions and then find that they are elevated to delegate or alternate delegate status may obtain a full refund of their scientific session ticket(s) REFUNDS FOR TICKETS PURCHASED Cancellation requests received less than 30 days prior to the first official day of the annual meeting, with the exception of AGD member dentist registrants who have been elevated to delegate or alternate delegate status, will not be eligible for a credit or refund. And be it further, Resolved, that the Board Policy Manual be amended to include Policy Type: VI. Board Guidelines, E. Scientific Session Refunds AGD member dentist registrants who purchase registration and/or tickets for the Scientific Session may obtain a refund of that purchase, less a processing fee, up to 30 days before the first day of the Session. AGD member dentist registrant refund requests will incur a \$50 processing fee. Guest registrant refund requests will incur a \$15 processing fee. Requests received less than 30 days before the first day of the Session will not be eligible for a credit or refund. **Monitoring: Review by Board annually in April PASSED** 29 Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm a - Edgar, Winland A - Gehrig, Tillman N/A - Cordero AIRBIV2018#10 – Amend the Names of the Exam Committees in the BPM, HOD Policy **Manual and Constitution and Bylaws** Dr. Hanson moved, Dr. Acheson seconded: "Resolved, that AIRBIV2018#10 – Amend the Names of the Exam Committees in the BPM, **HOD Policy Manual and Constitution and Bylaws be approved.**"

"Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II.

Governance Process, M., Section 2., Examinations Council to read:

#### E. Examinations Council

1. The Examinations Council shall consist of six (6) members, including the chairperson, the chairs of the Fellowship Exam Committees (A, B, and C), Examination Development Committee, Examination Assessment Committee and Examination Materials Committee, chair of the Self-Instruction Committee, and one (1) other members who has have served at least one (1) term on the Examination Council or Self-Instruction Committee. All members of the council must and each of whom have achieved Fellowship or Mastership status within the organization.

2. It shall be the duty of the council:

a. To be responsible for overseeing the construction, administration, scoring, and security of the Fellowship Examination;

b. To help develop and administer, in conjunction with the Examination Committees Examination Development Committee, Examination Assessment Committee and Examination Materials Committee, any other examination, quizzes, or instruments of measurement when so directed by the HOD, or Board;

c. To audit the Fellowship Review Course annually to ensure the quality of the course materials is consistent with the overall premise of the Fellowship Examination;

d. To recommend and enforce policies pertaining to examinations for which it is responsible.

e. To evaluate the quality and effectiveness of *General Dentistry's* Self-Instruction program once a year.

3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board Policy Statements.

4. A quorum of the council and the <u>examination committees</u> <u>exam teams</u> shall be a majority of members present.

5. Each Council and Committee shall evaluate the revenues and expenses pricing of all its programs and services annually as part of the budget process. Additionally, each Council and Committee shall provide a complete revenue and expense analysis to the Board at Board Meeting IV at least every three years, beginning 2019.

 6. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's reporting structure under the Sunshine Act. The staff liaison will compile all of their

individual's forms, and share them with their chairperson and also the executive office 1 2 staff, who will in turn, forward them to the Audit Committee for further review. 3 4 And be it further: 6

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Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance Process, M., Section 3H, Examinations Items Bank Committee (Team C) to read:

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H. Examinations Items Bank Materials Committee (Team C)

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1. The Examination Item Bank Materials Committee (Team C) shall be composed of six (6) members, each of whom have achieved Fellowship or Mastership status within the organization and each of whom have served a minimum of two (2) years on either Team A or Team B the Examination Development Committee or of the Fellowship Examination **Assessment Committee**;

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Committee members shall serve no more than two (2) consecutive three (3) year terms on the committee;

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2. It shall be the duty of the committees:

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a. To ensure that each item in the item bank is appropriately and consistently categorized in accordance with the examination content outline;

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b. To review periodically the content outline for the Fellowship Examination and recommend changes in the outline to the council;

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c. To develop the Fellowship Examination Study Guide annually per the established development guidelines set forth by the council;

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3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board **Policy Statements.** 

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4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its programs and services annually as part of the budget process. Additionally, each Council and Committee shall provide a complete revenue and expense analysis to the Board at Board Meeting IV at least every three years, beginning 2019.

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5. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's

reporting structure under the Sunshine Act. The staff liaison will compile all of their

individual's forms, and share them with their chairperson and also the executive office staff, who will in turn, forward them to the Audit Committee for further review.

And be it further:

Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance Process, M., Section 3 I. Fellowship Exam Committee (Teams A and B) to read:

I. Fellowship Exam Committee (Teams A and B) Examination Development Committee

 1. The Fellowship Exam Committee (Teams A and B) Examination Development Committee shall be composed of twelve (12) six (6) members, at least one (1) of whom shall be a member of the Examinations Council, with each of the twelve (12) six (6) members having achieved Fellowship or Mastership status within the organization;

Those committee members who are not members of the Examinations Council shall serve no more than two (2) consecutive three- (3) year terms on the committee;

2. It shall be the duty of the committee:

a. To construct, review, and score the Fellowship Examination;

b. To make recommendations for an official passing score, based on the statistical analyses, for the annual Fellowship Examination to the Examinations Council;

c. To maintain an adequate pool of examination items that can be utilized for the Fellowship Examination.

3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board Policy Statements.

4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its programs and services annually as part of the budget process. Additionally, each Council and Committee shall provide a complete revenue and expense analysis to the Board at Board Meeting IV at least every three years, beginning 2019.

 5. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's reporting structure under the Sunshine Act. The staff liaison will compile all of their individual's forms, and share them with their chairperson and also the executive office staff, who will in turn, forward them to the Audit Committee for further review.

#### **<u>IJ. Fellowship Exam Committee (Teams A and B) Examination Assessment Committee</u></u>**

1. The Fellowship Exam Committee (Teams A and B) Examination Assessment

Committee shall be composed of twelve (12) six (6) members, at least one (1) of whom shall be a member of the Examinations Council, with each of the twelve (12) six (6) members having achieved Fellowship or Mastership status within the organization;

Those committee members who are not members of the Examinations Council shall serve no more than two (2) consecutive three- (3) year terms on the committee;

2. It shall be the duty of the committee:

- a. To construct, review, and score To review the preliminary and approve the final version of the Fellowship Examination;
- b. To make recommendations for an official passing score, based on the statistical analyses, for the annual Fellowship Examination to the Examinations Council To review all course materials for the Fellowship Review Course annually;
- c. To maintain an adequate pool of examination items that can be utilized for the Fellowship Examination.
- 3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board Policy Statements.
- 4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its programs and services annually as part of the budget process. Additionally, each Council and Committee shall provide a complete revenue and expense analysis to the Board at Board Meeting IV at least every three years, beginning 2019.
- 5. AGD staff will send out to each council, committee, or other agency member along with any member collaborating on any AGD business the Code of Conduct form to be completed by said individual at the beginning of each governance year. Each covered individual will submit to their staff liaison an accurately completed form, including particular attention paid to any companies that may have remunerated said covered individual and subsequently reported such remuneration to the federal government's reporting structure under the Sunshine Act. The staff liaison will compile all of their individual's forms, and share them with their chairperson and also the executive office staff, who will in turn, forward them to the Audit Committee for further review.
- And be it further,
- Resolved that all subsequent committee charges be renumbered appropriately in the Board Policy Manual.
  - And be it further,

Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance 1 2 Process, H. Division Coordinator Duties be amended to read: 3 4 5 6 **Continuing Education Division** 7 **Dental Education Council** 8 **Examinations** Council 9 Fellowship Exam Committee (Teams A and B) Examination Assessment Committee 10 Fellowship Exam Committee (Teams A and B) Examination Development Committee **Examinations Items Bank Committee (Team C)** Examination Materials Committee 11 12 **Local Advisory Committee PACE Council** 13 14 **Scientific Meeting Council Self Instruction Committee** 15 16 17 And be it further, 18 19 Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: V. Board 20 Policy Statements, Q. Sunset Review Process and Schedule be amended to read: 21 22 ... 23 24 **Sunset Review Process schedule** 25 26 2015-2016 27 **Credentials and Elections Committee** 28 **Examinations** Council 29 Fellowship Exam Committee (Teams A and B) Examination Assessment Committee 30 Fellowship Exam Committee (Teams A and B) Examination Development Committee 31 Examinations Items Bank Committee (Team C) Examination Materials Committee 32 33 And be it further, 34 Resolved, that HOD Policy 2017-101-H-11 be amended to read: 35 36 37 2017-101-H-11 "Resolved, that AGD HOD policy 2002:8-H-7 be revised as follows: 38 39 "Resolved, that the following system be used to guide the incoming President in making 40 council and committee appointments: 41 42 1. The incoming President will send a letter in April to all Constituent Presidents, 43 Regional Directors, and Trustees asking for council and committee appointment recommendations. The letter will be accompanied by a suggested geographical distribution 44 based on the number of members in each region to help make the appointments as 45 geographically balanced as possible. This geographical distribution list will be based on 46 47 the present council and committee structure, not including the Local Advisory Committees,

1	the Professional Relations Committee, and all Board Committees. Members of the
2	Examination Council shall not be counted a second time if also serving on Exam
3	Committee A, Exam Committee B, or Exam Committee C Examination Assessment
4	Committee, Examination Development Committee, and Examination Materials Committee.
5	The deadline for responding to this communication will be June 30 of each year.
6	The deadine for responding to this communication will be dulie 50 of each year.
7	And ha it funther
	And be it further,
8	
9	Resolved that the AGD Constitution and Bylaws be amended to read:
10	
11	CHAPTER XIII, Divisions, Councils and Committees
12	
13	Section 2. Each of the following councils and committees shall be assigned to the following
14	Divisions:
15	
16	
17	C. Continuing Education Division
18	C. Continuing Education Division
19	
	•••
20	
21	4. Examinations Council
22	
23	a. Examination Assessment Committee
24	
25	b. Examination Development Committee
26	
27	c. Examination Materials Committee
28	
29	bd. Self Instruction Committee
30	bu. Sen Histraction Committee
31	a. Examinations Item Bank Committee (Team C)
	a. Examinations Item Dank Committee (Team C)
32	
33	d. Fellowship Examination Committee (Teams A & B)"
34	
35	PASSED
36	
37	Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka,
38	Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm
39	
40	a – Edgar, Winland
41	A. Colorio Tillorgo
42 43	A - Gehrig, Tillman
43	N/A - Cordero
45	1911
	ACD and ACDE Contract Nagatistian Depart
46	AGD and AGDF Contract Negotiation Report

**AGD and AGDF Contract Negotiation Report** 

Dr. Cheney moved, Dr. Olsen seconded:

47

AGDF Contract Negotiation Report." **PASSED** 6 Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, 8 9 Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm A - Gehrig, Tillman N/A - Cordero Dr. Hanson moved, Dr. Stillwell seconded: "Resolved, that the Board come out of executive session at 9:47 a.m." **PASSED** Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm A - Gehrig, Tillman N/A - Cordero Dr. Lew moved, Dr. Dubowsky seconded: "Resolved, that the AGD believes in the continued existence of the AGD Foundation. And be it further, Resolved, that the AGD supports the AGD Foundation and its continued success." **PASSED** Y – Acheson, Cheney, Drumm, Dubowsky, Edgar, Gajjar, Gorman, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Worm a - Dyzenhaus, Guter, Wooden A - Gehrig, Tillman N/A - Cordero Dr. Edgar moved, Dr. Smith seconded: "Resolved, that the AGD Executive Committee and the Academy of General Dentistry Foundation (AGDF) Executive Committee renegotiate a new fair and equitable contract to promote the projects and mission of the AGDF, and report back to the AGD Board by 18-19 Board Meeting I."

"Resolved, that the Board go into executive session at 9:39 a.m. to discuss the AGD and

## PASSED

Y – Acheson, Cheney, Drumm, Dubowsky, Edgar, Gajjar, Gorman, Hanson, Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Uppal, White, Winland, Worm

a - Dyzenhaus, Guter, Stillwell, Wooden

A - Gehrig, Tillman

N/A - Cordero

# <u>AIRBIV2018#11 – Amend Election Guidelines & Bylaws to Eliminate Early Declaration of</u> Candidacy by EC Officers

Dr. Stillwell moved, Dr. Olsen seconded:

"Resolved, that AIRBIV2018#11 – Amend Election Guidelines & Bylaws to Eliminate Early Declaration of Candidacy by EC Officers be approved as amended."

"Resolved, that the Election Guidelines be amended, at Paragraph VIII (e), so that they read:

A candidate will formally declare his or her candidacy for the coming year's election to constituent officers, Regional Directors, members of the Board and council and committee chairs not earlier than the latter of the commencement of the AGD Board meeting III or January 1st of the year in which the election is held. Notwithstanding this section, all AGD officers are primarily subject to the provisions of the AGD Bylaws, Chapter IX, Section 1(B)4, which states "An AGD officer must declare for a new office within the thirty (30) days prior to-Board Meeting III, and resign his or her current office effective at the close of the annual meeting pursuant Chapter IX, Section 1, paragraph D. Once an AGD officer declares for a new office, said resignation is irrevocable." Such notice may contain biographical and issue oriented information on his or her candidacy. A candidate shall not announce or circulate petitions for signatures at the preceding annual meeting. Nothing in these guidelines, including the filing deadline for other candidates, shall prohibit a candidate who makes a valid declaration of candidacy from campaigning, subject to all provisions of these guidelines.

And be it further,

Resolved, that the Bylaws be amended at Chapter IX B (4), so that they read

An AGD officer must declare for a new office at least <u>not more than</u> <u>within the</u> thirty (30) days <u>before the start of prior</u> to Board Meeting III, and resign his or her current office effective at the close of the annual meeting, pursuant Chapter IX, Section 1, paragraph D. Once an AGD officer declares for a new office, said resignation is irrevocable."

#### **PASSED**

1 Y - Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gorman, Guter, Hanson, King, Kozelka, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm

N - Gajjar

a - Harunani, Lew, Winland

A - Gehrig, Tillman

N/A - Cordero

# <u>AIRBIV2018#12/AIRBIII2018#22 – Amend Bylaws to Provide Board with Veto Authority</u> over Presidential Appointments

"Resolved, that AIRBIV2018#12/AIRBIII2018#22 – Amend Bylaws to Provide Board with Veto Authority over Presidential Appointments be postponed until 2018-2019 Board Meeting II."

"Resolved, that the Bylaws be amended in the following locations so that they read:

#### Chapter IX, Section 2 A 4 a

To have the authority to appoint individuals to committees, task forces, work groups and other AGD agencies that are not listed in Chapter XIII, Sections 2 and 3 of these Bylaws, without ratification by the Board. Such appointments shall expire at the conclusion of the President's tenure, unless otherwise specified in the agency's charge as determined by the Board. When such an appointment extends beyond the tenure of the President, the Board may also, when creating the agency's charge, provide for its authority to approve or reject (requiring super majority of 2/3 vote) the president's specific appointment(s) until such time as the president provides the Board with a suitable selection.

#### Chapter XII, Section 10 Z

To approve all council and committee appointment recommendations to the council and committees that are listed in Chapter XIII, Section 2 and 3 of these Bylaws. The Board may approve or reject (requiring super majority of 2/3 vote) specific appointments made by the president-elect until such time as the president provides the Board with a suitable selection.

#### Chapter XIII, Section 1 A

The president-elect shall make, with the approval of the Board, council and committee appointments in accordance with Chapter IX, Section 2.A.4. of these Bylaws. The Board may approve or reject (requiring super majority of 2/3 vote) specific appointments made by the president-elect until such time as the president provides the Board with a suitable selection.

#### Chapter XIII, Section 1 D

Each president-elect shall designate, with approval of the Board, one particular council 1 2 member to serve as chairperson. 3 The Board may <del>approve or</del> reject (requiring super majority of 2/3 vote) specific 4 appointments made by the president-elect until such time as the president provides the 5 Board with a suitable selection. 6 7 Chapter XIII. Section 1 E 8 Each president-elect shall designate, with the approval of the Board, one individual who 9 shall serve as the Division Coordinator for each vacancy in the four council and committee 10 divisions. The Board may approve or reject (requiring super majority of 2/3 vote) specific 11 appointments made by the president-elect until such time as the president provides the Board with a suitable selection. The term of the Division Coordinator shall be two-years. 12 No Division Coordinator shall serve more than two successive terms and the appointment 13 14 of terms shall be staggered so that only two terms expire on any given year." 15 16 **PASSED** 17 18 Y-Dubowsky, Dyzenhaus, Gajjar, Gorman, Hanson, Harunani, Lew, Olsen, Uppal, White, Worm 19 20 N – Acheson, Drumm, Guter, King, Low, Shelly, Smith, Stillwell, Winland, Wooden 21 22 23 24 a - Cheney, Edgar A - Gehrig, Kozelka, Tillman 25 26 N/A - Cordero 27 28 AIRBIV2018#13 – Amend Bylaws to Reflect Authority of President-Elect to Make Council 29 and Committee Appointments 30 31 Dr. Hanson moved, Dr. Shelly seconded: 32 "Resolved, that AIRBIV2018#13 - Amend Bylaws to Reflect Authority of President-Elect 33 to Make Council and Committee Appointments be approved." 34 35 "Resolved, that the Bylaws be amended at Chapter IX, Section 2 A 8 so that the entire 36 sequence is stricken, so that it reads: 37 38 8. To appoint, subject to the final approval of the Board, members to serve on the AGD 39 councils and committees that are listed in Chapter XIII, Sections 2 and 3 of these Bylaws, 40 subject to the following stipulations: 41 42 To have the authority with regard to AGD councils to appoint only to those positions which have an expiration date at the annual meeting at which the president 43 44 assumes that office. 45

Council and committee appointments, that are listed in Chapter XIII, Sections 2 and 3 of

these Bylaws, are subject to approval by the Board. The Board may reject specific

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2	the Board with a suitable selection.
3	
4	And be it further,
5	
6	Resolved, that the Bylaws be amended at Chapter IX, Section 2 B, by the addition of a new
7	paragraph 9, so that it reads:
8	
9	9. To appoint, subject to the final approval of the Board, members to serve on the AGD
10	councils and committees that are listed in Chapter XIII, Sections 2 and 3 of these Bylaws,
11 12	subject to the following stipulations:
13	a. To have the authority with regard to AGD councils to appoint only to those
14	positions which have an expiration date at the annual meeting at which the president
15	assumes that office.
16	
17	Council and committee appointments, that are listed in Chapter XIII, Sections 2 and 3 of
18	these Bylaws, are subject to approval by the Board. The Board may reject specific
19	appointments made by the president-elect until such time as the president-elect provides
20	the Board with a suitable selection."
21	
22	PASSED
23	
24	Y – Acheson, Cheney, Drumm, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Lew, Low,
25 26	Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm
27	a - Dubowsky, Winland
28	
29 30	A - Gehrig, Kozelka, Tillman
31	N/A - Cordero
32	
33	Executive Session
34	
35	Dr. Drumm moved, Dr. Stillwell seconded:
36	"Resolved, that the Board go into Executive Session at 1:11 p.m. to discuss
37	AIRBIV2018#14/AIRBIII2018#03 – 2019 Weclew Award Recommendation.
38	
39	PASSED
40	
41	Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,
42 43	Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm
44	A - Gehrig, Kozelka, Tillman
45	
46	N/A - Cordero
47	Du Cutou moved Du Worm good 1-1-
48	Dr. Guter moved, Dr. Worm seconded:

appointments made by the president-elect until such time as the president-elect provides

1

2	
3	PASSED
4	
5	Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,
6	Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm
7	,,,,,,
8	A - Gehrig, Kozelka, Tillman
9	
10	N/A - Cordero
11	
12	During the executive session the following action was taken:
13	During the executive session the following action was taken.
	Dr. Warm mayad Dr. Dubayyalay gagandada
14	Dr. Worm moved, Dr. Dubowsky seconded:
15	"Resolved, that AIRBIV2018#14/AIRBIII2018#03 – 2019 Weclew Award Recommendation
16	be approved."
17	
18	"Resolved, that the 2019 Dr. Thaddeus V. Weclew Award be awarded to J. Steven Ratcliff,
19	DDS, MS."
20	
	D. COND
21	PASSED
22	
23	Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Guter, Hanson, Harunani, King, Lew, Low,
24	Olsen, Shelly, Stillwell, Uppal, Winland, White, Worm
25	
26	N – Smith, Wooden
27	
28	a - Gorman
29 30	A. Coloria Vozalka Tillman
31	A - Gehrig, Kozelka, Tillman
32	N/A - Cordero
	1971 Coracto
33	
34	I. Regional Director's Annual Report
35	The Regional Director's Constituent Activity and Individual Activity Reports were
36	discussed. A request was made for the chair of the Regional Directors and Constituent
37	Services staff to review the activity reports and discuss follow up actions with the RDs.
38	·
39	Dr. Drumm moved, Dr. Guter seconded:
	·
40	"Resolved, that the Regional Director's Annual Report be transmitted to the House of
41	Delegates."
42	
43	PASSED
44	
45	Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,
46	Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm
47	,,, , , , , , , , , , , , ,
48	A - Gehrig, Kozelka, Tillman
49	

"Resolved, that the Board come out of executive session at 1:16 p.m."

1	N/A - Cordero
2	
3	Scientific Meeting Council Annual Report
4	
5	Dr. Drumm moved, Dr. Hanson seconded:
5	"Resolved, that the Scientific Meeting Council Annual Report be transmitted to the House
7	of Dologotos "
3	of Delegates.
)	DACCED
	PASSED
) 2 3	Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm
	A - Gehrig, Kozelka, Tillman
5	N/A - Cordero
,	D. L. A. LE' C LD A
) )	Budget and Finance Committee Annual Report
)	D : C :: 24 1 D : C(211 11 1. 1.
	Dr. Smith moved, Dr. Stillwell seconded:
	"Resolved, that the Budget and Finance Committee Annual Report be approved as
	amended, and transmitted to the House of Delegates."
	PASSED
	Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gorman, Guter, Hanson, Harunani, King, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm
	a - Gajjar, Winland
	a - Gajjar, winiana
	A - Gehrig, Kozelka, Tillman
	N/A - Cordero
	AIRBIV2018#02 – Approve 2019 Budget
	Dr. Shelly moved, Dr. Smith seconded:
	"Resolved, that AIRIV2018#02 – Approve 2019 Budget be approved as amended."
	, , , , , , , , , , , , , , , , , , , ,
	"Resolved, that the 2019 Budget with Revenues of \$14,839,221 and Expenses of \$14,839,221
	netting out to 0 Net Loss from Operations with a Contingency of \$123,497 and capital
	budget of \$481,522 be approved. And be it further,
	The state of the s
	Resolved, that House Policy 2017:150S4-H-11 be rescinded.
	account to the state of the sta
	2017:150S4-H-11 "Resolved, that the 2018 budget with Net Income from Operations of \$0
	pre-spending and \$0 post-spending and a capital budget of \$89,500 be approved.
	pre spending and we post-spending and a capital budget of woo, soo be approved:
	112

1 And be it further, resolved, that the budget be amended to include a \$3 increase in student 2 dues and be it further resolved that the contingency fund be reduced by \$34,420. 3 4 **PASSED** 5 6 7 8 9 Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm A - Gehrig, Kozelka, Tillman 10 11 N/A - Cordero 12 13 **Board Zoom 10-2-18 Minutes** 14 15 AIR - Approval of PRC Recommended Positions on 2018 ADA Resolutions 16 17 Dr. Hanson moved, Dr. Guter seconded: 18 "Resolved, that AIR – Approval of PRC Recommended Positions on 2018 ADA Resolutions 19 be approved." 20 21 "Resolved, that the recommended positions of the Professional Relations Committee (PRC) to take on the ADA HOD resolutions as detailed in their report, PRC Recommendations on 22 23 2018 ADA HOD Resolutions, to the Board be approved, and be it further, 24 25 Resolved, that the PRC, in consultation with the AGD Presidents, be authorized to take 26 positions on amendments and new resolutions at the 2018 ADA HOD." 27 28 **PASSED** 29 30 Y – Acheson, Drumm, Dyzenhaus, Gajjar, Gehrig, Guter, Hanson, Harunani, King, Lew, Low, Olsen, Smith, White, 31 Winland, Wooden, Worm 32 33 34

a - Stillwell

35

36 37

38 39

A - Cheney, Dubowsky, Edgar, Gorman, Kozelka, Shelly, Tillman, Uppal

*N/A – Cordero* 



12 3 (Updated 10-22-18) 5 REGION 1 45 H. Michael Sefranek, DMD, MAGD 46 54 Highland Avenue 6 Connecticut, Maine, Massachusetts, 7 New Hampshire, Rhode Island, Vermont 47 Barrington, RI 02806-4700 8 Delegates 48 9 Eric J. Levine, DMD, FAGD 49 Joyce A. Hottenstein, DMD, FAGD 10 231 Farmington Avenue 50 71 Allen Street, Suite 301 11 Farmington, CT 06032-1915 51 Rutland, VT 05701-4544 12 52 13 Joseph A. Picone, DMD, MAGD 53 Alternates 14 954 S. Main Street 54 Stephanie A. Urillo, DDS, FAGD 15 Plantsville, CT 06479-1645 55 360 N. Main Street, Suite 15 56 Southington, CT 06489-2503 16 17 Michael A. Wernick, DMD 57 18 22 Seneca Drive 58 Rodney G. Sigua, DDS, MAGD 19 Vernon Rockville, CT 06066-4828 59 10 Commercial Street 20 60 Concord, NH 03301-5031 21 Kunio K. Chan, DMD, MAGD 61 62 Bettina D. Laidley, DMD, FAGD 22 655 Boston Road, Suite 3A 23 Billerica, MA 01821-5338 63 P.O. Box 157 24 64 420 Tamworth Road 25 William Lee, DDS 65 Tamworth, NH 03886-0157 66 26 383 Neponset Avenue 27 Dorchester, MA 02122-3104 67 REGION 2 28 68 New York 69 Delegates 29 Sarita B. Patel, DDS 30 57 Crescent Street 70 Karthilde Appolon, DDS 71 30 Buffalo Street 31 Northampton, MA 01060-3769 32 72 Floral Park, NY 11003-5015 33 Ofelia V. Villanueva, DMD 73 34 52 Greenleaf Street 74 Brian R. Ciporin, DDS, FAGD 75 8808 151<sup>st</sup> Avenue, Apt. 5K 35 Quincy, MA 02169-4411 36 76 Howard Beach, NY 11414-1445 37 Ronald G. Sawyer, DMD 77 78 Joseph DiDonato, DDS, FAGD, MBA 38 9 Waters Edge Drive 39 Yarmouth, ME 04096-6318 79 48 Menlo Place 40 80 Rochester, NY 14620-2718 81 41 Jean-Paul Rabbath, DMD, MAGD 42 17319 Pavaroso Street 82 Philip L. Epstein, DDS, FAGD 43 Boca Raton, FL 33496-3202 83 14 Apple Tree 44 84 Liverpool, NY 13090

1	Lorna G. Flamer-Caldera, DDS, FAGD	47	REGION 3
2	31 Washington Square W, Suite 1F	48	<u>Pennsylvania</u>
3	New York, NY 10011-9126	49	Delegates
4		50	Katherine S. Dangler, DDS, MAGD
5	James R. Keenan, DDS, MAGD	51	1500 12 <sup>th</sup> Avenue
6	2375 Ocean Avenue, Apt. 6H	52	Altoona, PA 16601-4812
7	Brooklyn, NY 11229-3563	53	
8	•	54	Ann L. Hunsicker-Morrisey, DMD, MAGD
9	Janice K. Pliszczak, DDS, MAGD	55	1213 Main Street
10	404 Gertrude Avenue	56	Hellertown, PA 18055-1320
11	Solvay, NY 13209-1518	57	
12		58	Raymond J. Johnson, DMD, FAGD
13	Seung-Hee Rhee, DDS, MAGD	59	101 Oak Street
14	5 E. 22 <sup>nd</sup> Street, #29A	60	Warren, PA 16365
15	New York, NY 10010-5331	61	
16		62	Richard D. Knowlton, DMD, MAGD
17	Shahram Shekib, DDS, FAGD	63	102 W. High Street
18	2178 63 <sup>rd</sup> Street	64	Elizabethtown, PA 17022-2019
19	Brooklyn, NY 11204-3058	65	
20		66	Leigh A. Jacopetti-Kondraski, DMD
21	Teresa Skalyo, DDS, FAGD	67	1073 Oak Street
22	418 Skuse Road	68	Pittston, PA 18640-3716
23	Geneva, NY 14456	69	
24		70	Michael K. Kaner, DMD, FAGD
	Berry Stahl, DMD	71	137 W Street Rd
26	4422 3 <sup>rd</sup> Avenue	72	Feasterville Trevose, PA 19053-4168
27	Mills Building	73	
	Bronx, NY 10457-2545		Kurt J. Laemmer, DMD, MAGD
29		75	197 Interstate Parkway
	Binod K. Verma, DDS, MAGD	76	Bradford, PA 16701-1013
31	5904 Junction Boulevard	77	
	Elmhurst, NY 11374		Hema R. Nair, DMD, MAGD
33			1102 Baltimore Pike, Suite 203
	Alternates		Glen Mills, PA 19342-1058
	Louis G. Bartimmo, DMD	81	
	535 Plandome Road	82	Alternates
37	Manhasset, NY 11030-1974	83	
38		84	Eric N. Shelly, DMD, MAGD
	Ira A. Levine, DDS, MAGD	85	403 N. 5 Points Road
40	111 N. Central Avenue, Suite 280	86	West Chester, PA 19380-4632
41	Hartsdale, NY 10530-1938	87	
42	D. 1. 1. D. 2. 2. 2.	88	
43	Robert Margolin, DDS, FAGD	89	
44	1 Fountain Lane, Apt. 3L		
45	Scarsdale, NY 10583-4656		
46			

1	REGION 4		Scott M. Dubowsky, DMD, FAGD
2	New Jersey	47	
3	Delegates		Bayonne, NJ 07002-3616
4	Boris Alvarez, DDS, FAGD	49	
5	20 Mount Vernon Square	50	Shari L. Hyder, DMD, MAGD
6	Verona, NJ 07044-2924	51	407 White Horse Pike
7		52	Oaklyn, NJ 08107-1451
8	Elizabeth A. Clemente, DDS, MAGD	53	
9	15 Milford Place	54	Muna N. Khan, DDS
10	Skillman, NJ 08558-2335	55	35 Beaverson Boulevard, Suite 2A
11		56	Brick, NJ 08723-7855
12	Murtuza Jaffari, DDS	57	
13	300 Lexington Road, Suite 220	58	Laura Sharbash, DDS
14	Swedesboro, NJ 08085-1278	59	3169 Park Avenue
15		60	South Plainfield, NJ 07080-5234
16	Narpat S. Jain, DMD, MAGD	61	
17	101 Piermont Road, Floor 2	62	REGION 5
18	Tenafly, NJ 07670-1023	63	Delaware, District of Columbia,
19	•	64	Maryland, Virginia
20	Arlene O'Brien, DMD	65	Delegates
21	10 Douglass Drive	66	Laura A. Dougherty, DDS
22	Princeton, NJ 08540-9510	67	
23	·	68	Wilmington, DE 19808-4084
24	George J. Schmidt, DMD, FAGD	69	2
25	197 Ridgedale Avenue, Suite 245	70	Sheila M. Samaddar, DDS
26	Cedar Knolls, NJ 07927-2107	71	1313 S. Capitol Street SW
27	,	72	South Capitol Smile Center
28	Jeffrey J. Urban, DMD	73	Washington, DC 20003-3526
29	1608 Route 88, Suite 111	74	2
30	Brick, NJ 08724-3009	75	Steven G. Feldman, DDS
31	,	76	15321 Carrolton Road
32	Asim R. Zaidi, DMD	77	Rockville, MD 20853-1702
	429 State Route 35	78	·
34	Red Bank, NJ 07701-5914	79	Gigi Meinecke, DMD, FAGD
35		80	10520 Macarthur Boulevard
36	Alternates	81	Potomac, MD 20854-3837
37	Jaafar T. Ali, DDS	82	
38		83	Eric L. Morse, DDS
39	Westfield, NJ 07090-3042	84	112 W. Ostend Street, Apt. B
40	,	85	Baltimore, MD 21230-3711
41	Joseph A. Battaglia, DMD, FAGD	86	,
42	516 Hamburg Turnpike, Suite 9	87	Charles A. Young, DDS, FAGD
43	Wayne, NJ 07470-2063	88	15 Malibu Court
44	-	89	Baltimore, MD 21204-2047
45		90	•

1 2 3 4 5	Bruce E. Yuille, DDS, MAGD 700 Geipe Road, Suite 270 St. Agnes Health Care Center Catonsville, MD 21228-4176	47 48 49	REGION 6 Kentucky, Missouri, Tennessee, West Virginia Delegates Darren S. Greenwell, DMD, MAGD
6 7 8	Mohamed H. Attia, DDS, MAGD 6420 Grovedale Drive, Suite 100A Alexandria, VA 22310-2599	51 52 53	169 E. Lincoln Trail Boulevard Radcliff, KY 40160-1253
9 10	Jenni C. Bobbio, DDS, FAGD	54 55	Richard J. Alvarez, DDS, FAGD 183 Royal Dornoch Drive
11 12 13	42206 Bunker Woods Place Ashburn, VA 20148-6434	56 57 58	Branson, MO 65616 Philip Batson, DDS
14 15	Greggory Bowles, DDS, MAGD 1225 Kempsville Road, #64398	59 60	1
16 17	Virginia Beach, VA 23467-1218	61 62	Columbia, MO 65202-3754
18 19	Stuart A. Broth, DDS, MAGD 3400 Wicklow Lane	63 64	Dennis Nguyen, DDS 1923 Rex Avenue, Apt. 61
<ul><li>20</li><li>21</li><li>22</li></ul>	Richmond, VA 23236-1328  Jeena E. Devasia, DDS	65 66 67	Joplin, MO 64801-5980 Jian Huang, DDS, BMS, MAGD
23 24 25	6455 Old Chesterbrook Road McLean, VA 22101-4741	68 69 70	2810 Bransford Avenue, Suite B Nashville, TN 37204-3102
26 27 28	Bradley D. Hammitt, DDS 911 Manchester Court Charlottesville, VA 22901-1756	71 72 73	Keith D. Gilmore, DDS, MAGD 493 Henslee Drive Dickson, TN 37055-2166
	Christine D. Howell, DDS 102 Western Avenue Suffolk, VA 23434-4434	74 75 76 77	Gary R. Woodall, DDS, MAGD 161 Capital Drive, Suite 201 Knoxville, TN 37922-3581
33 34 35 36 37	Alternates Michael D. Matthias, DMD, MAGD 3801 Kennett Pike, Suite E207 Wilmington, DE 19807-2340	78 79 80 81 82	Steven A. Ghareeb, DDS, FAGD 1203 Jefferson Road South Charleston, WV 25309-9732
38 39 40 41	James K. Feldman, DDS 4707 Connecticut Avenue NW, Apt. 108 Washington, DC 20008-5619	83 84 85 86	Alternates  Geoffrey S. Ball, DMD, MAGD  2105 Crossfield Drive  Elizabethtown, KY 42701 7831
42 43 44 45	Angela D. Marwaha, DMD 6318 Stoneham Lane McLean, VA 22101-2345	87 88 89 90	Todd T. Cochran, DMD, FAGD 5520 Sonora Road Hodgenville, KY 42748

1	Richard B. Alvarez, DDS	46	Mehrdad Safavian, DDS
2	14303 State Highway 38	47	65 E. State Street, Suite E
3	Marshfield, MO 65706-8952	48	Columbus, OH 43215-4259
4		49	
5	Anthony S. Carroccia, DDS, MAGD,	50	David W. Schlosser, DDS, MAGD
6	ABGD	51	3506 Darrow Road
7	2088 Lowes Drive, Suite C	52	Stow, OH 44224-4009
8	St. Bethlehem Dental Care	53	•
9	Clarksville, TN 37040-1635	54	Tyler L. Scott, DDS
10			633 N. Union Street
11	Anthony A. Martin, DMD, MAGD	56	Loudonville, OH 44842-1074
12	440 Cherokee Boulevard	57	,
13	Knoxville, TN 37919	58	Alternates
14	,	59	Michael A. Gordon, DDS, MAGD
15	Sami M. Ghareeb, DDS, MAGD		829 Main Street
16	P.O. Box 566	61	Schererville, IN 46375-1100
17	178 Main Street	62	,
18	Poca, WV 25159-0566		Hans P. Guter, DDS, FAGD
19	2 000, 11 1 20 20 00 00	64	598 Northridge Road
20	Bruce L. Cassis, DDS, MAGD	65	Circleville, OH 43113-1150
21	P.O. Box 926	66	011010, 011 10110 1100
22	Fayetteville, WV 25840-0926	67	REGION 8
23	1 ayette (Me, 11 + 250 10 0)20	68	Illinois
24	REGION 7		
25	Indiana, Ohio		Spencer R. Bloom, DDS
26	Delegates	71	5530 W. Montrose Avenue
27		72	Chicago, IL 60641-1330
28	3415 S. Lafountain Street, Suite C	73	Cincago, 12 000 11 1550
29	•		Dawood Harunani, DDS, MAGD
30	1101101110, 11 10,002 2020	75	301 W. Washington Street
31	James M. Lindsey, DDS, FAGD	76	Oregon, IL 61061-1621
	2516 Locust Lane	77	Gregori, 12 01001 1021
	Kokomo, IN 46902-2954	78	William M. Lawley, DDS, MAGD
34	Kokomo, HV 10902 2931	79	10704 31 <sup>st</sup> Street
35	Thomas J. Steckbeck, DDS, FAGD	80	Westchester, IL 60154-5111
36	8007 S. Meridian Street, Suite 4	81	Westenester, 112 0013   3111
37	Indianapolis, IN 46217-2901	82	Charles F. Martello, DDS, MAGD
38	meranapons, nv 40217 2701	83	106 W. Nebraska Street, #635
39	David G. Austin, DDS	84	Frankfort, IL 60423-1420
40	3600 Olentangy River Road, Suite B1	85	1 tankfort, 12 00-23 1-20
41	Columbus, OH 43214-3468	86	Brenden D. Moon, DMD, FAGD
42	Columbus, O11 +321+ 3+00	87	4529 Brandywine Lane
43	William G. Leffler, DDS, FAGD	88	Quincy, IL 62305-9047
44	2300 Wales Avenue NW, Suite 205	00	Quincy, IL 02303-3047
45	Massillon, OH 44646-2323		
ŦJ	1v1ass111011, O11 ++0+0-2323		

1	Cheryl L. Mora, DDS, MAGD	45	George R. Zehak, DDS, MAGD
2	888 Creek Bend Drive	46	6731 26 <sup>th</sup> Street
3	Vernon Hills, IL 60061-3301	47	Berwyn, IL 60402-2590
4		48	
5	Ryan R. Vahdani, DDS, FAGD	49	REGION 9
6	3450 Lacey Road	50	Michigan, Wisconsin
7	Downers Grove, IL 60515-5430	51	Delegates
8		52	Anthony R. Bielkie, DDS, FAGD
9	Seymour Wachtenheim, DDS, MAGD	53	<mark>51725 Van Dyke Avenue</mark>
10	7031 W. Touhy Avenue, Apt. 306	54	Shelby Township, MI 48316 4451
11	Niles, IL 60714-4394	55	
12		56	Jessica J. Brisbois, DDS
13	Larry N. Williams, DDS, MAGD, ABGD	57	20916 Meadowlark Street
14	4934 Lunt Avenue	58	Farmington, MI 48336-5058
15	Skokie, IL 60077-3538	59	
16		60	Dennis G. Charnesky, DDS, MAGD
17	Alternates	61	4101 John R. Road, Suite 100
	Randal P. Ashton, DDS	62	Troy, MI 48085-3647
19	517 W. Fairchild Street	63	
20	Danville, IL 61832-3801	64	<b>3</b> /
21		65	7305 Huron Avenue
22	Susan Bordenave-Bishop, DMD, MAGD	66	P.O. Box 700
23	7314 N. Edgewild Drive	67	Lexington, MI 48450-8325
24	Peoria, IL 61614-2114	68	Nahid A Washari DDC
25	Deheat C Verelles DDC MACD	69 70	Nahid A. Kashani, DDS
26	Robert S. Kozelka, DDS, MAGD	70	17129 Tall Pines Court
27 28	101 S. Washington Avenue Suite 124	71 72	Northville, MI 48168-1883
29	Park Ridge, IL 60068-4258	73	J. Michael Owen, DDS, FAGD
30	Theresa B. Lao, DDS, FAGD	74	42430 W. 12 Mile Road
31	3450 Lacey Road, Room 407	75	Novi, MI 48377-3028
	Downers Grove, IL 60515-5430	76	140VI, WII 40377-3020
33	Downers Grove, IL 00313 3130	77	Samer G. Shamoon, DDS, MAGD
34	Jaclyn P. MacDonald, DMD	78	600 Eleven Mile Road
35	1700 W. Bluebonnet Drive, #15103	79	Berkley, MI 48072-3027
36	<del>Peoria, IL 61615</del>	80	,,
37		81	David A. Susko, DDS
38	Daniel D. Pagel, DMD	82	20737 E. 13 Mile Road
39	150 Forest Avenue, #2001	83	Roseville, MI 48066-4503
40	Oak Park, IL 60301	84	•
41		85	Edwin T. Batchelor, DDS, FAGD
42	Brian M. Weinberg, DMD	86	2602 Crest Line Drive
43	3355 N. Kedzie Avenue	87	Madison, WI 53704-2836
44	Chicago, IL 60618		

1	Louis C. Boryc, DDS, FAGD	47	Mark R. Bain, DDS
2	S76W18538 Kingston Drive	48	1416 18 <sup>th</sup> Avenue NE
3	Muskego, WI 53150-9276	49	Aberdeen, SD 57401-1516
4		50	
5	Virginia G. Scott, DDS, MAGD	51	Alternate
6	W7347 Polinske Road	52	Bradley J. Anderson, DDS, FAGD
7	Portage, WI 53901-9151	53	·
8		54	Fargo, ND 58104-8507
9	Alternates	55	
	Fares M. Elias, DDS, FAGD	56	REGION 11
11	5353 Woodview Drive	57	Alaska, Idaho, Montana, Oregon,
12	Bloomfield Hills, MI 48302-2571	58	Washington
13	2100mmeta 11mm, 1411 10202 2271	59	
14	John V. Machi, DDS	60	9
15	290 Ohio Street	61	_
16		62	
17	Oshkosh, W1 34702	63	Allehorage, AK 77303
18	REGION 10	64	Russell R. Jensen, DMD
19		65	3270 N. Maple Grove Road
	Iowa, Minnesota, Nebraska, North		Boise, ID 83704 4214
20	Dakota, South Dakota	66 67	<del>DOISE, ID - 03/04-4214</del>
21	Delegates  Reherts A Marone DDS MACD		Loclic A. Heyes, DDC MACD
	Roberto A. Moreno, DDS, MAGD		Leslie A. Hayes, DDS, MAGD
23	201 W. 16 <sup>th</sup> Street	69	1125 W. Kagy Boulevard, Suite 300
24	West Liberty, IA 52776-1064	70	Bozeman, MT 59715-5879
25	D W D' DDG MACD	71	
26	Dona W. Prince, DDS, MAGD	72	
27	4220 Sergeant Road, Suite 100	73	
28	Sioux City, IA 51106-4648		6201 SE Harmony Road
29		75	Milwaukie, OR 97222
30	Daniel T. Johnson, Jr., DDS, FAGD	76	
31	1757 Saunders Avenue		Howard E. Hilman, DMD
32	Saint Paul, MN 55116-2432		1240 SE 122 <sup>nd</sup> Avenue
33		79	Portland, OR 97233-1202
34	John J. Keller, DDS, MAGD	80	
35	552 E. Main Street	81	<mark>Martha E. Rich, DMD, FAGD</mark>
36	Anoka, MN 55303-2529	82	833 SW 11 <sup>th</sup> Avenue, Suite 405
37		83	Portland, OR 97205-2118
38	Matthew R. Serbousek, DMD	84	
39	368 N. Webb Road, Suite 1	85	Ravi S. Sinha, DDS
40	Grand Island, NE 68803	86	1238 SE 122 <sup>nd</sup> Avenue
41		87	Portland, OR 97233-1202
42	Colleen J. Hofer, DDS, MAGD		
43	P.O. Box 250		
44	111 1 <sup>st</sup> Street West		
45	Velva, ND 58790-0250		
46			

1	Kimberly R. Wright, DMD, MAGD		Gary E. Heyamoto, DDS, MAGD
2	1554 Garden Street	48	15657 NE 190 <sup>th</sup> Street
3	P.O. Box 589	49	Woodinville, WA 98072
4	West Linn, OR 97068-3278	50	
5		51	REGION 12
6	Puneet S. Aulakh, DDS, MAGD	52	Arkansas, Kansas, Louisiana, Mississippi
7	1808 Richards Road, Suite 101	53	Oklahoma
8	Bellevue, WA 98005-3982	54	<b>Delegates</b>
9		55	John Pardo, DDS
10	Teresa K. Kang, DDS	56	17585 E. Wyman Road
	12332 120 <sup>th</sup> Avenue NE	57	Fayetteville, AR 72701-9561
12	Kirkland, WA 98034-6926	58	•
13	,	59	Mark H. Armfield, DDS
	Theron A. Manson, DDS, FAGD	60	2814 Ohio Street
	9750 NE 120 <sup>th</sup> Place, Suite 8	61	Augusta, KS 67010-2361
	Kirkland, WA 98034-4207	62	
17	,	63	Kristopher P. Rappold, DDS, MAGD
	Dzon M. Nguyen, DDS, MAGD	64	1721 Peniston Street
	1421 NW 85 <sup>th</sup> Street		New Orleans, LA 70115-4630
20		66	
21		67	Jeffrey R. Richardson, DDS
	Carl W. Youngquist, DDS, MAGD		4913 Elmwood Parkway
	1911 19 <sup>th</sup> Street SE	69	Metairie, LA 70003-2628
	Puyallup, WA 98372-7123	70	
25	- wysics <sub>F</sub> , , co.,	71	Steven M. Porter, DDS
	Alternates		301 Plantation Drive
	Matthew J. West, DMD, FAGD	73	Columbus, MS 39705-1126
	10467 Fox Farm Trail	74	2010/11/20 27/02 11/20
	Juneau, AK 99801-8548		Erin M. Sexson, DDS
30	0.000, 1.112	76	1113 Huntington Avenue
31	Timothy M. Lawhorn, DDS, FAGD	77	Oklahoma City, OK 73116-6212
	16111 Rocky Mountain Road, Suite E	78	3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	Belgrade, MT 59714-8037		Alternates
34	Beigrade, Mil by Mil 6057	80	Carl S. Plyler, DDS, FAGD
35	Stefanie Beckley, DMD	81	119 Elm
36	4813 Parkview Drive, Apt. G	82	P.O. Box 4
37	Lake Oswego, OR 97035-4461	83	Glenwood, AR 71943-9213
38	Earce of wego, or 77000 1101	84	Gienwood, 111 / 15/15/215
39	Linda J. Edgar, DDS, MAGD	85	K. David Stillwell, DDS, MAGD
40	220 SW 292 <sup>nd</sup> Street	86	108 Marseille Drive
41	Federal Way, WA 98023-3502	87	Maumelle, AR 72113-7246
42	1 5 doi di 11 di 11 11 1 1 1 1 1 1 1 1 1 1 1 1	88	Transitiono, Fite 72113-7240
43	Timothy A. Hess, DDS, MAGD	89	David A. Bowman, DDS
44	1314 8 <sup>th</sup> Street NE, Suite 101	90	713 Main Street
45	Auburn, WA 98002-5748	91	Seneca, KS 66538-1931
46	11404111, 1111 70002-31TO	71	50nccu, 1x5 00550-1751
TU			

1	John W. Portwood, Jr., DDS, MAGD	43	Ricardo A. Suarez, DDS, FAGD
2	9069 Siegen Lane	44	15732 Mar Vista Street
3	Baton Rouge, LA 70810-1951	45	Whittier, CA 90605-1325
4	-	46	
5	Frank L. Conaway, DMD, MAGD	47	James H. Thompson, DMD, FAGD
6	292 Hancock Square Drive	48	7424 Jackson Drive, Suite 3
7	Bay Saint Louis, MS 39520-1634	49	San Diego, CA 92119-2324
8	,	50	<i>C</i> /
9	REGION 13	51	Chirag Vaid, DDS
10	California	52	4130 Saint Andrews Drive
	Delegates	53	Stockton, CA 95219-1865
	Samer S. Alassaad, DDS, FAGD	54	
	4204 Vistosa Street	55	Eric Wong, DDS, MAGD
	Davis, CA 95618-7120		P.O. Box 22417
15	, ,	57	Sacramento, CA 95822-0417
	Myron J. Bromberg, DDS	58	~ · · · · · · · · · · · · · · · · · · ·
17	7012 Reseda Boulevard, Suite G		Alternates
18	Reseda, CA 91335-4281		Guy E. Acheson, DDS, MAGD
19	1000000, 011 91000 1201	61	American River Dental Center
	Chethan Chetty, DDS, FAGD	62	10350 Coloma Road
21	2231 Swiftwater Way	63	Rancho Cordova, CA 95670
22	•	64	Tuneno Coruo va, err 30070
23	Glendoru, err 71711 1000	65	Howard H. Chi, DMD, MAGD
	Cheryl D. Goldasich, DDS, FAGD	66	6529 Inglewood Avenue, Suite B1
25	3610 Lomita Boulevard, Suite 203	67	Stockton, CA 95207-3864
26		68	Stockton, 611 75207 5001
27	101141100, 011 70000 5717	69	REGION 14
	Kirk M. Hobock, DDS, MAGD	70	Arizona, Colorado, Hawaii, Nevada, New
29	32382 del Obispo Street, Suite C2	71	Mexico, Utah, Wyoming
30	San Juan Capistrano, CA 92675-4029		Delegates
31	San Guar Capistrano, Cri 72075 1027		Mai-Ly Duong, DMD, FAGD
	Erika Kullberg, DMD		859 N. Harmony Avenue
33	4944 Cass Street, Unit 801		Gilbert, AZ 85234-8020
	San Diego, CA 92109-2043	76	Girecti, 112 0020 1 0020
35	244 21080, 011 /210/ 2010		Dana E. Onet, DDS
	Anita Rathee, DDS, FAGD		8868 W. Bell Road, #362
37		79	Peoria, AZ 85382-4931
38	West Hills, CA 91307-2037	80	100114, 112 03302 1731
39	West Hins, CH 71307 2037	81	Onika R. Patel, DMD, FAGD
	Harriet F. Seldin, DMD	82	11981 E. Becker Lane
11	3737 Moraga Avenue, Suite B113	83	Scottsdale, AZ 85259-4142
12	San Diego, CA 92117-5356	84	500000000, 112 05257 T1T2
	Juli 21050, CII 72111 3300	85	Dennis L. Burgner, DDS, MAGD
		86	P.O. Box 988
			Parker, CO 80134-0988
		0,	1

1	Sheila N. O'Grady-Stille, DMD, MAGD	45	Elio F. Filice, DDS, MAGD
2	5307 S. Havana Court	46	1685 Main Street W, Unit 1-B
3	Englewood, CO 80111-3815	47	Hamilton, ON L8S 1G5
4	_	48	
5	Sandra Montes, DDS	49	Frank C. Infusini, DDS, FAGD
6	3215 Rio Madre Court SW	50	3200 Dufferin Street, Unit 15B
7	Albuquerque, NM 87121-9344	51	Toronto, ON M6A 3B2
8		52	
9	Summer Kleidosty, DMD	53	Kirandip K. Johal, DDS
10	P.O. Box 17893	54	84 Nova Scotia Road
11	Reno, NV 89511-1033	55	Brampton, ON L6Y 5K1
12		56	
13	Jason Eaton, DDS, MAGD	57	Antonio Mancuso, DDS, MAGD
14	680 Liston Circle	58	547 Thorold Road, Unit 2
15	Kaysville, UT 84037-1562	59	Welland, ON L3C 3W9
16		60	
17	Michael R. Keim, DDS, MAGD	61	Sarah A. Mancuso, DDS
18	1749 S. Boxelder Street	62	547 Thorold Road, Unit 2
19	Casper, WY 82604-3538	63	Welland, ON L3C 3W9
20		64	
21	Alternates	65	Gulam Walji, DDS
22	Charles D. Tatlock, DDS, MAGD	66	21 Heathmore Court
23	405 Tulane Drive SE	67	Markham, ON L3R 8J2
24	Albuquerque, NM 87106-1417	68	
25		69	Faraj Hanna Alkass, DMD
26	Jennifer E. McClanahan, DMD	70	3535 Queen-Mary, #218
27	2815 Show Jumper Lane	71	Montreal, QC H3V 1H8
28	Reno, NV 89521	72	
29		73	Alternates
30	<b>REGION 15-16</b>	74	Kulwant S. Turna, DDS
31	Alberta, Atlantic Provinces, British	75	110 Pertosa Drive, Unit 1
32	Columbia, Ontario, Quebec		Brampton, ON L6X 5E9
	Delegates	77	
	Jennifer T. Nguyen, DDS	78	Bashar Shagoury, DDS, MAGD
35	912 Goshawk Point NW	79	1100 Beaumont Avenue, Suite 404
36	Edmonton, AB T5S 0H6	80	Mont-Royal, QC H3P 3H5
37		81	
38	Lary F. Trites, DDS	82	REGION 17
39	6 Allison Avenue	83	Air Force, Army, Navy, Public Health,
40	Sackville, NB E4L 3L9	84	<b>Veterans Administration</b>
41		85	Delegates
42	Joseph A. Belsito, DDS, FAGD	86	John A. Safar, DDS, MAGD, ABGD
43	2095 Wyandotte Street W	87	12346 Magnolia Spring
44	Windsor, ON N9B 1J8	88	San Antonio, TX 78253-6381

1	Dragos Stefan-Dogar, DDS, FAGD, ABGD	46	Melissa Tucker, DDS, FAGD
2	1301 Shamrock Court	47	1337 NW Still Water Trail
3	Warrensburg, MO 64093	48	Lawton, OK 73507-5053
4		49	
5	Jarom Hansen, DMD	50	Justin L. Rogers, DMD, FAGD
6	117 Sycamore Way	51	13513 Moonlight Trail Drive
7	Fort Knox, KY 40121	52	Silver Spring, MD 20906-6701
8		53	
9	John Clay Hastings, DMD	54	REGION 18
10	401 Quaker Meadows Court	55	<u>Texas</u>
11	Holly Springs, NC 27540	56	<b>Delegates</b>
12		57	Dean N. Armstrong, DDS, MAGD
13	Alain Ouellet, DMD, FAGD, ABGD	58	3512 Farwell Drive
14	50 Rue Des Migrateurs	59	Amarillo, TX 79109-4038
15	Gatineau, QC J9A 2X7	60	
16		61	Douglas W. Bogan, DDS, FAGD
17	Jared A. Geller, DMD, FAGD	62	791 Town and Country Boulevard
18	401 Grandin Avenue	63	Suite 222
19	Rockville, MD 20850-4142	64	Houston, TX 77024-3978
20		65	
21	Doris K. Lam, DDS, FAGD	66	Jennifer J. Bone, DDS, MAGD
22	400 Russell Avenue	67	710 Hill Country Drive, Suite 1
23	Building 41 - Dental Clinic	68	Kerrville, TX 78028-6168
24	Belle Chasse, LA 70143	69	
25		70	Ben A. Bratcher, DDS, MAGD
26	Thu N. Luu, DMD, FAGD, ABGD	71	240 E. Highway 243
27	13513 Moonlight Trail Drive	72	Canton, TX 75103-2315
28	Silver Spring, MD 20906-6701	73	
29	-	74	Ralph A. Cooley, DDS, FAGD
30	Li-Kuei G. Hung, DDS, FAGD	75	7500 Cambridge Street, Suite 5330
31	218 239 <sup>th</sup> Way SE	76	UT Health School of Dentistry
32	Sammamish, WA 98074-3685	77	Houston, TX 77054-2032
33		78	
34	Juan A. Villafane-Hernandez, DMD	79	Brooke Elmore, DDS, FAGD
35	6002 Auburndale Avenue, Unit B	80	713 Chatham Road
36	Dallas, TX 75205	81	Belton, TX 76513-6707
37		82	
38	Alternates	83	Jeffrey B. Geno, DDS, MAGD
39	David L. Mapes, DDS	84	6011 W. Main Street. Suite A101
40	106 Honeycomb Drive, Unit C	85	League City, TX 77573-6953
41	Boerne, TX 78006	86	
42		87	Alex Gonzalez, DDS, MAGD
43	Demarcio L. Reed, DMD, FAGD	88	10965 Ben Crenshaw Drive
44	100 First Street, Apt. 117	89	Building 4B
45	Rockville, MD 20851	90	El Paso, TX 79935-3021

1 2 3	Melissa Lent Brown, DDS, FAGD 5422 Judalon Lane Houston, TX 77056-7225	44	REGION 19 <u>Alabama, Georgia, North Carolina, South</u> Carolina
4	,		Delegates Delegates
5	Hanna E. Lindskog, DDS, FAGD	47	9
6	1120 W. Temple Street	48	241 S. 4 <sup>th</sup> Street
7	Houston, TX 77009-5240	49	Gadsden, AL 35901-4213
8		50	
9	Anne C. Lyon, DDS, FAGD	51	Derrick D. Mendez, DMD
10	7002 Manchaca Road	52	146 County Road 80
11	Austin, TX 78745-5352	53	Clanton, AL 35045-8041
12		54	
13	Christina Meiners, DDS	55	Gary L. Myers, DMD, MAGD
14	140 Merry Trail	56	531 Creekview Circle
15	San Antonio, TX 78232-1329	57	Birmingham, AL 35226-3417
16		58	
17	Bryan T. Moore, DDS	59	John P. Gale, DMD
18	800 Timberwood Lane	60	3380 Old Jefferson Road
19	Fairview, TX 75069-9181	61	Athens, GA 30607-1480
20		62	
21	Sarah Tovar, DDS, FAGD	63	Kenneth A. Gilbert, DDS, FAGD
22	23526 Edens Canyon	64	1275 McConnell Drive, Suite G
23	San Antonio, TX 78255	65	Decatur, GA 30033-3505
24		66	
25	Marc J. Worob, DDS, FAGD	67	Ricky Lane, DDS, MAGD
26	11623 Angus Road, Suite 16	68	1066 Bermuda Run
27	Austin, TX 78759-4041	69	Statesboro, GA 30458-0858
28		70	
29	Alternates	71	Amit P. Patel, DMD
	Dan P. McCauley, DDS, FAGD	72	1874 Chamdun Place
	1603 N. Jefferson Avenue	73	Atlanta, GA 30341-1767
	Mount Pleasant, TX 75455-2329	74	
33			Erin H. Pickwick, DMD
	Akshay Thusu, DDS	76	2023 Georgia Highway 20, Suite 203
35	5919 Seneca Drive	77	Grayson, GA 30017
36	San Antonio, TX 78238-2344	78	
37		79	M. Usman Sajid, DDS
	David M. Tillman, DDS, MAGD	80	3301 Vintage Circle SE
	747 8 <sup>th</sup> Avenue, Suite C	81	Smyrna, GA 30080-4596
40	Ft. Worth, TX 76104-2503	82	
41		83	Woodson B. Bolinger, DDS, FAGD
42		84	101 N. Main Street
		85	Weaverville, NC 28787-8444

1	Tracy D. Johnson, DDS	46	Suvidha Sachdeva, DDS
2	Dowd Family Dentistry	47	470 Wembley Circle
3	309 McArthur Road	48	Sandy Springs, GA 30328-6754
4	Fayetteville, NC 28311-6921	49	
5	•	50	Jennifer S. Bell, DDS, FAGD
6	Cammie T. Morris, DDS	51	
7	126 SE 3 <sup>rd</sup> Street	52	Holly Springs, NC 27540-3793
8	Oak Island, NC 28465-6701	53	
9	,		W. Carter Brown, DMD, FAGD
10	Alex P. Pence, DDS, FAGD	55	1422 S. Jetties Court
11	46 Buckhorn Gap Road	56	Mount Pleasant, SC 29466-7993
12	Candler, NC 28715	57	,
13	- · · · · · · · · · · · · · · · · · · ·		Scott R. Cayouette, DMD, FAGD
14	Theodore M. Roberson, II	59	1040 Savannah Highway
15	340 Dabney Drive	60	Charleston, SC 29407-7804
16	Henderson, NC 27536-4036	61	,
17		62	Christopher T. Griffin, DMD, FAGD
18	Callan D. White, DDS	63	150 Cambridge Avenue W
19	1011 Tunnel Road, Suite 140	64	Greenwood, SC 29646-2234
20		65	,
21	,		REGION 20
22	William A. Burn, DMD, MAGD		Florida, Puerto Rico
23	P.O. Box 2117		Delegates
24	Irmo, SC 29063-7117	69	
25	,	70	450 Errol Parkway
26	Rocky L. Napier, DMD	71	Apopka, FL 32712-2627
27	143 Trafalgar Street SW	72	1 1 /
28	Aiken, SC 29801-3760	73	Harvey P. Gordon, DDS, MAGD
29	,	74	4949 SW 33 <sup>rd</sup> Way
30	Ronald S. Wilson, DMD	75	Fort Lauderdale, FL 33312-7927
31	140 Mall Connector Road	76	
32	Greenville, SC 29607-3582	77	Toni-Anne Gordon, DMD
33		78	11250 Point Sylvan Circle, Apt. H
34	Alternates	79	Orlando, FL 32825
35	William E. Chesser, DMD, MAGD	80	
36	5002 Woodland Forrest Drive	81	Laurence A. Grayhills, DMD, MAGD
37	Tuscaloosa, AL 35405	82	250 Professional Way
38		83	Wellington, FL 33414-6391
39	Kim E. Stiegler, DMD, MAGD	84	<b>G</b> ,
40	1151 Hillcrest Road, Suite A	85	Naresh A. Kalra, DDS
41	Mobile, AL 36695-3907	86	3306 W. Kennedy Boulevard
42		87	Tampa, FL 33609-2904
43	Phillip H. Durden, DMD, MAGD		-
44	104 Moores Grove Road		
45	Winterville, GA 30683-1506		

1	Andrew P. Martin, DMD, MAGD	37	Linda G. Trotter, DMD, FAGD
2	11626 SW 6 <sup>th</sup> Lane	38	4247 Stacey Road E
3	Gainesville, FL 32607-1139	39	Jacksonville, FL 32250-2100
4		40	
5	Douglas L. Massingill, DDS, MAGD,	41	Student Delegates
6	ABGD	42	Ms. Hannah W. Benn
7	104 Overoaks Place	43	3 Sherman Avenue
8	Sanford, FL 32771-7118	44	Summit, NJ 07901-1926
9		45	
10	Ray A. Morse, DMD, MAGD	46	Mr. Kevin S. Lin
11		47	4722 S. Balveine Place
12	Panama City, FL 32405-4905	48	Salt Lake City, UT 84107-1474
13	•	49	•
14	Merlin P. Ohmer, DDS, MAGD	50	Student Alternates
15	1126 1st Street N, #201	51	Ms. Diana Huynh
16	Jacksonville Beach, FL 32250	52	3316 40 <sup>th</sup> Street
17		53	Metairie, LA 70001
18	Bipin J. Sheth, DDS, MAGD	54	
19	5239 Coconut Creek Parkway	55	Mr. Trent E. Finley
20	Margate, FL 33063-3964	56	4702 N. Flintridge Road
21	_	57	Kansas City, MO 64150-1154
22	Aldo L. Miranda-Collazo, DMD	58	•
23	Hyde Park	59	
24	249 Calle Las Marias		
25	San Juan, PR 00927-4224		
26			
27	Alternates		
28	Tomas J. Ballesteros, III, DMD, MAGD		
29	P.O. Box 121187		
30	Clermont, FL 34712-1187		
31			
32	Robert D. Gehrig, DMD, FAGD		
33	2902 Serenity Circle S Ste B		
34	Fort Pierce, FL 34981-5055		
35			
36			